



The University of Texas at Dallas

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AGENDA

2018 SACSCOC Institutional Effectiveness Committee Meeting

May 19, 2016

Undergraduate Education Conference Room, FO 2.706

1. Call to Order and Approval of Minutes Serenity King

2. Announcements Serenity King
 - A. Department of Education Letter
 - B. Introduction of new members
 1. Iolani (Lani) Connolly
 2. Sharon Etheredge
 3. Su Chuan (Rita) He
 - C. Summer Schedule

3. Committee Work / Expectations Serenity King
 - A. Updated Interactive Web Links for Assigned Principles
 - B. CS 3.3.1.4 Research within its Mission, if appropriate
 - C. Committee Assignments

4. Office of Strategic Planning & Analysis Presentation Lawrence J. Redlinger
and staff

5. Assessment Presentation Gloria Shenoy and
Michael Carriaga
 - A. List of Administrative Support Units
 - B. Template of Nonacademic Assessment - Short Version
 - C. Nonacademic Assessment Instructions

6. UT Dallas Strategic Plan and Mission Serenity King
 - A. <http://www.utdallas.edu/strategicplan/>
 - B. <http://www.utdallas.edu/about/>

7. Adjournment Serenity King

ITEM 1

April 20, 2016 Meeting Minutes

2018 SACSCOC Institutional Effectiveness Committee Meeting Minutes

Wednesday, April 20, 2016 10:00 – 11:00AM
JSOM 2.804

I. Attendees:

Serenity Rose King (chair), Lawrence J. Redlinger (vice-chair), Kutsal Dogan, Monica Evans, George Fair, Michele Hanlon, Jennifer S. Holmes, Marilyn Kaplan, Kamran Kiasaleh, Theodore Price, Jerry Alexander, Pete Bond, Michael Carriaga, Lauren DeCillis, Cheryl Friesenhahn, Josh Hammers, Kim Laird, Catherine Parsonault, Rafael Martin, Gloria Shenoy, Mary Jo Venetis, Kim Winkler, Sayeeda Jamilah, Katie Hall (on behalf of Kyle Edgington), Brandon Bergman (on behalf of Toni Stephens), Vy Trang, Caroline Ries

Absent: Kyle Edgington, Toni Stephens

II. Introduction of Members

Members of the Institutional Effectiveness committee were introduced.

III. Deliverables

Deadlines/Times

The first draft is due to the Leadership Team by November 1, 2016. The text from the 2007 CCR and an updated list of new or revised principles will be provided.

ACTION ITEM: The committees will need to review the CCR and indicate what needs to be deleted from the report because the university is no longer doing it, what needs to be added because we are doing it now and we were not doing it then, and what we are still doing now but doing differently from then so the text will need to be updated. Also, the committees will recommend anything that needs to be revised to be in compliance.

The CCR is due to SACSCOC by September 11, 2017. An off-site committee will review the report in November 2017. A focused response report will be submitted by January 23, 2018 to address any findings identified by the off-site committee. The final draft of the QEP will also be due on January 23, 2018.

All committee members should plan to be available during March 6-8, 2018 for the on-site review. The reviewers will meet with members of the leadership team, steering committee, and other committee members. Dr. Gerry Burnham, Associate Provost and Professor in ECS, recently served as an evaluator for the University of Alabama-Huntsville reaffirmation. One of his observations during the visit was that the review team expected all administration members, vice-presidents, deans, program heads, and associate program heads to be available to meet with them as needed.

ACTION ITEM: If members are interested in serving as a SACSCOC reviewer, email Serenity.

IV. Committee Resources

Resources such as the UTD SACSCOC website, *Resource Manual for the Principles of Accreditation: Foundations for Quality Enhancement*, 2007 CCR, 2008 Focused Response Report, and the Top 10 Cited Principles in 2013 and 2014 are included in the meeting agenda packet.

Simon Kane, Assistant Provost, is creating an online workspace for each of the committees.

ACTION ITEM: Members need to read the principles assigned to the committee in the *Resource Manual* and the 2007 CCR responses to the principles.

ACTION ITEM: Mary Jo Venetis will send two documents to the committee: the full text of the principles with links from the 2007 CCR and excerpts of the assigned principles from the *Resource Manual*.

ACTION ITEM: The university's strategic plan needs to be updated. This will be discussed at a future meeting.

ACTION ITEM: QEP proposals are due on June 1.

V. Future Meeting

The next Institutional Effectiveness Committee meeting will be held in May. The committee voted and agreed to meet once a month during the summer.

ACTION ITEM: Vy Trang will send a doodle poll with date/time options for the May meeting.

VI. Adjournment

ITEM 2A

Department of Education Letter



UNITED STATES DEPARTMENT OF EDUCATION

THE UNDER SECRETARY

April 22, 2016

Subject: Flexibility in Application of Accrediting Agency Review Processes; and Emphases in Departmental Review of Agency Effectiveness

Summary: This letter provides clarification for federally recognized accrediting agencies on the flexibility that they have in differentiating their reviews of institutions and programs, and encourages use of that flexibility to focus monitoring and resources on student achievement and problematic institutions or programs.

Dear Federally Recognized Accrediting Agencies:

Students, families, employers, and taxpayers depend on accreditation as a critical marker of educational quality. In November 2015, the Department announced a series of executive actions and legislative proposals “to improve accreditors’ and the Department’s oversight activities and move toward a new focus on student outcomes and transparency.” In a January 20, 2016, memorandum, the Department outlined a number of areas for further action, including the need to provide clarification to accrediting agencies on the flexibility they have in applying their standards and review processes. This letter provides that clarification. A separate letter will be issued to federally recognized accrediting agencies in spring 2016 to clarify terminology used by accreditors and provide additional guidance to accreditors on information to report to the Department.

This letter is directed to all accrediting agencies recognized by the Department, whether institutional or programmatic, as applicable.

Background

Accrediting agencies have varying practices on how they approach their reviews of institutions and programs and how they apply their standards. Some agencies expend approximately the same resources in their accreditation reviews of each school or program, or require all of their schools or programs to provide approximately equal weight to and evidence for each of the required standards. Other agencies have a base review for all institutions or programs but then spend far more time in their inspections and monitoring of those they consider to have significant problems or that they consider otherwise worthy of increased scrutiny.

This memorandum seeks to provide clarity on two areas: 1) the flexibility that accreditors have, based on specific criteria they establish (aligned with statutory and regulatory requirements), to vary their processes, investment of resources, and requirements of schools or programs; and 2) the statutory and regulatory requirements of particular importance in demonstrating an accrediting

agency's effectiveness, so as to maximize the use of this flexibility to enhance quality and accountability.

The intent of this guidance is not only to assist agencies in reducing burden on institutions and programs, but to encourage accrediting agencies to focus their resources most heavily on standards that are particularly important to student achievement and on institutions of particular concern. All agencies are expected to be in full compliance with statutory and regulatory requirements.

A. Accreditors May Differentiate Their Reviews of Institutions or Programs Based on Differing Conditions

Statute and regulations allow an accrediting agency to focus its resources on institutions or programs with higher risk due to poor performance, size, volume of student aid, or other factors.

Under the Higher Education Act (HEA) and implementing regulations, an agency granting or renewing accreditation or preaccreditation must apply and enforce all of its required standards (HEA § 496(a)(4)(A) and 34 CFR 602.20). However, neither the statute nor the regulations require that the same resources be used for each institution or program, or for each required accrediting standard. The statute does require that the agency apply effectively the criteria for recognition (20 USC 1099b(l)(1)), and under the regulations the accreditor must base its decisions on its published standards and have a "reasonable basis for determining that the information [it] relies on for making accrediting decisions is accurate" (602.18(c) and 602.18(d)).

Accrediting agencies may adopt this flexible review process on their own initiative, and subject to 34 CFR 602.27(a)(4), do not need prior approval by the Department. However, the agency's review process, including the specific criteria and risk factors an agency uses to differentiate its processes and requirements, will be analyzed for its effectiveness when accrediting agencies' recognition is before the Department.

The ability of an agency to differentiate its reviews was the subject of discussion when current requirements regarding effective monitoring were added to the implementing regulations. In the notice of final rulemaking, published in the *Federal Register* on October 27, 2009, the Department said:

The Department recognizes that accrediting agencies and the institutions and programs they accredit are diverse. . . . [W]e expect reasonable and prudent implementation of the statute and regulations by the agencies. For each institution or program accredited, an agency should consider factors such as the size of the institution or program, the number of students, the nature of the programs offered, past history, and other knowledge the agency has about the institution or program, including previous reviews. The regulatory language provides accrediting agencies with flexibility regarding their monitoring of institutions and programs and at the same time ensures they review and analyze key data and indicators.

. . . [S]tudent achievement is one of several areas that an agency must review when monitoring the institutions or programs it accredits. (74 Fed. Reg. 55418)

Section 496 of the HEA and 34 CFR Part 602 provide certain requirements that an agency's accrediting process must consider for each institution or program, including that the agency establishes appropriate measures for student achievement. Measures widely accepted by accreditors provide one factor in determining agency effectiveness in meeting this requirement. For example, most of the national accreditors have benchmarks for the proportion of students who are expected to be retained from year to year, and for the proportion of students who are placed in employment after leaving postsecondary education.

Section 496 of the HEA provides three criteria that may affect the amount of resources that are spent in the review of an institution or program. Pursuant to these criteria, the review must: 1) be sufficient to apply effectively the policies and processes required for recognition (sec. 496(b)(1)); 2) "comply with due process procedures," including clear standards and identification of deficiencies (sec. 496(a)(6)), so that an institution or program cannot be held deficient without a sufficient investigation and opportunity to rebut the identified deficiency; and 3) devote sufficient resources for particular factors specified in section 496(c), such as on-site inspections and reviews at regular intervals with well-trained and knowledgeable accreditation team members.

For each of the inquiries required to evaluate an institution or program against accreditation standards in areas the statute requires agencies to address, the accreditor must have a "reasonable basis for determining that the information . . . is accurate" (34 CFR 602.18(d)).

The statute and the regulations reflect that different circumstances may warrant differing degrees of scrutiny and subsequent monitoring. For example, the HEA says that the agency is to consider licensing exam results, course completion, and job placement rates "as appropriate" (HEA §496(a)(5)(A)). The regulations similarly recognize differing circumstances, for example, in allowing differing degrees of monitoring and differing periods of accreditation by taking into account "institutional or program strengths and stability" (34 CFR 602.19 and 602.20).

Because the statute and regulations emphasize educational quality, the Department believes that accrediting agencies should consider allocating resources—and determining the level of resources and evidence to be required of particular institutions or programs—based on those factors in its review process that emphasize quality. In evaluating an agency's effectiveness, the Department can look at the agency's utilization of certain factors that relate closely to "the quality of education or training" (HEA 496(a)). For example, an accrediting agency might look at the rates of student retention from one academic period to the next, graduation rates, some measure of student learning, some measure of postgraduation outcomes, and student loan cohort default rates, as well as metrics of financial responsibility for institutions, to determine the level of resources needed in its review for a particular institution or program, or the relative level of resources or evidence to be required of certain institutions or programs. Track record and verifiability of job placement rates and recruiting practices would be important to consider in making this determination for certain types of institutions or programs. Further discussion of how this flexibility might be applied can be found in section C of this document.

B. **Accreditors May Differentiate Their Review of Individual Standards, with a Focus on Those with Particular Relevance to Student Achievement and Accreditor Effectiveness**

Overall, the Department notes that certain requirements in the statute and regulations are indicators of the effectiveness of an accreditor. In fulfilling his or her responsibilities under the recognition statute, the Secretary is statutorily charged with determining if an agency has applied effectively the statutory and regulatory criteria (HEA 496(l)(1) and HEA 496(a)). Those criteria include specific requirements for the agency, such as in the nature of its on-site visits and in its review of specific elements of an institution or program, as well as the accrediting standards the agency itself establishes. Section 496(n)(3) requires the Secretary, in the agency recognition process, to take into account deficiencies in performance, and section 496(a) requires the Secretary to determine that the accreditor is a reliable authority on the quality of education offered through measures that the Secretary has promulgated after notice and comment.

While an accreditor must assess institutions or programs for all of the required factors as well as for the agency's own standards and policies, the Department has said that there are certain factors "that we believe are the most relevant to ensuring quality education," and on which the Department will "focus with more depth" (letter from Director, Accreditation Group, Office of Postsecondary Education, United States Department of Education, June 3, 2013). Below we emphasize those criteria that are most relevant, and supplement this list with some of the processes that are provided for in the regulations and that are particularly important for quality assurance.

1. **Certain Statutory and Regulatory Standards Are of Particular Importance in Demonstrating That an Accrediting Agency Is Effective**

a. **Standards of Comparable Agencies**

One measure of effectiveness, by necessity, involves a comparison against expected results, including comparison with other agencies' actions or standards. Section 496(l)(2) of the HEA states that the Department may find an agency ineffective if it accredits an institution or program that is the subject of any interim action by another accrediting agency—i.e., compared with another agency's action. Similarly, the Department may consider what standards those other agencies implement and what results they obtain in the aggregate for the standards in the areas that agencies are required by statute to address. For example, if most of a similarly situated group of accreditors has adopted a particular measure of student achievement but one agency has not, the Department might question the effectiveness of that agency relative to its peers.

Example: Accreditors of a certain type of institution or program generally look at four outcome measures: retention rates, graduation rates, licensure rates, and job placement rates. Accreditor X does not have a metric for retention. Accreditor X may be asked to explain how it can be effective, given that it does not consider retention rates when its peers believe that retention is an important factor in gauging institutional or programmatic quality.

Example: The institutions accredited by agency Y, in the aggregate, show lower levels of student achievement on generally accepted measures of student success, such as completion

and cohort default rates, than the schools, in the aggregate, accredited by similar agencies. Accrator Y may be asked to explain how its standards are effective in terms of the results its schools achieve in the aggregate.

b. Specific Regulatory Criteria

34 CFR 602.16(a)(1)(i), student achievement: As noted in the Department's June 3, 2013, letter, to remain recognized, an agency must demonstrate that its standards for accreditation are sufficiently rigorous to ensure the agency is a reliable authority as to the quality of education. To make this demonstration, the agency must show, among other things, that it has a standard or standards that effectively address the quality of each institution's "[s]uccess with respect to student achievement in relation to the institution's mission."

To that end, the agency must show that it has clear standards for success in student achievement in relation to the institution's mission (602.25(a), 602.18(a)), and how it has reviewed institutions according to this criterion (602.31(a)(2)). Many recognized accreditors, especially national accreditors, have set numerical metrics. We encourage those agencies that currently have that type of metrics to consider whether additional metrics of student achievement that are accurate and effective can contribute to their standards. For example, many accreditors look at completion rates; we encourage those currently without this metric to consider adding it. Similarly, job placement rates have been adopted by many accreditors as a standard of student achievement; success in obtaining employment cannot be ignored in accrediting institutions that offer occupational programs.

Unfortunately, the definition and application of placement standards, along with recruiting practices related to them, have proven to be problematic in many cases. Agencies must assure that the job placement measure is clearly defined, so that an institution cannot claim it misunderstood the agency requirement and so that the agency is consistent in enforcing the requirement; and the agency must assure that strong processes are in place to certify the accuracy of those outcomes, as required under 34 CFR 602.18(d) and 602.19.

Close scrutiny of institutions' processes to evaluate and validate student learning in meaningful ways is an essential responsibility of all accreditors. Regional accreditors tend to use qualitative measures of student achievement, and tend not to have numerical metrics. We encourage them to consider adding objective, transparent, comparable, and actionable quantitative measures. Important measures, such as retention, graduation, and cohort default rates may be utilized if they are not already. In addition, because applied, professional, and occupational programs focus on employment as a primary goal, a regional accrediting agency that does not consider licensing and placement rates in its initial or continuing accreditation of institutions that offer such programs may be failing to ensure that the education or training offered by those institutions is of sufficient quality to achieve the institution's stated objective, as required by law.

Regional accreditors must, regardless of the measures used, clearly state their standards for measuring achievement and in recognition proceedings, and must demonstrate how those standards are applied effectively in the agencies' reviews of institutions.

34 CFR 602.17, objectives and degree and certificate requirements: This regulation requires that recognized accreditors demonstrate that they evaluate whether the institution or program has objectives consistent with its mission, is successful in achieving the objectives, and “[m]aintains degree and certificate requirements that at least conform to commonly accepted standards” (34 CFR 602.17(a)(3)).

Example: School X describes for incoming students the objectives of its liberal arts programs. The accreditor must assure that the amount, nature, and content of the work involved conforms both to the institution’s stated mission and to the commonly accepted standards for the respective fields. In addition, the accreditor must ascertain that the institution is successful; this entails assuring that student work conforms to the standards and that students achieve the outcomes that the institution intends for students in the program. That success may be demonstrated by such factors as retention, graduation, and employment, pursuit of graduate studies, and measures of progress in internalizing concepts within the field. There are, of course, other measures that may meet this requirement.

Example: Program Y describes for incoming students the objectives of its technical or vocational program, both substantively and in the nature of employment that may follow. For instance, the program may describe what coursework or field work is involved, and what proportion of students get jobs and with what types of employers, for a credential in medical technology or computer science, or a credential in retail marketing or civil engineering. In addition to the considerations common with a liberal arts program, the accreditor might also look at factors such as employment rates in the field of study, increase in earnings between pre- and post-educational employment, and third-party (e.g., employer or workforce board) recognition of the qualifications of graduates to gauge whether the program has been successful in achieving its employment-related objectives.

34 CFR 602.21, review and revision of standards: This regulation requires that “[t]he agency must maintain a systematic program of review that demonstrates that its standards are adequate to evaluate the quality of the education . . . and relevant to the educational or training needs of students” (34 CFR 602.21(a)). As conditions change, the standards that an agency uses to evaluate quality may need to change with them. 34 CFR 602.21(c) adds that, “If the agency determines . . . that it needs to make any changes to its standards, the agency must initiate action within 12 months to make the changes.” Changes can occur in economic conditions, student academic preparation, occupational requirements, accreditation practice, or other areas. Importantly, this criterion also looks to the educational and training needs of the students, so the accreditor’s program of review should ensure that agency standards remain responsive to those needs. It thus requires that all accreditors clarify and clearly state their view of student needs, and that they be ready to charge institutions or programs with updating their objectives and implementation to better assure that institutions or programs are meeting those needs.

Accreditors must regularly assess the effectiveness and validity of their standards in general: Do the standards (and numerical thresholds, if any) effectively ensure quality outcomes for students? If there have been poor outcomes for students or other concerns that have arisen at accredited

institutions or programs, does the agency need to revise its standards and processes to identify and address those issues more effectively?

2. Certain Statutory and Regulatory Processes Are of Particular Importance in Demonstrating That an Accrediting Agency Is Effective

In addition to gauging the effectiveness of specific standards as described in section B.1. above, certain accreditation processes are also of particular importance in determining agency effectiveness.

a. Statutory Requirement for Comprehensive Departmental Review

In discussing the Department's analysis of an accrediting agency seeking recognition or renewal of recognition, section 496(n)(3) of the HEA states that the Department is to be "comprehensive" and to consider "all available relevant information concerning the compliance of the accrediting agency . . . including any complaints or legal actions." Therefore, accreditors must respond in a satisfactory way to allegations initially originating outside the recognition process that the agency has not complied with its statutory and regulatory obligations and how it has corrected any deficiencies in that regard.

b. Key Regulatory Processes

In its June 3, 2013, letter, the Department highlighted some of the processes that it believes are most important for accreditors to follow in demonstrating their effectiveness. These include 34 CFR 602.15, 602.19 and 602.20. In this memorandum we also wish to highlight the informational requirements in 34 CFR 602.26 and 602.27.

34 CFR 602.15, 602.18, 602.19: Agencies must pay particular attention to the staffing requirements in §602.15(a) and the requirement in §602.19(b) that they effectively apply a set of monitoring and evaluation approaches that enable them to identify problems with an institution's or program's continued compliance with agency standards. This means assuring that the processes and personnel involved in policymaking, comprehensive reviews, and monitoring can accomplish the task. The agency needs to assure that persons with the appropriate credentials and background are involved. This will often mean that in setting policy, performing site reviews, and monitoring, the agency must involve individuals with expertise in assessing whether an institution or program has appropriately categorized and accurately documented students for retention rates, completion rates, licensure pass rates, and employment status. Under §602.18(d), agencies must have a reasonable basis for determining that the information upon which their accrediting decisions are made is accurate, which would require the skill to audit or verify claims of the institution or program.

34 CFR 602.20: In §602.20(a)(2), agencies must, at a minimum, require a noncompliant institution or program to come into compliance with agency standards within maximum timeframes established by the regulation. If the institution or program does not do so, §602.20(b) requires that the agency must take immediate adverse action, unless the period for compliance is extended "for good cause." Thus, the standard is that ordinarily, periods of time to achieve compliance will not be extended. Some agencies more routinely provide extensions. Agencies must scrutinize the reasons for an institution's or program's noncompliance within the provided regulatory periods to assess whether there is a good

basis for believing that compliance will be forthcoming in light of the applicable regulatory requirement and the gravity of the issue. This is especially the case for violations of major standards, such as those related to student achievement and financial responsibility, for which extensions of time may put students or Department financial aid funds at particular risk.

34 CFR 602.26: Section 602.26 requires agencies to provide to the Department written notification when an agency has terminated the accreditation of an institution or program or placed an institution or program on probation or equivalent status, with specific timeframes described in that section. Agencies must provide decision letters for those actions to the Department to provide necessary information for the Department's oversight activities.

34 CFR 602.27: Section 602.27(a)(6) requires that the agency provide to the Department the name of any institution or program it accredits that it "has reason to believe is failing to meet its title IV, HEA program responsibilities or is engaged in fraud or abuse, along with the agency's reasons for concern about the institution or program." The number of reports of such issues from accreditors is far smaller than the number of such issues identified through other Department processes or by other sources outside the Department. This is remarkable for at least two reasons. First, many of the monitoring activities of accreditors focus on areas that overlap with or that are corollaries to information gathered directly by the Department, so it would be expected that accreditors would find many of the same indicators as the Department. Second, the reporting standard is only that the agency "has reason to believe," which only requires a rational basis for the belief, rather than requiring any level of probability beyond reasonability. The intent of the regulatory requirement is to provide early warning to the Department of issues that it must investigate. Such early warning is vital for the protection of students and the safeguarding of taxpayer funds. Agencies themselves need to be attentive to these issues in order to ensure quality education and be prepared to work with institutions to prepare teach-out plans, as well as to fulfill their role as gatekeepers for federal financial aid funds. The Department views prompt reporting by an accrediting agency as a factor in evaluating the agency's reliability.

C. Examples of How This Flexibility May Be Applied

The information provided above outlines the flexibility that agencies have in reviewing individual institutions or programs and standards. While agencies have the authority to determine how to implement that flexibility, we offer a few examples here.

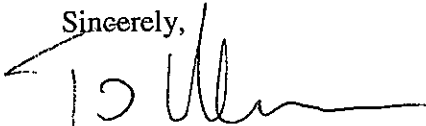
- Differentiation of institutional or program review: Based on previous reviews and ongoing monitoring of institutional or programmatic information, risk factors, and other information, an accreditor may ask that the self-study and on-site visit for a particular institution or program coming up for review emphasize a subset of standards, along with certification of continued compliance and no change in practices with regard to the rest of the standards. Similarly, a site visit for one institution or program may be shorter or longer than that for another on the basis of those reviews and monitoring. Or an accreditor may require more evidence on particular standards for one institution or program than it does for another. Regardless, agencies must comply with all the standards in the regulations, as noted in

Section A.

- Differentiation of terms of recognition: An agency may provide a shorter period of recognition (i.e., fewer years) for an institution or program that has met the threshold standards but for which the agency continues to have concerns, and a longer period of recognition for an institution or program that has regularly exceeded the standards with no ongoing concerns. More frequent monitoring or unannounced visits can be applied for institutions or programs with less satisfactory reviews. Accreditors may also develop tiers of recognition, with some institutions or programs denoted as achieving the standards at higher or lower levels than others.

The Department looks forward to continuing to work with accrediting agencies to assure the quality of our institutions and programs of higher education.

Sincerely,

A handwritten signature in black ink, appearing to read "Ted Mitchell", with a long horizontal flourish extending to the right.

Ted Mitchell

Under Secretary

US Department of Education

ITEM 3A

Updated Interactive Web Links for Assigned *Principles*

2014 Fifth-Year Interim Report	Interactive Web Links	Assigned to 2018 SACSCOC Committees
Overview	http://sacscoc.utdallas.edu/5yrnav/home	
3.3.1.1 [Institutional Effectiveness:] Educational Programs, to include Student Learning Outcomes	http://sacscoc.utdallas.edu/5yrnav/P3_3_1_1	Institutional Effectiveness Committee
4.1 Student Achievement	http://sacscoc.utdallas.edu/5yrnav/P4_1	2 Committees: Institutional Effectiveness Committee; Programs, Curriculum Instruction Committee

SACSCOC Report Fall 2015	Interactive Web Link	Assigned to 2018 SACSCOC Committees
Need to copy web link and then log-in	https://provost.utdallas.edu/login/go10528xit	
3.3.1.1 [Institutional Effectiveness:] Educational Programs, to include Student Learning Outcomes		Institutional Effectiveness Committee

ITEM 3C

Committee Assignments

CR 2.5 Institutional Effectiveness

Serenity Rose King
Lawrence J. Redlinger
Michael Carriaga
Sharon Etheredge
Su Chuan (Rita) He
Kimberly Laird (until Chief Budget Officer hired)
Catherine Parsonneault
Gloria Shenoy
Toni Stephens

CS 3.3.1.1 Institutional Effectiveness Educational Programs, to include Student Learning Outcomes

Kutsal Dogan
Monica Evans
Michele Hanlon
Jennifer S. Holmes
Kamran Kiasaleh
Catherine Parsonneault
Theodore Price
Gloria Shenoy
Sayeeda Jamilah (out until fall)

CS 3.3.1.2 Institutional Effectiveness Administrative Support Services

Pete Bond
Michael Carriaga
Lauren DeCillis
Cheryl Friesenhahn
Su Chuan (Rita) He
Kimberly Laird (until Chief Budget Officer hired)
Toni Stephens
Mary Jo Venetis

CS 3.3.1.3 Institutional Effectiveness Academic and Student Support Services

Jerry Alexander

George W. Fair, Academic Bridge Program

Josh Hammers

Kim Winkler

Include Advising and Student Success Center designees to review draft

CS 3.3.1.4 Institutional Effectiveness Research within its Mission, if Appropriate

Rafael Martin

Sharon Etheredge

Su Chuan (Rita) He

Gloria Shenoy

CS 3.3.1.5 Institutional Effectiveness Community/Public Service within its Mission, if Appropriate

Iolani (Lani) Connolly

Kyle Edgington

George W. Fair

Include Amanda Rockow and Office of Undergraduate Education designee (volunteer programs) to review draft

CS 3.5.1 General Education Competencies

Marilyn Kaplan

Michael Carriaga

Catherine Parsoneault

FR 4.1 Student Achievement

Serenity Rose King

Lawrence J. Redlinger

Sharon Etheredge

Su Chuan (Rita) He

Marilyn Kaplan

Theodore Price

Mary Jo Venetis

ITEM 4

Office of Strategic Planning & Analysis Presentation

THE OFFICE OF STRATEGIC PLANNING AND ANALYSIS

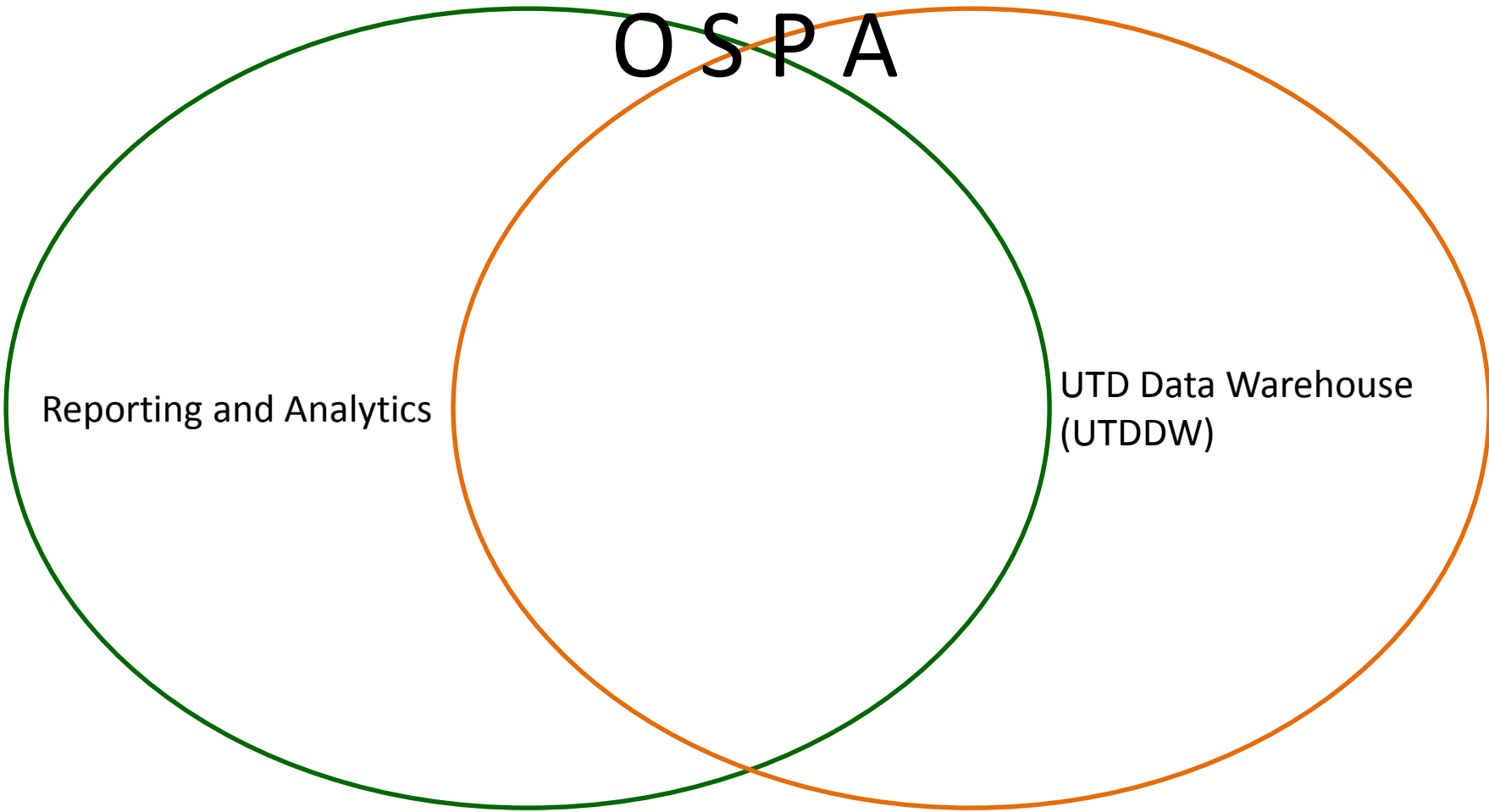
May 19, 2016

MISSION

To provide accurate, timely information and analytical support to the University community and to provide accurate, timely information to key external agencies.

OSPA is the central contact for official campus statistics and serves as a major repository for information on students, faculty, courses, semester credit hour production, degrees awarded, and facilities utilization. OSPA gathers, analyzes and interprets these data for use in planning, performance assessment, and policy decisions. OSPA compiles and reports data requested by the State Legislature, the Texas Higher Education Coordinating Board, the U.S. Department of Education, the University of Texas System, and other state and federal agencies.

The Office of Strategic Planning and Analysis reports directly to the President.



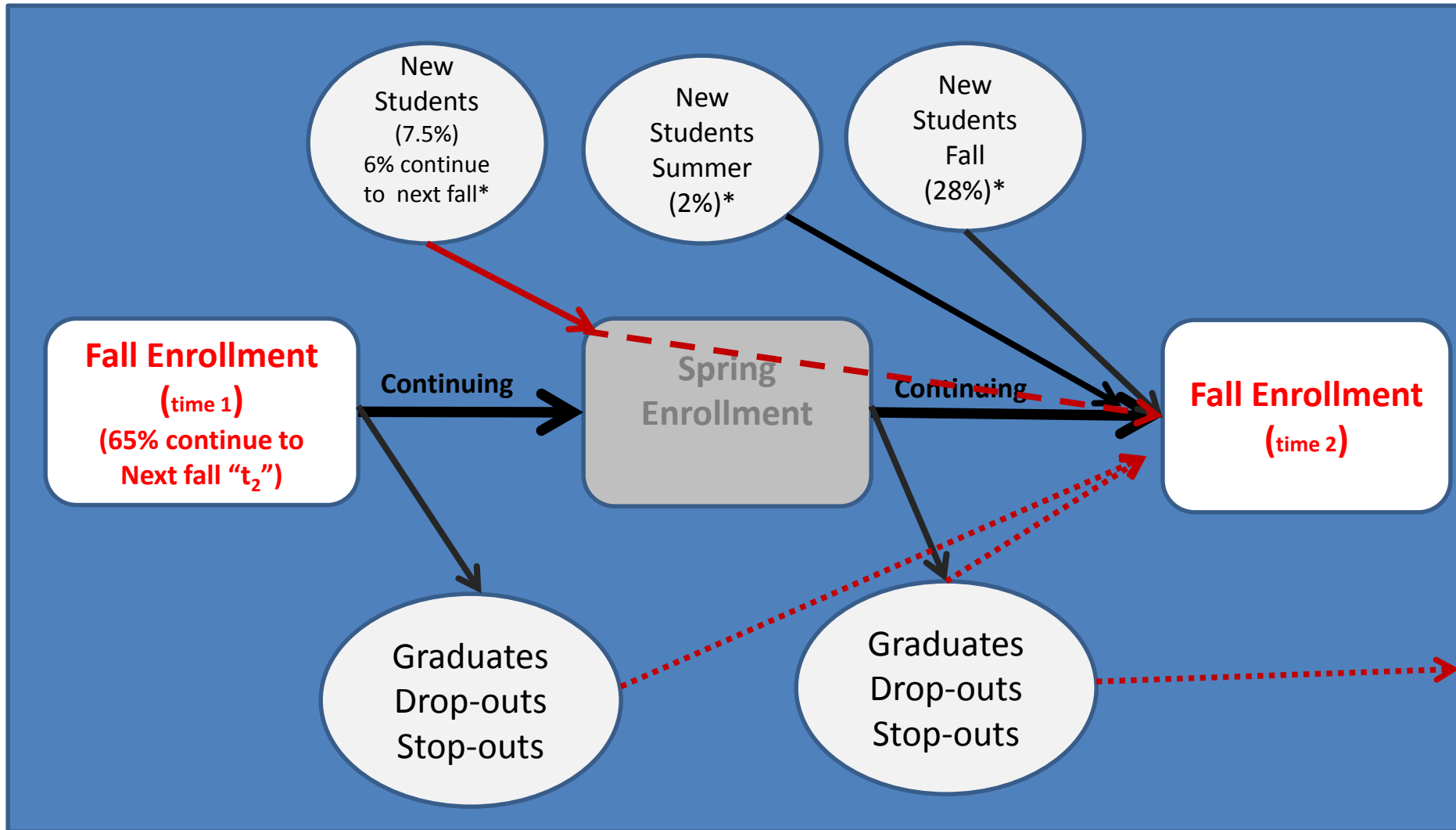
REPORTING AND ANALYTICS

	Agency	Description
1.	U.S. Department of Education	IPEDS Reports – Institutional Characteristics, Completions, Human Resources, Enrollment, Finance, Financial Aid, Graduation Rates
2.	Texas Higher Education Coordinating Board	End of semester student (CBM0E1), Student (CBM001), Texas Success Initiative (CBM002), Course Inventory (CBM003), Credit Hour (CBM004), Building and Room (CBM005), Faculty (CBM008), Graduation (CBM009), Admissions (CBM00B), Student ID Change (CBM00N), Student Schedule (CBM00S), Accountability, Affordability, Closing the Gaps, General Academic Expenditure Study, Net Price Calculator, NRUF Data Collection
3.	Legislative Budget Board	Fall and Annual Performance Measures
4.	University of Texas System	E.g., Academic Analytics and Elsevier (PURE), Regents' Requests

Reporting and Analytics, continued

		Description
5.	Institutional Research	Application/Admissions and Enrollment Tracking, Enrollment Forecasting and Reporting, Benchmarking, FTIC and Transfer Retention and Graduation studies, National Survey of Student Engagement (NSSE), Student Pipeline studies, Consortium for Student Retention Data Exchange (CSRDE)
6.	External Surveys	U.S. News and World Report, Peterson’s, Princeton Review, ACT, Barron’s, CGS-GRE, College Board, Engineering Workforce Commission, National Science Foundation, SACS Financial Profiles and Enrollment Surveys, VSA College Portrait and SAM, Wintergreen Orchard House, FISAP, ASEE, CRA Taulbee, AAUP and CUPA (with Office of the Provost), Texas Tomorrow Funds, Thompson Reuters (with Office of Communications)
7.	Internal Requests	Program evaluations, Majors analysis, Course Demand
8.	Miscellaneous	Open Records Requests and <i>Ad Hoc</i> Requests

ENROLLMENT: INFLOW AND OUTFLOW



Retained students make up the highest percentage of enrollment.

Poor Performing Courses that were Outliers (for 5+ years) by Academic Year									
Course	Percent DFW by Course								# of Acad. Yrs. as an Outlier
	AY 2007-08	AY 2008-09	AY 2009-10	AY 2010-11	AY 2011-12	AY 2012-13	AY 2013-14	AY 2014-15	
BIOL 1318	28%	31%	26%	32%	41%	17%		22%	7
BIOL 3101	23%	21%	23%	27%	25%	19%	20%	21%	8
BIOL 3301	23%	21%	23%	27%	26%	18%	20%	21%	8
CE 2310		38%	20%		22%	19%	20%	21%	6
CE 3301			31%		33%	25%	36%	19%	5
CHEM 1311	29%	26%	20%	29%	21%				5
CHEM 1312	28%	24%	27%	27%	26%				5
CHEM 3341	28%	32%		22%	21%	25%	29%		6
CHEM 3361	23%	21%	23%		28%	20%		18%	6
CS 1335				22%	18%	20%	27%	16%	5
CS 1336		24%	23%	41%	27%	17%	20%	18%	7
EE 2310	22%	20%		22%	20%	17%			5
EE 3301	28%		21%		36%	28%	27%		5
EE 3350		22%	20%	24%	20%		21%	17%	6
HIST 2301	31%	33%	27%	30%	27%	27%	26%	21%	8
ISNS 3371		26%	25%	27%	29%	26%			5
MATH 1314	33%	29%	32%	25%			17%		5
MATH 1316			21%	26%		17%	22%	24%	5
NATS 1311			21%	23%	33%	22%	22%	31%	6
PHYS 1301	34%	26%	23%	33%	21%				5
PHYS 3330	27%	20%	21%	21%	25%	21%	24%		7
PHYS 3416			30%	36%	32%	29%	28%	19%	6
PSCI 3325				23%	22%	16%	26%	19%	5
PSY 2317	31%	27%	21%	23%	29%	18%	19%	18%	8
PSY 3331		23%	22%	25%	20%	16%			5
PSY 3339			21%	20%		27%	17%	22%	5
Average	13%	12%	11%	11%	10%	9%	9%	9%	
Standard Dev.	8%	7%	7%	8%	7%	6%	6%	6%	
Avg. + Std. Dev.	21%	19%	18%	19%	17%	15%	16%	15%	

UT DALLAS DATA WAREHOUSE

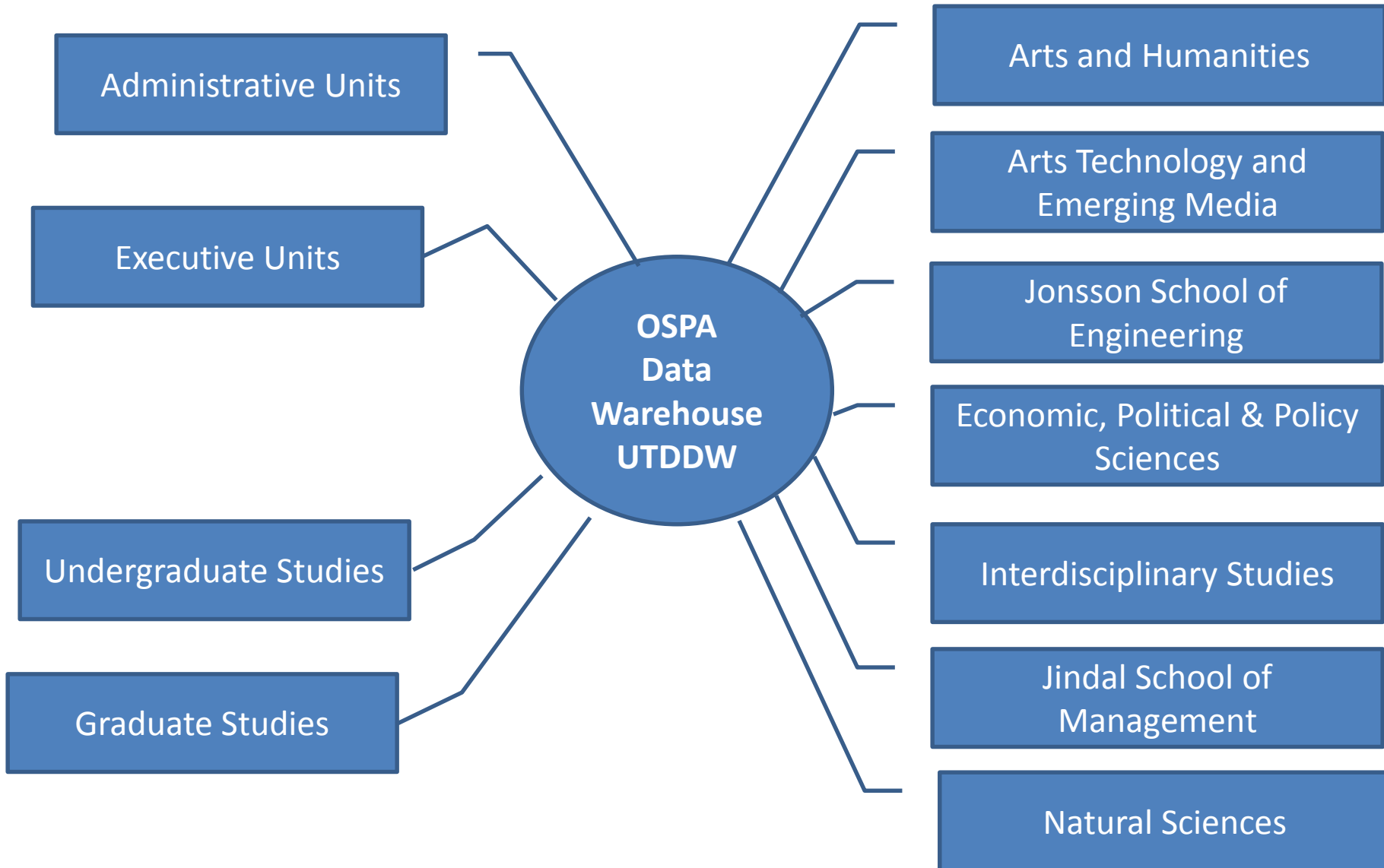
UTDDW contains comprehensive student data from multiple systems beyond PeopleSoft Campus Solutions.

There are 38 dashboard pages and 182 analyses in OBIEE*.

The data warehouse produces 1,287 daily, weekly, monthly, semester-end and year-end reports.

The data warehouse generates 595 daily reports (+22% yr.-to-yr.) that are disseminated to campus clients (e.g., Provost, Deans, Directors, and Department Heads)

Reports Distribution



Data Warehouse Reports: Effectiveness (Examples)

Report Name	# Departments that Receive Reports	# Employees that Receive Reports
Course Statistics “DFW” Reports	33	104
Class Schedule	27	90
Cohort Milestone Agreement	10	31
Grades, Midterm	26	79
Student Demographic	39	177
Student Enrollment	42	202
Student List at Midterm for Advising	26	79
Student Limits Have Been Reached	10	41
Students Who Failed Every Class	26	79
Underperforming Students	26	71

As of May 1, 2016

Providing an Effective Student Experience

- **Needs**, or what the student desires from the experience. Some needs are stated, but it is important to understand that many are not.
- **Wants**—the underlying objective or purpose of students, stated, unstated, or perhaps not even fully recognized by them.
- **Preconceived notions**, positive or negative, that students have about the campus (course) experience.
- **Emotions** that students have or are likely to experience depending on their achievement (engagement).

Providing an effective student experience depends on frontline staff. Frontline staff must clearly understand the intent of the university and be provided with the resources necessary to perform. University managers to be effective leaders ***must thoroughly understand how the university strategy to improve student experience is to be delivered in interactions between the staff and the students. There must be a clear shared objective. And managers must work the frontlines to understand the multi-faceted dynamics of staff-student interactions.***

I will care about what you say when I believe you care about me

ITEM 5A

List of Administrative Support Units

Administrative Support Units

Academic Advising
Auxiliary Services
Bursar's Office
Distance Education
Environmental Health and Safety
Facilities Management
Honors College
Human Resources
Internal Audit/The Office of Institutional Compliance
International Education
Library
McDermott Scholars
Public Affairs
Student Affairs
The Office of Admission and Enrollment
The Office of Assessment
The Office of Budget & Finance
The Office of Communications-Marketing
The Office of Communications-News and Media
The Office of Communications-Web Services
The Office of Development and Alumni Relations
The Office of Diversity
The Office of Financial Aid
The Office of Information Technology
The Office of Institutional Equity and Compliance (Title IX)
The Office of Research
The Office of Strategic Planning and Analysis
The Office of the Registrar
Undergraduate Education-Scholarships
Undergraduate Education-Student Success
University Police

ITEM 5B

Template Nonacademic Assessment - Short Version

**The University of Texas at Dallas
2015-2016 Assessment Report for Administrative Support Units**

Department:	Due Date:
Contact:	Email:

University Mission

The University of Texas at Dallas provides the State of Texas and the nation with excellent, innovative education and research. The University is committed to graduating well-rounded citizens whose education has prepared them for rewarding lives and productive careers in a constantly changing world; to continually improving educational and research programs in the arts and sciences, engineering, and management; and to assisting the commercialization of intellectual capital generated by students, staff, and faculty.

Departmental Mission

How does the departmental mission relate to the university mission?

Goal:

Outcome #1:

MEASURE	TARGET	RESULT

How will you use this information to improve your department?

Type to enter text

ITEM 5C

Nonacademic Assessment Instructions

Nonacademic Assessment Instructions

There are two major components of a nonacademic assessment report:

1. The mission, or purpose of the nonacademic unit
2. The assessment summary, which outlines *HOW* your unit will fulfill its mission

I. MISSION

A. University Mission

This section will be pre-populated, therefore no additional information is required on your part.

B. Departmental Mission

Your mission statement should state who you are and why you exist—your purpose at UT Dallas.

C. How Does the Departmental Mission Relate to the University Mission?

Every office on campus contributes to the overall function and purpose of the university. For this section, we simply ask that you state how your mission explicitly ties to the university's mission statement.

Tip: Directly connect words or phrases from your mission and the university's mission.

II. ASSESSMENT SUMMARY

Tip: Start by establishing departmental goals that focus on the key functions or tasks that you will accomplish in order to carry out your mission. Your goals should be more specific than your mission, but still somewhat broad and general, and they should be semi-long term, with a target achievement date of two or three years. Goals are not a required component of your assessment report, and thus do not need to be documented, however they are a helpful reference point when developing your outcomes and measures.

Sample Goal: Educate students and faculty about how to use technology that enhances teaching and learning.

A. Outcomes

Outcomes are essentially sub-goals that specifically outline how your goals will be accomplished. Your outcomes should be:

Specific to your unit
Measurable
Achievable
Results-oriented
Time-bound

Tip: Consider what your staff or clientele will know or be able to do as a result of the functions of your office.

Note: I recommend that you have a total of 3-6 outcomes.

Sample Outcomes:

1. Faculty and staff will understand important diversity issues at the university.
2. Students will be able to use bibliographic resources at the library.

Nonacademic Assessment Instructions

B. Measures

These are the tools you will use to collect data (e.g., survey, complaint or satisfaction log, pre-/post-test, headcount of participants, etc.). Your measures should be able to provide you with data that can tell you whether you have achieved your outcomes.

Note: I recommend that you have 2-4 measures per outcome.

Sample Measures (based on the above sample outcomes):

1. Pre-/Post-test comparison of knowledge following safe zone training.
2. HEDS (Higher Education Data Sharing) Research Practices survey results

It is also important to determine a target (i.e., criteria for success) for each measure. For example, for the first measure, the target might be that 85% of faculty and staff will show improvement on the post-test. This simply shows what is required for this particular measure to demonstrate that the outcome has been met.

C. Results

What did you find? After collecting your data, did you find that you met/did not meet your expected outcome?

D. Use of Information

Now that you have this information, what are you doing with it? Are you making changes to areas in need of improvement? Are you celebrating some of your successes? Try to avoid stating too much of what you *will do* and instead, state what you *are doing* to make progress within your unit.

Tip: Start by conducting a SWOT analysis in which you use the results of your assessment report to determine your unit's:

- Strengths
- Weaknesses
- Opportunities for growth
- Threats to success

Then, use this information to guide your plans for improvement.