TITLE:	**Institutional Effectiveness and Research**
PROCEDURE NUMBER:	**1-6-1000.1**
RELATED POLICY AND PROCEDURES:	**1-6-1000 Copyright Compliance**
DIVISION OF RESPONSIBILITY:	**Administrative**
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Piedmont Technical College is committed to the integration of institutional effectiveness into strategic and operational planning at all levels of operation. The College provides the fiscal resources to carry out assessment, data collection, research and planning processes that demonstrate that the College is effectively accomplishing its mission and continuously improving institutional quality.

Administrative Responsibilities

The Associate Vice-President for Institutional Effectiveness and Compliance is responsible for reviewing and revising the Institutional Effectiveness and Research procedure.

Procedure

Institutional Effectiveness

1. Piedmont Technical College engages in systematic and ongoing institutional effectiveness processes. The institutional effectiveness processes are inter-related as shown on the Institutional Effectiveness Framework. Institutional effectiveness processes include:
    - Strategic Planning
    - Operational Planning
    - Outcomes Assessment Reporting (OAR)
    - Budget Planning and Reporting

- Annual Program Performance Review
- Five-Year Academic Program Review
- Institutional and Academic Program Accreditation
- Substantive Change Monitoring and Reporting

2. In addition, the Office of Institutional Research, Planning, and Effectiveness is responsible for:

   Conducting ongoing institutional research through survey methods and or focus groups to include but not limited to:

   - Student course evaluation surveys,
   - Nationally-normed student surveys
   - Employee satisfaction survey
   - PTC Graduate survey

   Coordinating, the completion, and submission of the Integrated Postsecondary Education Data System (IPEDS) surveys as required by the US Department of Education to the South Carolina Technical College System (SCTCS), and some elements of Perkins V Grant reporting.

   Collecting and submitting licensure exam results to the SCTCS.

   Design and implementation of the program and student learning outcomes assessment of educational programs, administrative, academic and student support services units and assessment of the general education competencies of the institution. The mission goals of the strategic plan are the program outcomes for educational programs, administrative, and academic and student support services.

3. Reporting associated with the role of SACSCOC Liaison includes the coordination and submission of annual institutional profiles, substantive change, and Fifth-Year Interim Report, Quality Enhancement Plan, and the Compliance Certification Report. The responsibilities and processes associated with Accreditation and Substantive Change are detailed in PTC Policy 1-1-2010 Accreditation and Substantive Change, PTC Procedure 1-1-2010.1 Accreditation, PTC Procedure 1-1-2010.2 Substantive Change and PTC Procedure 1-1-2010.3 Quality Enhancement Plan.

4. The Office of Institutional, Research, Planning, and Effectiveness provides assistance with program accreditation reporting to include providing program data, and assisting with drafting, reviewing, and finalizing accreditation documentation and preparing for on-site visits

A. Strategic Planning

The Institutional strategic plan is a multi-year action plan to improve institutional qualify and to guide the institution in accomplishing is mission.

1. It is the responsibility of the Associate Vice President for Institutional Effectiveness and Compliance in collaboration with the President and Strategic Planning Steering Committee to coordinate the strategic planning process and annual activities as described in PTC Policy1-1-1021 Planning System and PTC Procedure 1-1-1021.1 Planning System.

2. It is the responsibility of the AVP, to prepare a report of the annual accomplishments of the college.

B. Operational Planning

The operational planning and reporting is one institutional effectiveness process included on the institutional effectiveness framework. The operational plan assigns responsibility for the implement of the strategies and tactics of the college's strategic plan and provides documentation of the annual accomplishments of these strategies and tactics and other institutional activities by mission goal. Each college division is required to develop an annual operational plan that includes all departments within the division. Departments may develop individual operational plans. It is the responsibility of the Division Vice President or Dean to coordinate operational planning for their division. The Office of Institutional Research, Planning, and Effectiveness is responsible for:

1. Establishing the operational planning and reporting calendar for the institution with input from the President's Leadership Team.

2. Developing an institutional template for operational planning and reporting and providing training on the process and use of the template.

3. Compiling the annual operational and assessment reports into an executive summary of institutional accomplishments. The report is shared with the President's Leadership Team and available for review by all college employees through a shared folder. The report is useful in planning and the development of the annual State Accountability Report.

C. Budget Planning and Review

Budget planning, an essential planning element, is tied to the strategic plan through the operational budgeting process, operational planning and reporting and quarterly budget reviews.

1. The Business and Finance Division is responsible for budget planning and review.

2. The operational budget process is presented in PTC Policy 7-8-1010 Operational Budget Process and PTC Procedure 7-8-1010.1 Operational Budget Process.

3. The OIRPE is responsible for developing and maintaining the Budget Review Reporting Template.

D.

E. Outcomes assessment Planning and Reporting (OAR)

Piedmont Technical College identifies expected outcomes, assesses the extent to which outcomes are achieved, and provides evidence of improvement based on the analysis of results for all educational programs, administrative, academic, and student support services within its mission.

1. All educational programs participate in the annual assessment process to measure achievement of program outcomes (mission goals of the institution), program student learning outcomes, general education competencies, and work ethic skills (WES).

2. Administrative, academic, and student support services participate in the annual assessment process to measure achievement of program outcomes (mission goals of the institution), and when appropriate, student learning outcomes.

3. Disaggregation of assessment data to include distance education and location is expected.

The OAR documents the ongoing assessment of program and student learning outcomes and improvement actions for all educational programs, administrative, academic and student support service. All outcomes are aligned with the appropriate mission goal and strategic direction. The following college personnel participate in the annual assessment process:

1. Deans, Department Heads/Academic Program Directors

a. Division Deans develop an administrative services OAR for their divisions and provide support for the development of OARS for the educational programs within the division.

b. All department heads/academic program directors are responsible for completing the OAR process and demonstrating the use of assessment results to improve programs and services.

c. Annual IEOARs plans and reports include assessment of one program outcome (mission goal) at least two student learning outcomes, and one general education competency. Each outcome is assessed using at least two assessment measures to allow for triangulation of the results with institutional data.

d. Department Heads/Academic Program Directors in collaboration with program faculty are responsible for the periodic review and revision of program student learning outcomes, developing and maintaining curriculum maps of program

e. student learning outcomes to courses where the outcomes are assessed, completing the IEOAR process and making improvements to programs based on the use of assessment results.

f. Approval of each program's assessment plan rests with the Division Dean and the OIRPE.

2. **Administrative, Academic, and Student Support**
Administrative, Academic, and Student Support Services Unit managers, under the auspices of the associated Institutional Officer and in coordination with the OIRPE, are responsible for:

a. The completion of the OAR process and demonstration of the use of assessment results to improve services.

b. Assessment of at least three program outcomes (mission goals). Each program outcome is assessed using at least two assessment measures to allow for triangulation on the results with institutional data.

c. Approval of each program's assessment plan is the responsibility of the Division Dean and the OIRPE. All managers are responsible for following the process and for making improvements to programs and services based on use of assessment results.

3. **Institutional Research, Planning and Effectiveness**
The OIRPE is responsible for the:

a. Administration of the institutional assessment process to include establishment of an annual assessment calendar.

b. Design of the institutional assessment process and institutional assessment templates for educational programs, administrative, academic, and student support services, and community/public service, providing training on the assessment process and use of the templates, and best practices related to assessment of program outcomes, student learning outcomes, and general education competencies.

c. Review of planning and reporting documents for compliance with planning and reporting best practices and providing assistance with planning and reporting where needed.

d. Development of a summary of the annual institutional accomplishments of operational and assessment reporting.

4. **General Education Competency Assessment**
   General Education competencies are assessed as a part of the annual OAR process of all educational programs. The general education competencies of the College are the student learning outcomes of the Associate in Arts and Associate in Science programs. Annually these programs assess all four competencies. The remaining college programs assess at least one competency annually. Some standardized tests such as ACT's Work Keys and ETS Heighten are administered periodically to assess student achievement of the general education competencies.

   The general education competencies of the College are:
   1. Communicate effectively
      a. Read with comprehension
      b. Write with Standard English
   2. Apply mathematical skills appropriate to an occupation
      a. Apply mathematical skills to solve problems
      b. Perform computational skills
      c. Read and interpret and draw conclusions
   3. Employ effective processes for resolving and making decisions
      a. Integrate information to solve problems
      b. Summarize information and draw conclusions
   4. Demonstrate the basic computer skills necessary to function in a technological world
      a. Locate and retrieve information in digital environments
      b. Adapt, apply, and construct information in electronic environments (Word, Excel, PowerPoint, etc.)

5. **Quality Enhancement Plan (QEP)**
   As with administrative and educational programs, the WEP is assessed annually as part of the outcomes assessment process. The OIRPE provides oversight and support for the assessment of the QEP's program and student learning outcomes. The QEP process and responsibilities are further described in PTC Procedure 1-1-2010.3 Quality Enhancement Plan.

F. Institutional Scorecard

The measurable outcomes of the Strategic Plan appear on an institutional scorecard accessible by all college employees. Measures include key performance indicators related to student success, workforce development, student and community access, organizational sustainability, and PTC employees.

1. The President's leadership Team is responsible for defining the key institutional performance indicators.

2. Updates to the scorecard occur as official data is released and varies by data source.

3. Design and maintenance of the Scorecard is the responsibility of the OIRPE staff.

4. The OIRPE Statistical Analyst is responsible for analyzing the data for the indicators and maintaining the scorecard.

5. The AVP, Assessment and Compliance is responsible for communicating the updates to the President's Leadership Team.

6. The President's Leadership Team is responsible for using the information to monitor achievement of the college mission and mission goals and the strategies and tactics of the strategic plan.

G. Student Course/Instructor Evaluation

Piedmont Technical College conducts evaluations of instruction each semester.

1. The OIRPE is responsible for the administration and compilation of the results of the course evaluation survey instrument, and for providing training on use of the instrument and its results.

2. Summary student evaluation data from full-time and adjunct instructors is available through Argos reporting to each academic dean for use in division planning, program review and annual faculty evaluations.

H. Annual Program Performance Review and Five-Year Academic Program Review

1. **Annual Program Performance Review**
   a. Each academic program monitors a set of key performance indicators annually.

   b. These indicators focus on student achievement measures such as program enrollment, retention, persistence, graduates, licensure exam results, graduate placement and faculty load efficiency. The key performance indicators may be updated after each three-year cycle.

   c. Programs failing to meet key indicators are required to participate in an annual program performance review that includes an improvement plan to address the unmet key performance indicators.

   d. The OIRPE is responsible for coordinating the annual program performance review process.

   e. Department Heads/Academic Program Directors are responsible for using the process to conduct a critical review of program status by reviewing and analyzing program data and creating a plan for improvement based on the results of the review.

   f. The Vice President for Academic Affairs and Academic Deans are responsible for reviewing written program reviews, evaluating planned changes and providing feedback to Department Heads/Academic Program Directors.

2. **Five-Year Academic Program Review**
   a. The five-year program review process requires department heads/academic program directors to analyze and summarize relevant internal and external data

on each program over a five-year period and to note annual improvement actions to be implemented over the next five years.

b. It is the responsibility of Institutional Research, Planning and Effectiveness to provide the data for each program participating in the program review, provide training on the process and use of the reporting template, and to provide assistance as needed.

c. The Vice President for Academic Affairs and Academic Deans are responsible for reviewing written program reviews, evaluating planned changes and providing feedback to Department Heads /Academic Program Directors.

I. Research

It is the goal of Piedmont Technical College to provide employees and end users with access to readily available data sources to effectively and efficiently inform decision-making. When individuals cannot access the needed data and/or complete its analysis, the OIRPE assists with data collection, analysis, and training.

1. The OIRPE is responsible for assisting individuals and committees by gathering external and internal data appropriate to the regular ongoing or ad hoc request made. The Office is responsible for presenting the data in a useful format. Requests for information should provide ample lead time for the development of reports, studies, surveys, and other institutional research projects in support of the request.

2. Internal data is extracted from the College's ERP system, Banner through Zogotech. Data integrity and data standards are of utmost importance to this process. To ensure quality and validity of all reports, common College data standards and data definitions are used in all business processes. Federal and State data requirements are reflected in the College's definitions and standards.

3. Regular Reports–The OIRPE is responsible for preparing summary reports as required or requested. The summary reports focus upon those issues, which may have an impact upon the decision-making processes at the College, as well as, serve as baselines for future comparative evaluative studies. These reports include, but may not be limited to, applicant, enrollment, retention, persistence, student achievement, student success, and completion data.

4. Ad Hoc and Special Studies–Ad Hoc studies are those requested outside of the routinely produced reports. These may include follow-up reports that aid in the interpretation of regularly produced reporting or are requested to address a current issue. Special studies are those reports are one-time endeavors to review, finalize, or research a topic or concern which is relevant to the decision- making process of the College. Ad Hoc or special studies may be requested by administrators or staff. Results of ad hoc and special study requests are disseminated to the appropriate college personnel with a copy filed in the OIRPE.

5. Surveys distributed externally within the community and internally within the College are a direct reflection of the quality of the institution. Therefore, particular care is given in preparing, distributing and collating all surveys conducted under the auspices of the College to use proper techniques of survey research.

a. Small Audience Surveys
Surveys whose purpose is to obtain feedback or input from a specific audience such as those seeking feedback on an event, classroom experience or assignment, a service provided to students or employees, may be designed, distributed, and analyzed without review. However, assistance with survey design, distribution, and analysis is available. For assistance, submit an IT Work System ticket. The ticket will be assigned to either College Communications o Institutional Research, Planning, and Effectiveness staff who will schedule a consultation meeting with the requestor.

b. The OIRPE is responsible for coordinating the design, distribution, and analysis of campus wide surveys. When seeking campus wide feedback or input through surveying, a request should be submitted using the IT Work System. Submitted tickets are assigned to Institutional Research, Planning, and Effectiveness staff who will schedule a consultation meeting with the requestor. Results of these surveys are shared with the requesting department and others on campus as appropriate.

c. Program Advisory Committees
Advisory Committees provide feedback on program and graduate performance. Advisory Committees should complete the PTC Advisory Committee Survey at least once a year. It is the responsibility of the department head or academic program director to administer the survey. Results should be distributed to the Institutional Research, Planning, and Effectiveness staff and to Academic Affairs for review, analysis of trends, and archiving.

d. Focus Groups
Focus groups are conducted by various trained college personnel to gather in-depth information on specific topics. When focus groups are conducted by or when storage is requested, the OIRPE maintains notes analyzes and maintains notes from focus groups.

Confidentiality

All data and information contained in surveys and studies of college operations and programs do not include the names or social security numbers of individual students and College personnel. The OIRPE adheres to a confidential structure that protects and provides the reliability for conducting and analyzing operational data. The Office of Institutional Research, Planning and Effectiveness abides by the Association for Institutional Research Statement of Ethical Principles.

Policy and Procedure Review

The OIRPE is responsible for coordinating and maintaining the institutional policy and procedure manual and review cycle as outlined in PTC Policy 1-1-1010 Policy and Procedure Development and PTC Procedure 1-1-1010.1 Policy and Procedure Development.