



**GUIDE TO INSTITUTIONAL EFFECTIVENESS:  
2020-2021**

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## I. Definition of Institutional Effectiveness

Institutional effectiveness refers to how well an institution is achieving its mission and goals. An effective institution is characterized by a clearly defined mission that articulates who it serves, what it aspires to be, and what it values. Likewise, an effective institution has clear goals that are broadly communicated to its stakeholders.

Institutional effectiveness means engaging in ongoing and systematic assessment of programs and services with the goal of continuous institutional improvement. Since student learning is at the heart of an educational mission, meaningful assessment of student learning across the campus is fundamental to institutional effectiveness.

An institution demonstrates its effectiveness when it shows that planning and decision-making are *evidence-based* and mission focused. In higher education's current landscape, institutional effectiveness also links to compliance with federal and state regulations and accreditation requirements.

## II. Assessment

### A. Purpose

Assessment is not an end unto itself. It is a means to an end, intended to gather evidence that informs continuous improvement at all levels of an institution. Effective assessment processes include the regular and systematic collection of reliable evidence that has implications for planning decisions and resource allocations.

### B. Guiding Principles

Assessment processes at Utica College are guided by best practices, research and scholarship, and accreditation requirements. The following are the guiding principles of assessment at UC:

- **Assessment is relevant.** It is linked to the College's educational mission and strategic and operational goals.
- **Assessment is useful.** Assessment results are used to inform planning and budgeting decisions at both the institutional and unit level. Assessment findings are further used to improve processes, procedures, policies, and services.
- **Assessment is realistic and sustainable.** Assessments efforts should be reasonable in terms of the resources available and expectations for providing useful results. If relevant, assessment processes should capitalize on existing information sources, such as Institutional Research surveys, clinical or student teaching evaluations, and licensing or certification examinations.

- **Assessment is non-punitive.** Assessment is a process used to identify where practices are strong and where they should be changed or improved. Effective assessment depends on reliable results and honest reflection, neither of which should be used in a punitive manner.
- **Assessment is comprehensive.** Meaningful results are derived from using multiple valid methods: direct and indirect, qualitative and quantitative, formative and summative.
- **Assessment is well documented.** All departments, programs, and services are obliged to systematically collect and document evidence that shows how well they are achieving their individual mission and goals.

### C. Glossary of Terms

A glossary of assessment terminology used by Utica College may be found on pages 10 - 13 of this guide and on the [“Assessment at Utica College”](#) website.

## III. Assessment Processes

### A. Strategic Plan

The Institutional Effectiveness Committee and the College’s Joint Cabinet identified parties responsible for each of the tactics and measures for the five strategic goals. These responsible parties identify the milestones and actions steps for each tactic in order to ensure there are deliberate and intentional strategies to achieve the institutional goals.

Status updates and supporting evidence on each tactic should be submitted to the Office of Institutional Effectiveness (OIE) in early November and early April. Semi-annual progress reports are prepared by the OIE and shared with the Joint Cabinet in preparation for the President’s Planning Retreats. These progress reports are additionally posted on the strategic plan’s webpage: <https://www.utica.edu/academic/Assessment/new/sp.cfm>

Departments map their specific operational goals to the College’s strategic goals to demonstrate how individual units are fulfilling the institution’s strategic priorities.

### B. Academic Departments, Co-Curricular Units, and Student Learning

All academic programs and departments, including Core, are expected to assess student learning and operational goals on an annual basis. Plans and results are due on August 15 of each year. The Academic Assessment Committee reviews reports on a cyclical basis; feedback is shared directly with departmental faculty in face-to-face meetings and by scored rubric.

Chairpersons are expected to meet with their respective school dean in September of each academic year to review any significant assessment findings, discuss concerns or issues related to assessment efforts, and communicate resource needs documented by assessment findings. When appropriate, deans will advocate for academic departments in their school.

The Oversight Committee for Core (OCC), chaired by the Director of Core, administers the student learning assessments for the Core program. Core Leadership Groups, comprised of teaching members of the faculty, plan and conduct the assessments and review the results. The director reports directly to the Provost.

Academic programs and departments are likewise required to complete a 5-year program review. Policies, processes, and procedures related to the 5-year program review may be found in the *Academic Assessment Committee's Handbook*. Requirements are also outlined on the "[Assessment at Utica College](#)" site.

The College, recognizing and valuing the learning that students gain while outside the classroom, maintains that the "co-curriculum is an exceptionally important part of a student's college experience": <http://www.utica.edu/student/cocurriculargoals.cfm>. As such, co-curricular and support units in Academic Affairs, Student Affairs, and Athletics are required to identify student learning goals and systematically assess these goals. Specifically, the following operations are responsible for assessing student learning in addition to operational effectiveness: Athletics, Athletic Student Success, Student Living and College Engagement, the Counseling Center, Career and Professional Development, Student Conduct and Community Standards, Learning Services, the Center for Student Success, New Students and First-Year Programs, Opportunity Programs, the Health Services, International Education, Library and Learning Commons, and Undergraduate Admissions.

Assessment plans and results are due on June 30 of each year and are reviewed by the Co-Curricular Assessment Committee.

Indirect assessments of student learning and institutional effectiveness are additionally conducted by the Office of Institutional Research. Such measures include the National Survey of Student Engagement (NSSE), the Noel-Levitz Student Satisfaction Inventory (SSI), and the Student Opinion of Teaching survey. The NSSE and SSI results may be found at <https://www.utica.edu/ir/student-surveys.cfm>. Departments are urged to use the findings relevant to their operational and learning goals.

### **C. Non-Academic Administrative Units**

Administrative departments should have clearly articulated operational goals and clearly identified assessment methods. Where appropriate, targets or benchmarks should be informed by the respective standards of each unit's professional association. Goals must be congruent with the appropriate divisional goals and institutional priorities. Likewise, individual performance goals should align to the department's goals.

Departmental goals should be assessed on an annual basis. Plans and reports are due on June 30. Those that are not reviewed by the Co-Curricular Assessment Committee will be reviewed by the Institutional Effectiveness Committee.



| <b>Date</b>      | <b>Event</b>  | <b>Responsible Parties</b>  |
|------------------|---|---|
| <b>July</b>      | <ul style="list-style-type: none"> <li>• Performance reviews</li> <li>• Co-Curricular Assessment Committee reviews annual assessment reports and plans from co-curricular and student support operations</li> <li>• Institutional Effectiveness Committee reviews reports and plan from administrative units</li> </ul> | Direct reports & supervisors; Co-Curricular Assessment Committee; Institutional Effectiveness Committee         |
| <b>August</b>    | <ul style="list-style-type: none"> <li>• Annual goal reports from academic departments due on August 15</li> <li>• Annual report from the Co-Curricular Assessment Committee due to the IEC</li> </ul>  | Academic department chairs and/or assessment coordinators; Co-Curricular Assessment Committee                   |
| <b>September</b> | <ul style="list-style-type: none"> <li>• Performance reviews completed</li> <li>• Academic departments meet with respective school dean to discuss assessment findings and resource needs</li> <li>• AAC begins its review of annual goal reports</li> </ul>  | Direct reports & supervisors; Academic department chairs and/or assessment coordinators<br>School deans;<br>AAC |
| <b>October</b>   | <ul style="list-style-type: none"> <li>• 5-Year Program Reviews from academic departments due (October 15)</li> <li>• Departments scheduled for 5-Year Reviews in the following academic year meet with the VPIE/Dean of Academic Assessment and the school dean to review requirements</li> </ul>                      | Academic department chairs and/or assessment coordinators;<br>VPIE/Dean of Academic Assessment; School deans    |
| <b>November</b>  | <ul style="list-style-type: none"> <li>• Give thanks for good assessment</li> </ul>   |   |
| <b>December</b>  | <ul style="list-style-type: none"> <li>• Semi-annual progress report on the strategic plan due to the President/Joint Cabinet</li> <li>• IEC semi-annual report due to the President</li> <li>• Academic Assessment Committee semi-annual report due to the Provost/Faculty Senate</li> </ul>                           | Vice President for Institutional Effectiveness; IEC; Academic Assessment Committee                              |
| <b>January</b>   | <ul style="list-style-type: none"> <li>• AAC begins its review of 5-Year Reports</li> </ul>   | Academic Assessment Committee; academic departments; school deans; Provost                                      |
| <b>February</b>  | <ul style="list-style-type: none"> <li>• Preliminary draft of 3-year financial forecast submitted to Board of Trustees</li> </ul>   | Financial Affairs   |
| <b>April</b>     | <ul style="list-style-type: none"> <li>• IEC semi-annual report due to the President</li> <li>• Academic Assessment Committee semi-annual report due to the Provost/Faculty Senate</li> </ul>   | IEC; Academic Assessment Committee  |

## **V. Committee Structures and Review Processes**

### **A. Institutional Effectiveness Committee (IEC)**

The Institutional Effectiveness Committee reviews the institution's assessment processes with specific attention to how effectively units are achieving the College's mission and goals and how results from the assessment of institutional goals and priorities inform planning and resource allocations. The IEC also facilitates the process by which specific operations, units, or persons

report progress on institutional initiatives that have received additional funding. The IEC is additionally responsible for maintaining and monitoring the MSCHE document roadmap and for charting progress on recommendations made during the self-study process. Finally, this committee is responsible for the periodic assessment of institutional assessment processes as outlined on page 14.

The IEC reports semi-annually to the College President and, at the President's request, may report to the Board of Trustees.

*Members:* Standing members include the Vice President for Institutional Effectiveness/Dean of Academic Assessment and the Assistant Vice President for Financial Planning & Analysis. Seven additional members serve on a 3-year cycle: 4 from the full-time faculty (one representing each school and one representing online offerings); 1 from a co-curricular unit and 1 from athletics; and 1 member from either advancement/alumni or career services.

### **B. Academic Assessment Committee (AAC)**

The Academic Assessment Committee is a collegial body responsible for establishing, communicating, reviewing, and reporting on assessment processes in academic departments and identifying areas where professional development is needed. Specifically, the committee reviews annual goal reports and assessment plans from academic departments and facilitates 5-year reviews. The committee is further responsible for measuring the institution's progress with the MSCHE accreditation standard V.

The AAC reports semiannually to the Provost and Faculty Senate regarding the state of assessment at Utica College.

*Members:* Chaired by the Vice President for Institutional Effectiveness/Dean of Academic Assessment, the Academic Assessment Committee is comprised of 3 faculty members from each school (for a total of 9 faculty) and 1 representative from the College library. The Provost serves as an *Ex Officio* member.

### **C. Co-Curricular Assessment (Co-CA)**

The Co-Curricular Assessment Committee is responsible for guiding and reviewing the assessment processes in co-curricular areas. These areas include units housed under Academic Affairs, Student Affairs, Enrollment, and Athletics.

This committee is also responsible for measuring the institution's compliance with relevant criteria related to MSCHE accreditation standards IV and V.

*Members:* Chaired by the Vice President for Institutional Effectiveness/Dean of Academic Assessment, the Co-CAC's membership consists of 2 representatives from Student Affairs, 1 from Student Success, and 1 from Athletics. The Dean of Students serves as an *Ex Officio* member.

## VI. Committee Reports

Each committee charged with assessment responsibilities is required to submit a report that includes the status of assessment processes, a summary of findings, and evidence of compliance with MSCHE accreditation standards. The outline for these reports may be found on page 15 of this guide.

## V. Institutional Resources

Utica College systematically collects information related to its effectiveness in achieving its mission, goals, and institutional priorities as well as its compliance with accreditation standards and governmental regulations. The following table identifies the most common information sources at the College. Departments may request additional reports by contacting the Office of Institutional Effectiveness.

| Information Source      | Responsible Department         | Shared With   | How Used   |
|-------------------------|--------------------------------|---|--|
| EAB Campus              | Student Success                | Faculty & staff   | Retention & degree-completion, dashboards, predictive modeling, advising                               |
| Campus Climate Survey   | Diversity, Equity, & Inclusion | Faculty, staff, students, Cabinet, & Diversity Committee                              | Planning and programming   |
| Common Data Set         | Institutional Research         | Posted on IR website, accessible to anyone with a login                               | Data requests, external surveys, measure trends over time  |
| Fact Book               | Institutional Research         | Posted on IR website, accessible to anyone with a login                               | Data requests, external surveys, measure trends over time, compare peer group data                     |
| Ruffalo Noel-Levitz SSI | Institutional Research         | Results presented to Cabinet, Posted on IR website, accessible to anyone with a login | Measures importance and satisfaction according to student populations, used for planning and budgeting |
| NSSE                    | Institutional Research         | Results presented to Cabinet, Posted on IR website, accessible to anyone with a login | Measures engagement and learning outcomes, used for planning and budgeting                             |

## GLOSSARY OF TERMS ASSOCIATED WITH ASSESSMENT

**Academic Program** – According to NYS Education Department, an academic program is organized around the set of educational requirements necessary to qualify for a registered degree. The curriculum or program includes general education or specialized study in depth in a particular field, or both (NYSED, 2012).

**Artifacts** – The work produced by students while engaged in a learning experience.

**Analysis of Findings** – Examination of the data gathered during the assessment cycle, including reflective consideration about what actions, if any, should be taken.

**Action Plans** – Actions taken to improve the program or assessment process based on the analysis of results; “Closing the loop.”

**Assessment** – Measures the degree to which goals have been met; provides specific evidence of strengths and areas needing improvement.

**Assessment Method** – Indicates how an assessment was conducted. Examples include surveys, tracking, focus groups, performance evaluations, rubrics. Also referred to as **assessment measure**.

**Assessment Process** – The systematic collection, review, and use of information about student learning, educational programs, student support programs, and college services undertaken to improve teaching/learning and institutional effectiveness.

**Assessment Plan** – A document which outlines how and when selected outcomes will be assessed.

**Assessment Report** – An annual document based on the Assessment Plan that presents and explains assessment results and shows how assessment results are being used to improve the program.

**Benchmark** – A standard or point of reference against which things may be compared or assessed.

**Closing the loop** – The term used to signify the next step or ongoing steps in the assessment cycle. Also referred to as **action plan**.

**Co-curricular Units** – The areas outside the classroom where the College also achieves its educational mission.

**Course-embedded Assessments** – Direct methods to assess student-learning that are well integrated into and organic to the educational experience.

**Course Student Learning Goals (CSLG)** – the measurable learning/knowledge/skill expectations for all students completing an academic course, documented in the syllabi and program review

documents. Direct measures are to be used; indirect measures/results will be used to support the direct measure findings. CSGL are identified by faculty, described in the course syllabus, and it is the faculty of each course who determine what to measure and the tool to use for this faculty-driven process.

**Course Operational Goals** – focus on the functioning of the course, rather than the learning achieved by the students. Examples include development of new courses, deletion of a course, edits to a course, and course mapping to program goals.

**Course Syllabus** – A document that lays out the expectations, including the learning goals, for a single course.

**Curriculum Map** – A matrix representing a program's learning goals and indicating where they are developed in a program and to what extent.

**Data Definitions** – The definitions used by the College to ensure consistency in reporting, particularly consistency with federal and state definitions.

**Direct Methods of Assessment** – Measures used to document student performance. Examples of direct measures include rubrics for capstone projects, portfolios, papers, and performances.

**Document Roadmap** – Published by the Middle States Commission on Higher Education, the document roadmap is a tool where institutions might align specific sources of evidence with accreditation standards. The document roadmap is useful in demonstrating institutional compliance and identifying areas where the institution might need to improve.

**5-Year Program Review** – Required of academic departments, the 5-year program review is a self-study completed within a 5-year review cycle. The self-study requires departments to examine curriculum, student learning, faculty expertise, enrollment in the major(s) and minor(s), and other areas of relevance to the institution.

**Findings** – Results (evidence, data and/or information) gathered from assessment.

**Formative Assessments** – Assessments that occur throughout the learning process that aim to understand and, therefore, improve learning.

**Institutional Effectiveness** – Institutional effectiveness refers to how well an institution is achieving its mission and goals. An effective institution is characterized by a clearly defined mission that articulates who it serves, what it aspires to be, and what it values. Likewise, an effective institution has clear goals that are broadly communicated to its stakeholders.

**Indirect Methods** – Measures used to assess students' perceptions of their learning and educational experiences. Examples of indirect measures include surveys, focus groups, and interviews.

**Institutional Priorities** – In consultation with the Board of Trustees the college President identifies the College’s institutional priorities for the year. All goals are linked directly to the College’s Strategic Plan and are executed at the Divisional level. Independent divisional goals may also sometimes inform and direct new strategic initiatives or institutional goals through the established strategic planning processes.

**Institutional Student Learning Goals** – The measurable student learning goals that are realized in the complete educational experience, both curricular and co-curricular. At Utica College, the key intellectual skills are the institutional learning goals.

**Key Performance Indicators (KPIs)** – Measureable values that indicate the extent to which the institution is achieving its mission and goals.

**Metrics** – Standards of measurement used to assess efficiency, performance, progress, or quality.

**Mission Statement** – A concise statement outlining the purpose of a program, who it serves, and what distinguishes it.

**Program Student Learning Goals (PSLG)** – the measurable learning/knowledge/skill expectations for all students graduating from a particular curriculum/major or students being served by a particular unit.

**Program Operational Goals** – Goals set for and by a program, usually during the 5-year program review process. However operational goals may be set during a review for an external accreditor or in the interim between program reviews. Operational goals address the functioning of the program.

**Program Review** – Required self-study process completed by each academic program. It is usually conducted on a five-year rotation, unless external program accreditation cycles require a different review time line.

**Rubric** – Specific sets of criteria that clearly define for both student and teacher what a range of acceptable and unacceptable performance looks like. Criteria define descriptors of ability at each level of performance and assign values to each level.

**Strategic Plan** – The institution’s five-year plan that focuses on core principles and prepares the College to embrace the challenges and opportunities of a new era.

**Target** – A value that indicates whether or not a goal has been achieved.

**Validity** – The extent to which an assessment measures what it is supposed to measure and the extent to which inferences and actions made on the basis of test scores are appropriate and accurate.

**Value added** – Evidence that shows the effects educational providers have had on students during their programs of study beyond what would have occurred through natural maturation. A comparison of the knowledge and skills students bring to the educational process with the knowledge and skills they demonstrate upon completion of the educational process.

### ASSESSING THE ASSESSMENT PROCESS: 3-Year Cycle

| Activity  | When Assessed  | How Assessed  |
|---|--|---|
| Annual assessment reports<br>(academic departments)       | Annually   | Scored rubrics<br>Feedback questionnaire              |
| Annual assessment reports<br>(co-curricular units)        | Annually   | Scored rubrics<br>Feedback questionnaire              |
| Annual assessment reports<br>(administrative departments) | Annually   | Scored rubrics  |
| Program review process                                    | Annually by responsible<br>committee<br><br>Spring 2018, Spring 2021,<br>Spring 2024 | Scored rubrics<br>Qualitative summary<br>Focus groups |
| Assessment culture (faculty)                              | Fall 2017, Fall 2020, Fall<br>2023   | Survey  |
| Assessment culture (co-<br>curricular units)              | Fall 2021, Fall 2024, Fall<br>2027   | Survey  |
| Assessment culture<br>(administrative staff)              | Spring 2023, Spring 2026,<br>Spring 2029   | Survey  |
| Office of Academic<br>Assessment/OIE                      | Spring 2021, Spring 2024,<br>Spring 2027   |   |
| Institutional Effectiveness                               | Annually   | Scored rubric   |



## Report Template from Assessment Committees

### I. Membership

*Identify the members of the committee. If there have been changes to the membership or if changes are anticipated (i.e. some members' terms are expiring), please describe them here as well.*

### II. Meetings

*Indicate how often the committee met during the academic year. Reference where agendas and minutes are filed and if they are accessible to anyone outside the committee.*

### III. 20XX-20XX Assessment Cycle

- **Participation**  
*Indicate how many units completed an assessment report. Identify those departments that did not complete an assessment and the reasons for non-compliance. What actions, if any, will be taken to move towards 100% compliance?*
- **Assessment of Process**  
*Analyze the results of the rubric used to assess each department's process. Where is the process effective? What areas might require additional work or professional development?*
- **Summary of Assessment Methods and Findings**  
*Report on the overall statistics for the departments. Are there any issues or concerns regarding these data?*
- **Using Assessment Results**  
*Summarize how departments are using assessment results to make improvements or inform planning. The results may be related to student learning or operational goals.*

### IV. Relevant Criteria Related to MSCHE Standards

*Indicate the evidence that aligns with specific criteria related to accreditation standards*

### V. Action Plan

*What action plan or goals does the committee have for the following academic year to strengthen assessment processes and facilitate effective assessment?*

## INSTITUTIONAL EFFECTIVENESS RUBRIC

(adapted from the SUNY Council on Assessment rubric to measure institutional effectiveness)

<https://system.suny.edu/media/suny/content-assets/documents/academic-affairs/assessment/Institutional-Effectiveness-Rubric-Branded.pdf>

| Element                       | Outcome   | Exemplary  | Established   | Developing   | No Evidence  |
|-------------------------------|---|--|---|--|--|
| <b>Plan</b>                   | <i>The institution has a formal assessment plan that documents an organized, sustained assessment process covering all major administrative departments, student support services, and academic programs.</i> | A written plan specifies responsibility for conducting assessment at departmental and institutional levels. The plan further indicates timelines and procedures and notes how assessment findings are channeled into strategic planning and budgeting. | All functional areas conduct assessment systematically and may have written policies to guide the process. However, there is no institutional plan that serves to coordinate how assessment findings improve institutional effectiveness. | Some, but not all, functional areas conduct assessment systematically, and these areas have policies and procedures for their assessment processes. However, there is no coordination of or standards for assessment set by the institution. | No institutional plan for assessment. Assessment may be conducted at the institution, but on an <i>ad hoc</i> basis, usually in response to specific challenges or accreditation mandates. |
| <b>Goals</b>                  | <i>Measureable goals have been articulated for the institution and within functional areas, including courses, programs, departments and nonacademic units.</i>   | All departments at the institution and the institution itself have clearly articulated, measureable goals. Expected or aspirational outcomes are inherent in the goals.  | All departments have goals, but not all are clearly stated, and the desired outcomes may lack clarity   | Some but not all departments have clearly stated goals and/or goals are more of an operational checklist, a “to do” list.  | Neither the institution nor its departments has clearly stated, measureable goals that identify expected or aspirational outcomes.   |
| <b>Alignment/<br/>Mapping</b> | <i>Specific goals (e.g. course-level, department-level) are mapped to broader, “higher-level” goals (e.g. Key Intellectual Skills, strategic goals) and the institutional mission.</i>                        | Departments indicate how their goals and outcomes map to the institution’s mission and goals. When appropriate, they are also linked to accreditation standards.   | Departments map their goals to the institutional mission and goals, but some of the linking seems arbitrary or too much of a stretch. Likewise with mapping to accreditation standards.   | Not all departments have mapped their goals to the institution’s mission and goals or current accreditation standards.   | There is no evidence of alignment between departmental missions and goals and the mission and goals of the institution.  |

|                               |   |   |  |   |  |
|-------------------------------|---|---|--|---|--|
|                               |   |   |  |   |  |
| <b>Culture</b>                | <i>All appropriate members of the individual department are involved in assessment activities.</i>          | All members of the College are knowledgeable about assessment activities. Each department involves key stakeholders in its assessment processes, and the College’s leadership team frequently articulate the importance of assessment and its contribution to continuous improvement and decision-making. | All departments involve faculty or staff in some aspect of assessment—e.g. planning and collecting data, reviewing assessment results, implementing program-level improvements based on assessment findings.   | Some departments involve faculty or staff in their assessment processes. Likewise, some but not all departments share results with key stakeholders.  | In most departments, assessment is done by lone individuals charged with assessment responsibilities (usually a director or department chair).   |
| <b>Methods &amp; Findings</b> | <i>Assessment results are gathered from multiple sources and measures.</i>                                  | Assessment is based on multiple measures of performance, including direct and indirect and qualitative and quantitative data.   | The institution and its departments use a combination of direct and indirect measures to assess goals.   | The institution and its departments rely primarily on indirect measures. Assessment tools are poorly defined, not appropriate to the goal, or poorly constructed.   | Not clear how institutional or departmental goals are being assessed. Because the goals are more of a checklist or action steps, they cannot be properly measured by any assessment method     |
| <b>Sustainability</b>         | <i>Assessment is ongoing, systematic, and conducted in a manner that is sustainable over the long term.</i> | Assessment is routinely conducted in all appropriate departments. The sustainability of assessment processes is evident by the fact that they are regular, ongoing, and systematic. Assessment continues despite turnover in departments.   | Assessment is routinely conducted in most but not all appropriate departments. The sustainability of assessment processes varies with respect to how regularly it occurs or how systematically goals are measured. Efforts have sometimes been thwarted by staff turnover. | The institution can document that sustainable assessment activity is regularly occurring in several departments at the College (notably, academic departments), but practices are not universal or sustainable for the long term. | There is no evidence of sustainable assessment activity occurring within any functional department at the College (academic, student services/support, athletics, and administrative offices). |

|                                 |   |   |   |   |   |
|---------------------------------|---|---|---|---|---|
| <b>Communication</b>            | <i>Results are easily accessible. They are communicated to all relevant parties and analyzed by key stakeholders.</i> | Assessment results are disseminated to appropriate audiences at appropriate times. Data appropriate to both internal and external audiences are easily accessible.  | Departments within the College share assessment findings with one another or make them accessible to others at the institution. Public disclosure is limited. | Assessment results are owned by the specific department and shared with others only via the review process.   | Assessment results, if they exist, reside within the individual department and are not shared with or communicated to others.                               |
| <b>Planning &amp; Resources</b> | <i>Assessment findings are routinely considered in planning and budgeting processes.</i>                              | The institution is able to demonstrate that planning and budgeting processes have routinely used assessment data in decision-making.  | Assessment findings are used in planning and budgeting, but there is no clear mechanism in place to ensure this is routinely accomplished.                    | Assessment findings from only a few departments are used to inform planning and budgeting processes. Institutional planning and budgeting decisions are based something other than assessment findings. | Assessment findings remain within the department where they were collected. It is not clear how planning or budgeting decisions are made.                   |
| <b>Using Assessment Results</b> | <i>Assessment findings are used to inform continuous improvement.</i>   | The institution is committed to using assessment to inform improvement; there is documented evidence that assessment results, especially those related to student learning, are routinely used for institutional improvement. | There is evidence that all departments regularly use assessment results to inform improvements within their own operations.                                   | There is some evidence that assessment results are used occasionally to inform institutional improvement or departmental effectiveness.   | Assessment continues to be done for compliance purposes; there is little evidence that results are used to inform institutional improvement or departmental |

