

Division of: <u>Assessment & Development</u>

Person Responsible: Danita McAnally

Department of: <u>Assessment & Development (Related to Effectiveness, Inst.</u> <u>Research and Grants/Contracts)</u> Person Responsible: Danita McAnally

Purpose Statement: Create a culture for continuous improvement at Amarillo College (revised 12-11-08).

| Goal Statements | Objectives/Outcomes (including assessment tools and standards) | Results | Use of Results/Revisions to make Improvements |
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| Guide AC in making evidence- based decisions. (Goal revised in 2006 to reflect Strategic Plan's Goal 4 Strategy 4.1.) | 1.a After completing outcome assessment training, employees in each department will identify at least one direct outcome on annual departmental PET forms. Closing Out (Outcome established in 2006 to reflect Strategic Plan's Goal 4 Strategy 4.1.(Revised September 2007)) | 1.a. Sep. 2008- Nov. 2009 TOTAL = 86% (N= 90 of 105) Inst. = 86% (N= 54 of 63) Non Inst. = 86% (N=36 of 42) Sep. 2007- Nov. 2008 TOTAL = 80% (N= 86 of 108) Inst. = 76% (48 of 63) Non Inst. = 89% (40 of 45) | 1.a. Sep. 2008 – Nov. 2009 <u>ANALYSIS</u> : We have had many successes with PET forms over the past 3 years. In the beginning efforts mainly involved getting Departments to turn in the form. After that, efforts were made to get Departments to write at least one outcome statement. Currently, these efforts have been successful and now the results are being analyzed. 86% of college Departments are writing at least one outcome and this number should continue to rise. In additional to a slight increase from 2007-2008, PET outcomes have increased in quality. <u>Plan of Action:</u> This outcome is being phased out at this time and the focus has shifted to what Departments are doing with their results. (see new outcome) |
| | 1b. After prompting by email and providing training if needed, employees in each department will show results and use of results for at least one outcome. 1.b. After prompting by email | 1.b. Sept. 2008- Nov. 2009 Departments with <u>Results</u> Total = 59% (N=62/105) Inst. = 52% (N= 33/63) Non-Inst. = 69% (N=29/42) Departments with <u>Use of Results</u> (must have one improvement or | 1.b. Sept.2008-2009 ANALYSIS: There was a slight increase in the number of departments with results in the instructional area. The reason why this still remains at a 52% rate is due to many departments not tracking their data from year to year. Also many departments decided to start a new |

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| | and providing training if needed, employees in each department will show results, use of results, and one area of improvement for at least one outcome. REVISED 2010 | revision noted) Total = 52% (N=55/105) • Inst. = 51% (N= 32/63) • Non-Inst. = 55% (N=23/42) | outcome statement. Hopefully, the instructional departments should be at approximately 70% for next year. However, there problems with the quality of PET forms from the ITT division. Until there is better buy in from that division, the PET overall percentages will remain below the desired quality. |
| | | | There was an 11% increase in results from the Non-instructional areas. This is a satisfactory increase and there is anticipation that another 10-15% increase should occur for the 2009- 2010 year. Non-Instructional departments are on track with their PET forms. |
| | | | Plan of Action: Work with Dean of Career and Technical Education to ensure that ITT PET forms meet minimum standards. Provide any training or assistance the ITT Division might need. |
| | | | Work with the Instructional and Non- Instructional Assessment Committees to see that both areas of the college receive the appropriate levels of training/assistance for their PET forms. Ensure that the committees are examining the quality of the PET forms that are submitted. |
| | 1.c. After receiving targeted requests each semester, 60% of selected AC faculty will contribute at least one assignment and usable student work based on the General Education | 1.c. 2008-2009 TOTAL (64%) N= 58/90 Sep. 2007- Nov. 2008 TOTAL 2008 (43%) N= 46/108 • Spring 2008 (41%) N= 26/63 | 1.c. 2008-2009 Analysis- Since implementation of the targeted list approach to Gen Ed assignment solicitation, the 100 pieces of student work (competency) per year have been fulfilled. Each year the list is improved and refined. |

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| | Competency Report for each semester. Closing Out 2010 | • Fall 2008 (44%) N=20/45 | At this point this outcome is no longer needed because there is a reliable system and AC staff has consistently provided over 100 samples per year to the Competency Committees. This outcome will be closed out. |
| | 1.d. After providing a menu of data options, the number of users viewing data within IR web page will increase. (Revised Outcome established in December 2008 to reflect Strategic Plan's Goal 4 Strategy 4.1.) | 1.d. Jan. 2009 – Dec. 2009 No data. | 1.d. Jan. 2009 – Dec. 2009 <u>ANALYSIS:</u> Data were unavailable from the tracking system (Net Tracker) for 2009 through April of 2010 due to a licensing renewal issue. <u>ACTION PLAN:</u> IR staff will develop and implement a tracking solution to provide counts to key pages within the IR data resources. This will include an option for viewers of the pages to indicate satisfaction with each page viewed and to provide feedback/suggestions. |
| | | 1.d. Jan. 2008 – Dec. 2008 Annual Counts: Views: $06=2909 07=3084 08=3393$ Visits: $06=1175 07=1126 08=1221$ IR Databook Visits/Views Per Year 2006-2008 $\frac{4000}{500}$ $\frac{2000}{200}$ $\frac{2000}{200}$ $\frac{2000}{200}$ $\frac{2000}{200}$ $\frac{2000}{200}$ $\frac{2000}{2$ | 1.d. Jan. 2008 – Dec. 2008 <u>ANALYSIS</u>: ✓ Lost the information for purchasing minimal cost tracking software that will allow assessment view movements within web pages per visitor. Work with ITS on purchasing and implementing. ✓ While the tracking system doesn't allow us to determine whether the benchmark was achieved, the number of hits across three years and within the past year show IR's standard reports (Databook and Self-Service Stats) are accomplishing the intent of these sites – to allow technology to shift staff demands within IR to ad hoc reports rather than standard reports. |

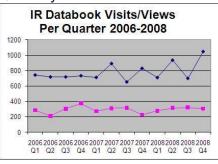
Objectives/Outcomes

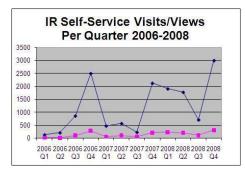
(including assessment tools and standards)

Goal Statements

Results **IR Self-Service Visits/Views** Per Year 2006-2008 8000 7000 6000 5000 4000 Title Axis 7 3000 2000 1000 2006 2007 2008 ----Views 3710 3405 7401 -Visits 423 432 850

Quarterly Counts:





Visit = 1 session visit to either the Databook or Self-Service parent web page. Views = number of pages viewed

within that parent web page in the single session visit.

Use of Results/Revisions to make Improvements

- Use of Databook has increased.
- Use of Self-Service Stats has increased substantially.
- The tracking system (Net Tracker) does not differentiate employees from anyone else entering IR web site. It is <u>assumed</u> that the majority of users are AC employees who have a need to know.
- Portal access would assure that the users are employees BUT may limit access that other non-employees would need.

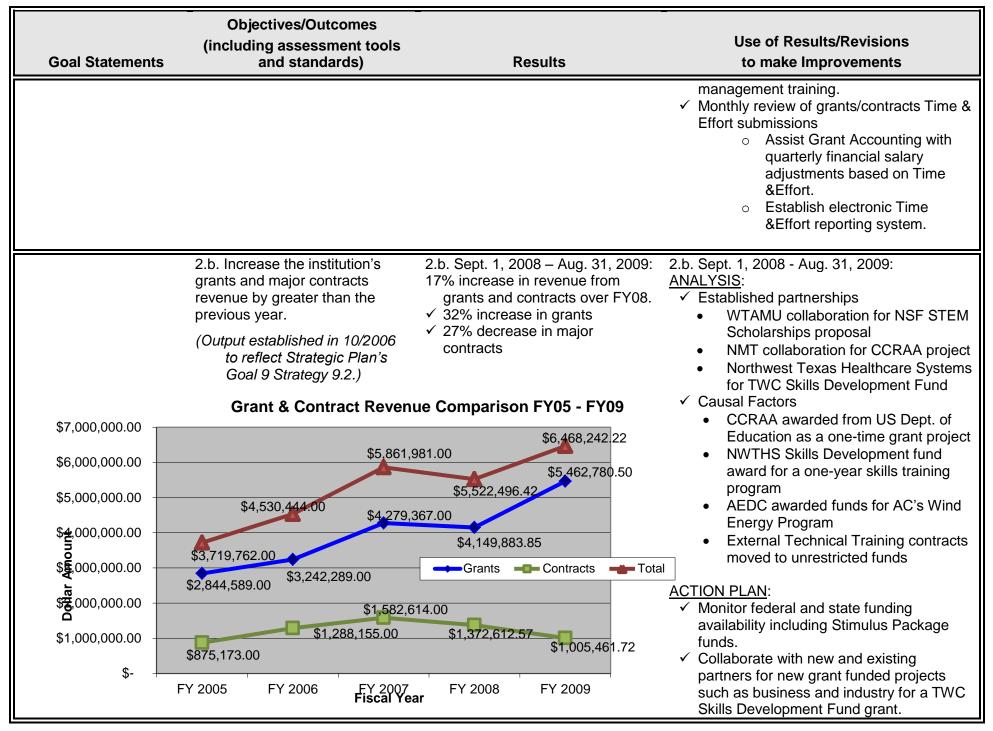
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- ✓ Group and individual training sessions plus embedded links in Program Review increased the use of IR Self-Service Stats.
- ✓ Business Objects of Datatel has been purchased by the college.

ACTION PLAN:

- Continue to search for suitable tracking software that will allow assessment view movements within web pages per visitor. Once located, purchase and implement.
- IR will study approaches for distributing data via Business Objects.
- ✓ Add links to THECB data.
- ✓ Offer schedule training sessions on Self-Service Stats through Center for Teaching and Learning.

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| 2. Secure new sources of revenue. (Goal revised in 2005 to reflect Strategic Plan's Goal 9 Strategy 9.2.) | 2.a. Closed Out March 2010 due to redundancy with 2b Increase the institution's revenue from new grant sources by 3% over previous year. (Outcome established in 2006 to reflect Strategic Plan's Goal 9 Strategy 9.2.) | 2.a. Sept. 1, 2008 – Aug. 31, 2009: 17% increase in revenue from grants and contracts over FY08. 32% increase in grants 27% decrease in major contracts Sept. 1, 2007 – Aug. 31, 2008: 3% decrease new grant revenue over FY07. | 2.a. Sept. 1, 2008 – Aug. 31, 2009: <u>RESULTS OF ACTION PLAN:</u> Submitted 6 federal and 2 state applications with 3 federal awarded and both state awarded Additional federal grant applications submitted in response to federal stimulus packages (FIPSE, Dept. of Labor) Developed and hosted a one-day compliance workshop for all grant project directors/managers Compliance monitoring meetings held at least quarterly with all grant project directors/managers ACTION PLAN (9/1/08 – 8/31/09): Ensure that AC pursues relevant grant opportunities Based on Grants and Contracts Targets List, submit a minimum of 2 federal grants and 2 state/private grants seeking new revenue opportunities. New grant opportunities will be sought by monitoring all federal & state RFPs, Grants.Gov and BIG Online Search. Ensure all AC grants are in compliance Audit (internal) all AC federal, state and private grants at least annually. Review all monthly and quarterly compliance reports. Develop and conduct project manager/director compliance and grant |



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| | | | Submit 2 new federal and 2 new state grant/contract applications based on collaborations and grants targets list. |
| | 2.c. AC's Single Audit will have no more than two programmatic finding related to federal/state grants. | 2.c. March 2010 - New objective/outcome. This objective/outcome is a preventative measure of programmatic federal/state grant funding. | 2.c. <u>ACTION PLAN – Preventative</u> <u>Measures:</u> Audit (internal) all AC federal/state grants at least annually. Review all monthly and quarterly compliance reports. Conduct project manager/director compliance and grant management training. Monthly review of grants/contracts Time & Effort submissions Assist Grant Accounting with quarterly financial salary adjustments based on Time &Effort. <u>ACTION PLAN – Address Findings:</u> Develop corrective action plan with grant Project Director/Manager and his/her reporting supervisor. Based on timelines in corrective action |
| | | | plan, monitor progress. ✓ Audit grant program to ensure implementation of correction measures. |

revised 2/8/10