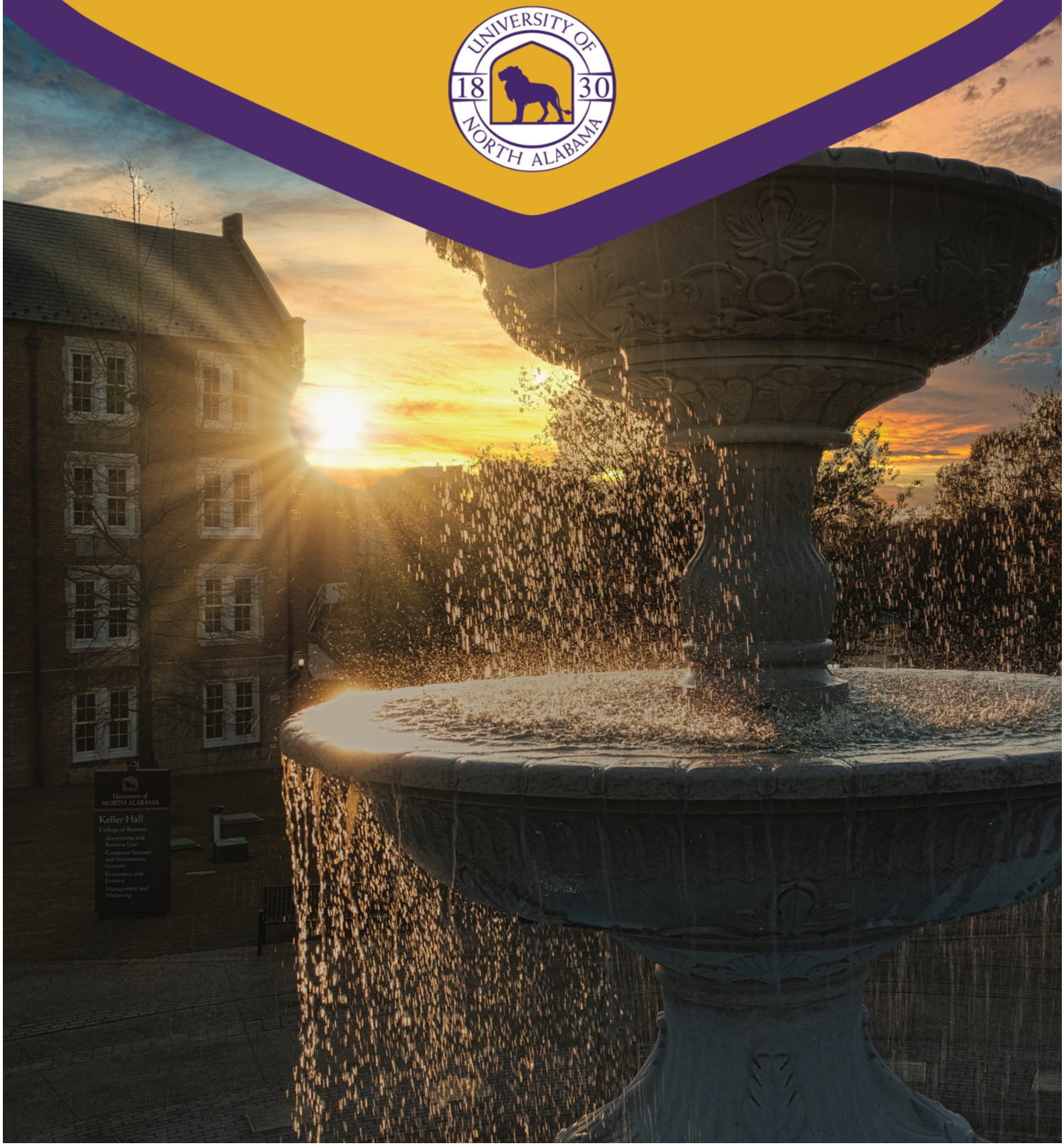
University *of* NORTH ALABAMA

Guide *for* Planning *and* Assessing INSTITUTIONAL EFFECTIVENESS



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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.

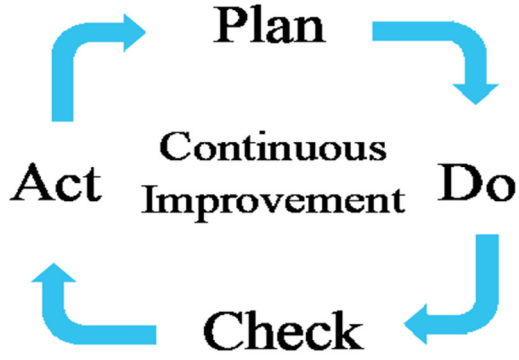
Some deviation from the process outlined, when useful for the department or unit, may be appropriate. Innovation in programs, procedures, and assessment techniques is encouraged. Examples of required reports and/or documents are referenced in this guide and can be found, along with instructions for completion, on the website of the Office of Academic Affairs (OAA). For all academic and student support/administrative support units, the core planning and assessment requirement is completion of the *Annual Report* that is completed in July each 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 cyclical, 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 et al., 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 through clear communication of the nature and concept of the institution's purpose; and
4. to gain understanding and support from those people outside the organization who are important to its success.

UNA's Mission Statement reads as follows:

> *The mission of the University of North Alabama is to be Innovative. Inclusive. Engaged. Evolving. Global.*
>
> ***As a student-centered, 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.***
>
> *The mission is accomplished through the 2019-2024 Strategic Plan, which is organized into five themes: Theme One: Transformational Student Experience; Theme Two: Academic Excellence and Innovation; Theme Three: Diversity and Inclusion; Theme Four: Financial Sustainability; Theme Five: Institutional Identity.*

ASSESSMENT AND INSTITUTIONAL EFFECTIVENESS OVERVIEW

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 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 and operational goals and learning outcomes.

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, ongoing 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, CAEP, etc.); and the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), which is the regional accrediting body of the institution.

All of these agencies share one common theme: improvement. All university units (academic and student support/administrative support) are required to engage in a systematic assessment process that leads to establishing, 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 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.html (site no longer active). A more detailed explanation of each principle is available via the following link: http://www. liberty.edu/media/1650/9Principles.pdf.

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 Southern Association of Colleges and Schools Commission on Colleges through their Principles of Accreditation: Foundations for Quality Enhancement (2018), and the Core Requirements (CR), Comprehensive Standards (CS), and Federal Requirements (FR) included therein.

As a general rule, demonstrating compliance with an accreditation requirement typically involves responding to key phrases embedded in the core requirement or comprehensive standard. Crafting responses that thoroughly address the literal interpretation of all keywords and phrases is vital. This is especially important in the institutional effectiveness requirement of CR: 7.1, 7.3, 8.1, 8.2, 8.2.a, 8.2.b., and 8.2.c.

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.

SACSCOC Standard 8.2.c currently reads as follows:

The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking 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. *academic and student support services;*
4. *research within its education mission, if appropriate; and*
5. *Community/public service within its 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 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 8.2.b currently reads as follows:

The institution identifies college-level general education competencies and the extent to which students 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.

These Core Requirements 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 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 Academic Affairs has the primary responsibility for the overall coordination and implementation oversight of institutional effectiveness for UNA. This includes developing and distributing the procedures, 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.

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 and student support department or administrative support unit. Rather, the sole function of the Institutional Effectiveness Committee in reviewing departmental and unit reports is to ensure the consistency and integrity of the assessment process.

Within the individual academic and student support or administrative support 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 Report*.
- **Deans** are responsible for developing, collecting, reviewing, and approving new goals to be added to the unit's long-term strategic goals as well as completing the *Annual 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 Report*.
- **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 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** initiates 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. 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 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** is 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 five strategic committees, 14 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 effectiveness covers the entire campus and that there is adequate representation from all constituents 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, includes 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 affect 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. 1) Where has the institution been? 2) Where is the institution now? 3) 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 Report** – Each year, all academic and student support and administrative support departments are responsible for completing the *Annual Report*. This is a two-fold instrument whereby the department establishes goals/learning outcomes for the next year, and assesses the previous year's goals and outcomes. 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 Report*, each academic and administrative 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 Component courses is required to perform an annual *General Education Assessment*.
- **Audit** – Additionally, UNA requires that the performance of all academic program learning outcomes that support UNA's Core Competencies are assessed through the *Annual 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 used, 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 interconnected because each is dependent upon the results of the others.

ANNUAL 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 upcoming school year. In June, a separate Assessment Report was completed to acknowledge and review the disposition of the October plans. The current *Annual Report* combines the two reports into one.

After the Office of Academic Affairs and Institutional Effectiveness Committee assessed past Annual Reports in 2008, it was decided that a need and desire existed to incorporate more long-term planning into the process. Therefore, the new process allows department chairs/directors to plan for upcoming fiscal years.

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

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

Each year, the cost center head will meet with their supervisor to discuss progress on the previous year's goals, and create goals for the coming year. After this planning meeting, the cost center head will assess the previous year's goals, and enter goals for the upcoming year.

In July, the chairs/directors will submit their annual goals along with their long-term goals which range the next two to five years. In October, the deans and vice presidents will review the reports created by their direct reports and enter their own annual and long-term goals. Any new budget requests must be reported in the *Annual Report* such that it is evident that planning is occurring before requests are brought to the Strategic Planning and Budget Study Committee.

FIVE-YEAR PROGRAM/DEPARTMENT REVIEW ASSESSMENT

The second, critically important phase of assessment for each academic and student support/administrative support 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, the Office of Academic Affairs, and the Institutional Effectiveness Committee.

Within the academic division, the five-year schedule is determined by the Office of Academic Affairs with input from the academic unit, department chairs, and academic support unit directors. 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 educational 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 seven Core Competencies are to be included in the learning outcomes for all academic programs.

July 31 is the target date for completion, and the program review report should be submitted through Watermark. After the OAA reviews the report, it is sent to the Institutional Effectiveness Committee, and assigned to a committee member, who will determine if all requirements of the report have been met. Once this process is complete, the OAA will provide feedback to the originating department, and the department chair should meet with the appropriate dean in order to discuss progress and problem areas that the report indicates. The meeting confirmation form is to be completed at this meeting and returned to the OAA as confirmation that this meeting has taken place.

The educational support/administrative departments of the University also undergo an extensive review that is conducted on a five-year cycle. These reviews address viability, productivity, and efficiency of the unit, while focusing on the extent to which departmental goals are achieved, and opportunities for improvement are identified. The educational support/administrative reports will follow the same review process as the academic reports. Department chairs and directors are notified prior to the year in which their five- year review report is due.

Templates and rubrics for both the Educational Support/Administrative Department Review and the Academic Department Review can be found at https://www.una.edu/research/five year- review-resources.html

ASSESSMENT OF UNA'S CORE COMPETENCIES

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

- information literacy,
- critical thinking,
- effective communication,
- scientific literacy,
- aesthetic awareness and creativity,
- cross-cultural and global perspective, and
- informed citizenship.

The University of North Alabama's approach for assessing the extent to which students have achieved the above core competencies, includes 1) the assessment of student learning outcomes in the General Education Component courses and 2) the assessment of specific student learning outcomes that are also Core Competencies within each academic program.

ASSESSMENT OF CORE COMPETENCIES THROUGH THE GENERAL EDUCATION COMPONENT

All academic departments that offer a General Education Component course are required to complete a General Education Audit. In prior years, this audit has been administered in paper format. It was integrated into the Annual Report System for 2017-2018 and accessible to every chair of a department in which a general education course is housed. 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. Assessment of these courses ensures that program learning outcomes are established and related Core Competencies are identified, assessment of student learning outcomes are ongoing, and program modifications are taking place as needed.

ASSESSMENT OF CORE COMPETENCIES WITHIN EACH ACADEMIC PROGRAM

As part of the *Annual 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 must specify its outcomes, how each outcome is assessed, the results of the assessment(s), and what improvements were made based on the results of the assessment(s). 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

The University's assessment process calls for systematic assessment in at least the following areas: evaluation of the Mission Statement (five-year cycle), evaluation of the University Goals, 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 the Office of Academic Affairs.

UNIVERSITY MISSION STATEMENT

The evaluation of the University Mission Statement is to occur every five years. The evaluation should answer two questions: 1) is the Mission Statement appropriate, and 2) how well is the mission being fulfilled? Each five-year period, the Mission Statement is evaluated by a leadership task force appointed by the President. Membership should be broad-based and include 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 the OAA, 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 reviewing the Mission Statement.

UNIVERSITY STRATEGIC GOALS

Evaluation of the University's goals will occur every five years. As with the University's Mission Statement, the evaluation process should focus on two questions: 1) are the goals appropriate, and 2) how are they being achieved? The responsibility for evaluating the University's goals lies first with an assessment of these goals by the OAA, 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.

ADMINISTRATIVE SYSTEMS

The evaluation of the effectiveness of Administrative systems within the University consist 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 conducted on a five-year cycle and will be the responsibility of a separate task force appointed by the President. These ad hoc groups will coordinate their work through the University's Institutional Effectiveness Committee.

ASSESSMENT REPORT COMPONENTS

The assessment templates 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/learning outcome,
- identify key performance indicators,
- document and analyze the results achieved,
- document the actions for continuous improvement as a result of the analysis,
- identify the office responsible for ensuring that the assessment is completed, and
- 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 and will be shared with the appropriate constituent groups. These results are then used to influence goals and outcomes for the next planning cycle.

POST-ASSESSMENT ACTIVITIES

The various assessment reports are typically due to each unit's respective approving authority on July 31 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 July 31) are reviewed by appropriate administrator(s) and constituent groups during the 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 reports and budgets may result from immediate problems and opportunities that are identified. These immediate adjustments will be made to the *Annual 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.
- 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:

July:

- Departments will submit an *Annual Report* for the current fiscal year and may include strategic goals for the next two to five years.
- Departments that underwent five-year review last year may include these goals in the current year's *Annual Report*.

August-September:

- The Office of Academic Affairs reviews all submitted reports.
- Vice presidents and deans review the annual reports submitted by their direct reports.

October-November:

The Institutional Effectiveness Committee conducts a meta-analysis of submitted reports.

January-February:

OAA shares results of meta-assessment with individual departments and units and presents results to COAD.

January:

- Departmental strategic goals are reviewed by Deans.
- President submits budget/ initiatives for the next Fiscal Year
- President's proposed budget/ initiatives are articulated to:
  - » Council of Academic Deans,
  - » Institutional Effectiveness Committee, and
  - » Strategic Planning and Budget Study Committee

February:

Departmental strategic goals are reviewed by vice presidents.

March:

Department strategic goals are reviewed by the SPBS.

April:

UNA budget initiatives are created from departmental/ area strategic goals and President's budget initiatives.

June:

- Departments will submit a summary of their *Annual Report* to the Board of Trustees.
- Departments/areas that are involved will submit five-year reports to the OAA.

August:

- President creates operational plan from January's projected budget/initiatives for next fiscal year.
- OAA will submit to the Institutional

Effectiveness Committee a summary report of the *Annual Report*.

- OAA meets with vice presidents and deans for review of completed five year departmental/ program reviews.

Figure 2 • Types of Assessment

Assessment	Schedule	Responsibility of:	Document(s) Involved:	Reporting Channel
Assessment of each unit's goals	Annual July 31	Each cost center head with faculty and/or staff involvement	Annual Report Template	Submit in Watermark
Program Review	Five-year cycle July 31	Department chair/ unit head	Five-Year Report Template	Submit in Watermark
Core Competency Assessment Audit	Annual July 31	Academic departments	General Education Assessment component of annual report system	Submit in Watermark
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	University Goal Assessment Template	University President

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

Revised by Institutional Effectiveness Committee, May 2021

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 required 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 Report – Each academic, educational support, and administrative unit at the University is expected to develop an Annual Planning and Assessment Report in September. This report is to include an assessment of the previous year's goals, and an entry of the next year's goals along with strategies to achieve those goals. These reports should support the University's Strategic Plan, its goals, strategies, and priorities. 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. Additionally, 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 to determine if improvement was made.

Educational Support/Administrative Department Review –These reports are required for each support/administrative unit. They are to be completed every 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 accomplishes 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 administrative 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.

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 statements, 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.

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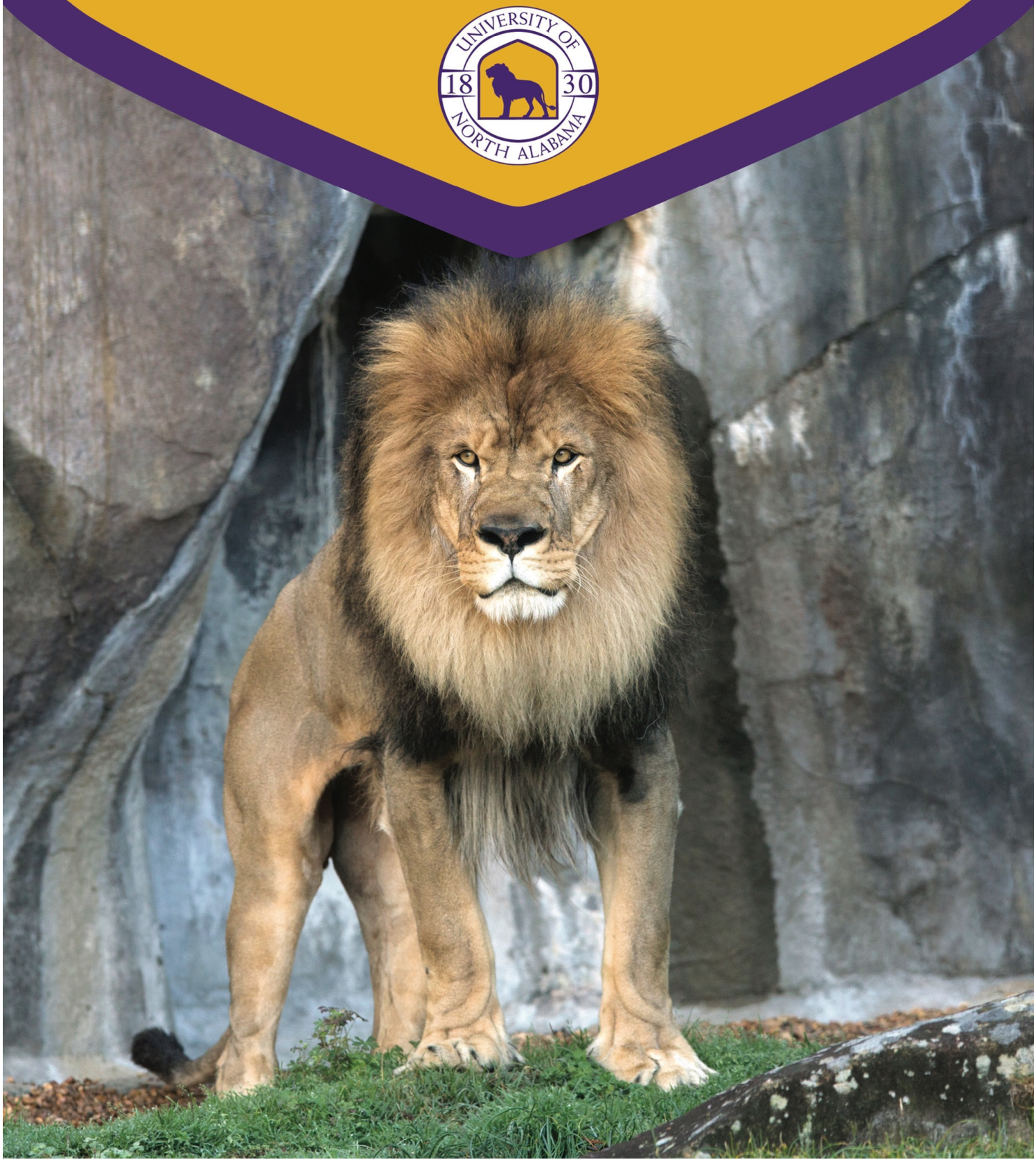
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