

Guidelines for Developing and Implementing Comprehensive Assessment Plans in Administrative Units

SUNY Oneonta Institutional Assessment Committee
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FOREWORD: Checklist for Continuing Plans

The administrative unit assessment cycle begins with a “Full” plan that outlines goals and objectives for a three-year period and includes an action plan to assess about one-third of the objectives during the first year. For the second and third years of the cycle, the unit submits an interim “Continuing” plan that reports actual outcomes from the previous year’s action plan, discusses the results (“close the loop”), and provides a new action plan to assess next year.

The summary checklist immediately below addresses “Continuing” plans. Please read the next five pages about the “Four-Step Process of Writing an Assessment Plan” for further instructions about creating or revising “Full” plans.

CHECKLIST FOR CONTINUING PLANS

Report Outcomes

- ✓ Complete the action plan grid by reporting on each action in the Actual Outcome column:
 - Actual Outcomes should correspond directly with the measurements listed in the Expected Outcome column (i.e. if the expected outcome was presented as empirical data, the actual outcome should be reported in the same manner).
 - Actual outcomes should be brief, concise, and to the point. (A narrative discussion of actual outcomes should be provided in the next Closing-the-Loop section.)
 - If an action is not completed by the unit, note as such in the Actual Outcome column and discuss in the Closing-the-Loop section narrative.

Close the Loop

- ✓ Unit staff members should discuss outcomes and work together to develop a narrative that summarizes conclusions regarding unit effectiveness based on comparisons of expected and actual outcomes:
 - Compare expected and actual outcomes, then present conclusions based on this analysis
 - Demonstrate how outcomes support unit objectives and activities
 - Discuss relationship between resources – available or requested – and outcomes
 - Recommend changes in future activities or outcomes based on conclusions
 - Consider revision, combination, or elimination of objectives

Create a New Action Plan

- ✓ Unit staff members should work together to develop an action plan for the next year. The plan should address a new group of objectives from the unit’s approved goals and objectives, representing about one-third of the total number of objectives:
 - Specify strategies/actions intended to accomplish each objective
 - Avoid breaking down actions into operational steps
 - For each strategy/action, include:
 - Timeline, position(s) responsible, and resources required to accomplish outcome
 - Description of expected outcome and how outcome will be measured; include attitudinal measures for internal and/or external constituents (as appropriate)
 - Indicate how expected outcome aligns with the corresponding goal and objective
 - If operational, describe expected outcome in terms of improving efficiency or effectiveness
 - Include comparisons to similar units (e.g. related organizations, schools, standards)

NOTE: This checklist corresponds to the comment sheet Institutional Assessment Committee (IAC) peer reviewers use to help colleagues write assessment plans (see Appendix B: Comments for Continuing Plans on the final page of this document). If certain essential criteria are unmet and unexplained, IAC cannot recommend a plan for supervisor approval. **IAC representatives are available to discuss plans during all phases of development and review – just ask.**

Introduction

Like all great organizations, colleges and universities must assess themselves to continuously improve in their mission of providing quality education and related services to students and their constituents. Although compliance is a fundamental function of assessment, and is required by our university system and accrediting bodies (e.g. [Middle States Commission on Higher Education](#)), SUNY Oneonta's focus is to *enhance* campus programs and services through meaningful consideration of where we have been so we can best plan where we are going and how to get there.

This document guides all people in administrative units – not only managers – as they look to contribute to our larger aspirations, then collectively plan and assess in an inclusive, participatory process. It encourages alignment with SUNY's master plan (a document revisited every four years as required by NYS Education Law section 354) as well as local College plans. Ours is not the only college in SUNY or in the world; we can learn from self-reflection and comparisons to others. As conditions change, these guidelines and periodic peer review will help units – through assessment planning as a process – to evolve as well. College leaders (e.g., vice presidents, chiefs, deans, etc.) should help everyone in their units to learn about and understand these broad expectations, especially cooperative efforts between divisions as well as changes within the higher education field. Our institutional accrediting body has been clear: *no unit is exempt from this process.*

Advice and assistance is available upon request from the College's [Institutional Assessment Committee](#) (IAC) via its representatives from the divisions of Academic Affairs, Finance & Administration, Student Development, and College Advancement, and the Faculty Senate Committee on Administrative Review. SUNY Oneonta, with the advice and consent of the College Senate, created IAC and charged its appointed volunteer members with service to the college "to oversee and facilitate planning and assessment of the College's administrative units."

Alignment

SUNY Plans [e.g. "Rethinking SUNY" (2004-08) to "Power of SUNY" (2008-2012) to "[SUNY Excels](#)"]

^ SUNY Oneonta Strategic Plan [e.g. "[Scholarship, Service, Strength](#)" (2015-2018) and [P.I.P.](#)]

^ SUNY Oneonta [Academic Master Plan](#)

^ Divisional Plan (when present)

^ Unit Plan

The assessment plan process dovetails with annual reports required of each administrative unit at the end of the year. Assessment planning helps units summarize major accomplishments and challenges, justify proposed changes through appropriate feedback, and refine goals and objectives for the next year as they relate to overall campus direction. Assessment also guides strategic planning, resource planning, and continuous improvement.

Four-Step Process of Writing an Assessment Plan

Please use terms for a general audience, define acronyms, and avoid jargon.

Each unit should maintain a *full* assessment plan that shares the unit mission statement as well as the entire set of goals and objectives. This is the basis for interim assessments via smaller, annual action plans that examine a portion of stated objectives. Each annual action plan assessment report will address one-third of the unit objectives so that every three years units will have considered their entire operations.

This document describes a step-by-step assessment model. Each unit assessment plan should contain section headers: **I. Create the Mission Statement; II: Set Goals and Objectives; III: Create an Action Plan with Measures; IV: Use Outcomes to Plan.**

Plans are living, changing documents. Interim revisions to goals and objectives may reflect changes that occur from time to time within unit structures or organizational charts; divisional missions, goals, or objectives (when present); the College's mission, values, or strategic plans; or in comparable units within and/or outside the College, including SUNY institutions and national associations. If the College or outside environment shifts, each unit should consider changes too.

At the end of the three-year cycle, the unit should submit a new *full* plan to peer view by IAC members that completes Steps 1-3 below. Reflect upon the unit mission statement, relating it to the College and its role within SUNY. Make appropriate changes to goals and objectives based on feedback from the previous years. Include the actual outcomes from the action plan table from the prior year. A *full* plan describes for readers the process that all people in the unit followed to (re)develop – or reaffirm – the unit mission statement as well as all goals, and objectives for a three-year period. Finally, the action plan table for the next year will show *only those areas to be assessed during that year*.

Over the subsequent two years *continuing* plans show expected and actual outcomes from each previous year. Please write a few paragraphs of discussion to show how the unit is assessing and dealing with results from comparing expected vs. actual outcomes (Step 4). Then provide a new annual action plan grid for other objectives and expected outcomes planned for the next year.

Note: IAC peer reviewers will follow a checklist and comment sheet that aligns with these guidelines to provide basic feedback to units as well as the division leaders *who are responsible for documenting their administrative decision with the Office of Institutional Research* (see Appendix B). Reviewers are also available for help while units develop and revise assessment plans. Please [contact](#) the [Office of Institutional Research](#).

Step 1: Create the Mission Statement

Assessment planning, as a process, begins with the development of – and commitment to – a mission statement. It describes the purpose of the unit and echoes the mission of the College as well as any accreditation standards.

The mission must be concise and should clearly communicate *what the unit does, why, and for whom* as related to this institution of higher education. A brief and well-written statement also distinguishes the unit from other, potentially similar offices within the College. The process of developing of the mission should involve as many of the unit's staff members as possible who periodically evaluate it in a similarly inclusive fashion. The statement guides development of the unit's goals, each replicating pieces of the mission statement.

General Format of the Mission Statement

The mission of the [unit's name(1)] is to [primary purpose / why it exists (2)] by providing [essential services / what it does (3)] for [direct stakeholders (4)] and [external accreditation or standards, if any (5)].

Sample Mission Statement

The mission of Job Placement Services (1) is to help the university send forth productive, global-ready citizens (2) by exploring job, internship, and higher education opportunities, industry networks, career paths, and application materials (3) with our current students and graduates of the previous year (4) according to standards set by university career guidance professional organization (5).

Step 2: Set Goals and Objectives

People within each unit should reach consensus regarding their major goals and objectives, drawing advice from others outside the unit who are familiar with its operations. This helps everyone understand how they act on behalf of the unit to help fulfill parts of the overall College mission. Divisional and unit leaders (e.g., vice presidents, chiefs, deans, etc.) must make sure that personnel contributing in this process know and understand SUNY, College, Divisional, and

unit plans in the interest of alignment. Of particular importance in a higher education institution is any impact on student learning or support for other units that provide direct student services.

Units will find it extremely valuable to examine their mission, goals, and objectives relative to comparable units across SUNY or nationwide (i.e., external benchmarks). We aspire to greatness, achieving best practices in the field. This College is not alone, distinctive, or unique in this competitive pursuit.

Each assessment plan should identify only **3-5 objectives** to assess **each year**, representing about a third of all unit objectives, across several goals. Constituent satisfaction with services should appear in the objectives.

Note: Creating too many goals and objectives will make assessment formidable and threaten its success. Some smaller units may have fewer goals and objectives, or may use the assessment process to consider organizational realignment such as absorption of one-person offices into a larger unit with similar goals.

Goals vs. Objectives

Goals:

- General intentions/purposes that are broad and more long-range in scope and not changing
- Use words or phrases directly out of unit mission statement (i.e. primary purpose and/or categories of essential services)
- Not directly measurable
- Often a “process” statement (i.e., begin with verbs such as establish, provide, enhance)

Objectives:

- Specific and measurable based on measures of expected outcomes (i.e. what it does, also considering external standards)
- Multiple objectives for each overall goal
- Often a change-oriented statement that shows directionality compared to moving up/down, or maintaining high/low levels when a ceiling/floor exists (i.e., use words such as increase, decrease, improve, maintain)

Step 3: Create an Action Plan with Measures

Units must identify proper methods to gather data appropriate for assessing effectiveness and informing better practices. This is assessment for enhancement, not simply compliance. In addition, units must establish a timeline and assign staff (position titles, not names) to implement and measure their assessment plans.

People across the unit should find, set, and evaluate progress benchmarks as a group even if one administrator creates and submits the final plan. Agree upon standards to improve against **internal measures** (how unit did relative to itself and others at the College) and look for **external** comparisons, especially aspirational peers. For example, internal success may be a new personal record, but it may not be competitive enough to sustain the elite status we desire compared to other colleges and universities.

Assessment will help set interim benchmarks toward reaching the final outcomes. For example, a team should know the final score at the end, but coaches track key scores and statistics during the game. Discuss trends or expectations to create measurable targets for what people expect to happen along the way.

Units predict in an action plan their **expected outcomes**, or anticipated results based on measureable indicators. Later the unit will use this forward-looking plan to report on the **actual outcomes** and use the feedback to adjust future activities, changes to goals and/or objectives, or even organizational changes.

Performance Indicators measure difference between now and progress toward a desired future. New programs or services may initially track inputs and outputs, but are not encouraged for mature assessment plans; *only outcomes judge your progress* along the path.

- Input (sign up, enrollment, pledge, equipment purchased)
- Output (attendance, completion, funds raised, equipment used)
- *Outcome* (positive perceptions, pass rate, certification, graduation, employment, scholarship awarded, equipment improves operations)

Process Indicators judge how well units do what they do. While the inputs and outputs may lead to a positive outcome, the process should also improve to remain competitive.

- Efficiency (cost per unit)
- Efficacy – was it effective? (e.g. difference in pre- and post- scores)
- Quality – (satisfaction of external customers such as parents, students, alumni, contractors; and internal customers such as supervisors or direct reports)

Specific measures of *expected outcomes* – not inputs and outputs – must appear for each objective. Measures of performance as well as process should be used to improve not just what is done but how it occurs. When possible, units should evaluate satisfaction levels of all groups who use their services, including external constituents as well as people in other units within the College.

Your strategic choice of goals, objectives, and outcomes influences the **activities, persons** responsible, and **resources** (e.g. budget, philanthropy, grants, facilities) needed. This becomes your Action Plan. An Action Plan template to graphically organize statements from each step appears below. This “action plan” chart is a helpful tool and a required component of every assessment plan.

Important: Please include a brief description of the process the unit went through to complete each step, from defining or refining the mission through creating the action plan. Descriptions that show an inclusive process help peer reviewers understand how these assessment plans developed and how to improve the end product.

OBJECTIVE	ACTIONS/STRATEGIES	TARGET COMPLETION DATE	RESOURCES REQUIRED ¹	POSITION(S) RESPONSIBLE ²	MEASURE / EXPECTED OUTCOME	ACTUAL OUTCOME
1.	1.	1.	1.	1.	1.	1.
2.	2.	2.	2.	2.	2.	2.

Step 4: Use Outcomes to Plan – Closing the Loop for Continuous Improvement

The information obtained from the assessment of expected outcomes should feed directly back into a review of unit objectives and, subsequently, its programs/services. How is the unit using this feedback to improve what it is doing? This process results in the continuation of programs/services that are clearly leading to the realization of unit goals and the discontinuation or revision of those that are not. It is also possible that the assessment process may lead to the revision or elimination of old objectives and/or the development of new ones.

¹ A unit should only include “Resources Required” for an action/strategy if those resources exceed existing allocations and workload and if it has determined that the resources are available to implement the action/strategy.

² List position titles not actual personnel (e.g. “Director” not “Pat Jones”). Units should consult with individuals from other units before designating them as a partner in implementing an action/strategy.

This is the primary step for *continuing* plans during each year of the full, three-year cycle. Units should reflect at the end of the third year on the entire assessment prior to completing and submitting a new, full plan.

When reporting at year-end, Actual Outcomes should correspond directly with the measurements listed in the Expected Outcome column (i.e. if the expected outcome was presented as empirical data, the actual outcome should be reported in the same manner). Actual outcomes should be brief, concise, and to the point. A narrative discussion of actual outcomes should be provided in the “Closing-the-Loop” section. If unit does not completed a previously planned action for whatever reason, note this in the Actual Outcome column and discuss in the Closing-the-Loop section.

Close the Loop

Unit staff members should discuss outcomes and work together to provide a narrative for peer reviewers and, ultimately, division leaders that summarizes conclusions regarding unit effectiveness:

- Demonstrate how outcomes support unit objectives and activities
- Compare expected and actual outcomes and present conclusions
- Discuss relationship between resources and outcomes
- Recommend changes based on conclusions
- Consider revision or elimination of objectives

Putting it Together

Create **one (1)** final document for peer review. Please include a list of all Goals and Objectives, but highlight the one-third (1/3) of those to be assessed in the upcoming year’s annual assessment plan along with the related Action Plan.

A sample assessment plan for an imaginary administrative unit is in **Appendix A**. The sample includes sections for each step in assessment planning. It may be helpful to review **Appendix B**, the Checklist/Comment Sheet that the IAC uses for peer review and collegial commentary for new or continuing assessment plans.

Create a New Action Plan

Unit staff members should work together to develop an action plan for the next year. The plan addresses a new group of objectives from the unit’s approved goals and objectives – about one-third of the total number of objectives:

- Specify strategies/actions intended to accomplish each objective
 - Avoid breaking down actions into operational steps
- For each strategy/action, include:
 - Timeline, person(s) responsible, and resources required to accomplish outcome
 - Description of expected outcome and how outcome will be measured; include attitudinal measures for internal and/or external constituents as appropriate
 - Description of action in terms of strategic alignment with the objective
 - If operational, describe action in terms of improving efficiency or effectiveness
 - Include comparisons to similar units (e.g. related organizations, schools, standards)

Appendices

Appendix A: Full Assessment Plan Sample

Graduate Studies and Research at Samuel Pepper University

I. Create the Mission Statement

In collaboration with the faculty and staff at Samuel Pepper University, the **Office of Graduate Studies and Research (GSR)** provides financial and administrative support to recruit and retain a community of **scholars and learners** who participate in high-quality graduate courses, conduct research and creative efforts, and act under the oversight of policies and procedures regarding graduate education and research and creative activity as required by the university as well as state and federal law. GSR helps fulfill the University's mission by engaging in actions intended to provide "the highest quality instruction to all students" and to support "faculty participation in the discovery, synthesis, application, and creation of new knowledge and art forms."

II. Set Goals and Objectives

Goals and Objective

All GSR staff met on a weekly basis during the 2015-16 academic year to establish a set of goals and objectives that would have the support of most, if not all, staff members. The process began with a review and discussion of existing goals and objectives with this process leading to the retention and elimination of our core, mission-related goals and objectives. There was also sustained review of the University's new mission statement and strategic plan and incorporation of components of that statement into GSR's revised mission statement (see above).

During this examination of internal documents and materials, GSR also turned to sources outside the university for additional guidance. Specifically, similar offices at ten universities commonly referred to as Samuel Pepper's peer institutions were reviewed carefully with respect to their organization, structure, functions and, if available, stated mission, goals, and objectives. GSR also included examinations of two national organizations central to its work – the Council of Graduate Schools (CGS) and the National Sponsored Programs Administration Alliance (NSPAA) – with special attention paid to those organizations' standards and benchmarking practices. Finally, GSR included in its efforts to accomplish this step a thorough review and discussion of all constituents served by the Office, both internal and external to Samuel Pepper, over the past ten years.

On the basis of a unit-wide discussion and poll, GSR staff reached consensus that the goal statements listed below accurately represented the primary functions of the Office and should therefore serve as GSR goals.

Following the identification of the agreed-upon goals, GSR staff separated into work groups, with each working to develop reasonable and, ultimately, assessable objectives. The results of each group's efforts were brought back to the staff as a whole for final review, revision, and adoption.

The goals and objectives that emerged from this process are listed immediately below.

Goal #1: Develop new degree programs and revise existing programs at the graduate level with focus on quality.

Objectives

- A. *Increase* advisory resources to programs initiating or transforming their academic programs.
- B. *Decrease* time required for program development or revision
- C. *Maintain* program quality and accountability according to external standards of accreditation.

Goal #2: Ensure enrollment sustainability over time.

Objectives

- A. *Increase* recruitment, applications, and retention of highly qualified and diverse graduate students.
- B. *Decrease* costs and increase funding opportunities that support ongoing student enrollment.

Goal #3: Support faculty and staff for the promotion and development of sponsored research and creative programs.

Objectives

- A. *Maintain* effective administrative infrastructure for research and graduate education.
- B. *Expand* research and creative opportunities for faculty and students.
- C. *Expand* research applications which promote sustainable economic development.
- D. *Enhance* physical resources for research and graduate education.

Goal #4: Ensure compliance with all federal, state, and system policies dealing with graduate curriculum and research.

Objectives

- A. *Maintain* as current all policies and procedures related to graduate education and research.
- B. *Increase* professional development opportunities that address compliance with policies and procedures related to graduate education and research.

III. Create an Action Plan and Measures

During this academic year, GSR will assess the portion of objectives included below in Table 2, using the actions and assessment measures indicated for each action. The next third of objectives will be assessed in the next year, followed by the remaining third in a subsequent year.

Action Plan

Goal #1: Develop new degree programs and revise existing programs at the graduate level with focus on quality.

Objective	Actions/Strategies	Target Completion Date	Resources Required	Person(s) Responsible	Expected Outcome	Actual Outcome
Maintain program quality and accountability according to external standards of accreditation.	1. Create Graduate Program Assessment Committee (GPAC) 2. with members from all programs	1. 09/15/10	1. N/A	1. Director, Deans	1. GPAC formed and operational	
	Review existing program review and process and update as necessary to assure all programs are assessed every five years (or as meets accreditation standards)	2. 10/15/10	2. \$1,000	2. GPAC	2. Program review schedule in place	
	Review all program reviews from last round and provide feedback (accredited programs only)	3. 01/30/11	3. N/A	3. GPAC	3. All reviews evaluated	

IAC Note: For a unit's initial assessment plan, it need only include in its action plan those objectives it actually intends to assess during its first year of implementation. It must be clear from its document, however, that the unit has plans in place to assess all objectives over a span of three years.

IAC Note: A unit should only include "Resources Required" for an action/strategy if those resources exceed existing allocations and workload and if it has determined that the resources are available to implement the action/strategy.

IAC Note: Units should consult with individuals from other units before designating them as a partner in implementing an action/strategy.

Goal #2: Ensure enrollment sustainability over time.

Objective	Actions/Strategies	Target Completion Date	Resources Required	Person(s) Responsible	Expected Outcome	Actual Outcome
Increase recruitment, applications, and retention of highly qualified and diverse graduate students.	1. Expand recruitment to all state system schools	1. 11/01/10	1. \$62,000	1. Director	1. Increase of at least 1/3 of remaining partner campuses each year	
	Focus advisement on retention of current students toward on-time graduation	2. 06/15/11	2. \$100,000	2. Assistant Director; Academic Advisement (cross-division consultation)	Retention rate increases toward aspirational peer average of 80%	

Goal #4: Ensure compliance with all federal, state, and system policies dealing with graduate curriculum and research.

Objective	Actions/Strategies	Target Completion Date	Resources Required	Person(s) Responsible	Expected Outcome	Actual Outcome
Maintain as current all policies and procedures related to graduate education and research.	1. Graduate Administrators Council (GAC) 2. annually reviews existing graduate policies	1. 09/15/10	1. N/A	1. Director, Deans	GAC submits reviews and recommendations to Cabinet	
	Identify graduate policies that are non-compliant with operational federal, state, and system policies	2. 01/15/11	2. N/A	2. GAC	1. Policies identified and recommendations made to retain compliance	

**IV. Use Outcomes to Plan – Closing the Loop for Continuous Improvement
(See completed action plan below used for closing the loop reference)**

As has been the case throughout the previous assessment steps, GSR intends to “close the loop” through a very inclusive and participatory process. A committee consisting of one representative from each of the Office’s functional areas (as described above in Section III) will serve as a central organizing Assessment Committee, and will be charged to assure that all data from the assessments described in Section III have been collected and compiled. All assessment results will then be disseminated to all GSR staff members for review and consideration, and each of the functional areas will be expected to meet as a sub-group to discuss their results and make recommendations regarding: 1) changes in area activities based on the results; 2) objectives and actions to be included in GSR’s next assessment plan and action table; and 3) revisions to the entire assessment plan (as necessary).

The creation of and full enrollment of GPAC has allowed a full review of existing plans and a further review of plans from last cycle. While GPAC intended to have all plans from last cycle reviewed there is one outstanding plan. Through the process of plan review GPAC has discovered that input from review teams during the plans cycle not only helps to create better plans but also helps along timely completion. GPAC will discuss whether formalized time for input is better or if random check-ins will be more effective. A new action will be added to next action plan regarding input.

GSR was able to increase campus partnerships by 40% this year. This was in excess of our goal. We will continue to use the practices that aided this increase. Further data will be collected to see if this increase in partner campuses increase our enrollment yield. GSR was also able to increase retention by 7% to 76%. The change in focus to timely graduation seems to have had the desired effect. This data will be tracked over the next two years to see if similar results apply. Retention has not reached the desired 80% yet, but GSR feels that the dramatic up tic this year will increase even more next year helping us to achieve said goal.

GSR takes compliance issues very seriously and has reviewed all policies about graduate curricula and research. Upon delivering the review to Cabinet it was mentioned that there are two system policies that we are not in perfect compliance with. Both of these policies are under Cabinet purview. Suggestions for possible changes to the policies have been made to Cabinet and we are waiting on a decision. GSR will check with the Cabinet monthly for their decision so that it can be implemented.

Goal #1: Develop new degree programs and revise existing programs at the graduate level with focus on quality.

Objective	Actions/Strategies	Target Completion Date	Resources Required	Person(s) Responsible	Expected Outcome	Actual Outcome
Maintain program quality and accountability according to external standards of accreditation.	<ol style="list-style-type: none"> 1. Create Graduate Program Assessment Committee (GPAC) with members from all programs Review existing program review and process and update as necessary to assure all programs are assessed every five years (or as meets accreditation standards) Review all program reviews from last round and provide feedback (accredited programs only) 	<ol style="list-style-type: none"> 1. 09/15/10 2. 10/15/10 3. 01/30/11 	<ol style="list-style-type: none"> 1. N/A 2. \$1,000⁸ 3. N/A 	<ol style="list-style-type: none"> 1. Director, Deans⁹ 2. GPAC 3. GPAC 	<ol style="list-style-type: none"> 1. GPAC formed and operational 2. Program review schedule in place 3. All reviews evaluated 	<ol style="list-style-type: none"> 1. GPAC formed with total Committee enrollment 2. Review schedule in place and all existing programs reviewed. 3. 95% of programs reviewed from last round.

Goal #2: Ensure enrollment sustainability over time.

Objective	Actions/Strategies	Target Completion Date	Resources Required	Person(s) Responsible	Expected Outcome	Actual Outcome
Increase recruitment, applications, and retention of highly qualified and diverse graduate students.	1. Expand recruitment to all state system schools	1. 11/01/10	1. \$62,000	1. Director	1. Increase of at least 1/3 of remaining partner campuses each year	1. 40% increase in partner campuses this year
	2. Focus advisement on retention of current students toward on-time graduation	2. 06/15/11	2. \$100,000	2. Assistant Director; Academic Advisement (cross-division consultation)	2. Retention rate increases toward aspirational peer average of 80%	2. Retention rate increased by 7% to 76%

Goal #4: Ensure compliance with all federal, state, and system policies dealing with graduate curriculum and research.

Objective	Actions/Strategies	Target Completion Date	Resources Required	Person(s) Responsible	Expected Outcome	Actual Outcome
Maintain as current all policies and procedures related to graduate education and research.	1. Graduate Administrators Council	1. 09/15/10	1. N/A	1. Director, Deans	1. GAC submits reviews and recommendations to cabinet	1. All reviews submitted to cabinet
	2. (GAC) annually reviews existing graduate policies Identify graduate policies that are non-compliant with operational federal, state, and system policies	2. 01/15/11	2. N/A	2. GAC	2. Policies identified and recommendations made to retain compliance	2. Currently 2 policies are non-compliant with System policies

Appendix B: Checklist / Comment Sheet for Unit Assessment Plans

Checklist / Comments for New Plans

Unit Name:

IAC Peer Review Team:

Scoring Guide: M=Meets Guidelines; U=Does Not Meet Guidelines (“Unmet”); N/A=Not Applicable (rare)

Item from Guidelines	Score	Comments
Mission Statement (*required)		
Contains Unit Name		
Reflects College mission and values		
Communicates primary purpose (why it exists)		
Communicates essential functions (what it does)		
Communicates for whom the unit operates (stakeholders)		
Contains standards of external accreditation (if applicable)		
[General Section Score; Other reviewer comments]		
I. Action Plan from Previous Year		
*Actual outcomes provided for all expected outcomes		
Quality of reported outcomes		
[General Section Score; Other reviewer comments]		
II. Closing the Loop on Previous Year Action Plan		
*Assessment feeds directly back to unit objectives and activities		
Revision, elimination, recommendations for change, and/or carry-over of objectives considered		
*Conclusions made based on comparisons of expected and actual outcomes		
Relationship of resources and outcomes assessed		
Identify new outcome measures, as appropriate, for next round		
[General Section Score; Other reviewer comments]		
III. Closing the Loop on Previous Full Assessment Plan		
Assessment feeds directly back to unit objectives and activities		
Revision, elimination, recommendations for change, and/or carry-over of objectives considered		
Conclusions made based on comparisons of expected and actual outcomes		
Relationship of resources and outcomes assessed		
[General Section Score; Other reviewer comments]		

IV. Setting Goals and Objectives		
a. Process included...		
Consensus from unit members of major goals and objectives		
Review of College mission and values		
Review of College comprehensive & strategic plans		
Review of Divisional mission (if available)		
Comparisons made to other institutions and field at large		
Official certifications or national associations		
[General Section Score; Other reviewer comments]		
b. Goals and Objectives reflect...		
Performance indicators (“assessability”)		
Relevant relationships to all programs/services offered as part of meeting these objectives		
Tracking use of programs/services (and by whom)		
Constituent satisfaction with services		
Direct impact on constituents (student learning, if applicable)		
Consultation with other campus units (for joint activities)		
[General Section Score; Other reviewer comments]		
V. Evaluating Programs/Services (optional)		
Programs/services reviewed		
Unit programs/services related to unit goals & objectives (congruent to College plan)		
Resources listed to support programs/services listed		
[General Section Score; Other reviewer comments]		
VI. Creating an Action Plan For the Upcoming Year		
*Proper assessment methods identified		
*Specific expected outcome and process measures linked to each objective		
Attitudinal measures (e.g. satisfaction) for internal and/or external constituents used (as appropriate)		
Timeline established		
Staff assigned for implementation		
Comparisons made to similar units		
[General Section Score; Other reviewer comments]		
VII. Overall Score and Recommendation		
Key M: Plan can be implemented meaningfully as is, with no substantial revisions recommended. U: Plan in its present form would yield minimal information, and substantial revisions are recommended. NA: Not Applicable (rare)		

NOTE: The Institutional Assessment Committee (IAC) peer reviewers use this form to help colleagues write assessment plans. If essential criteria marked by an asterisk (*) are unmet and unexplained, IAC cannot recommend a plan for supervisor approval. **IAC representatives are available to discuss plans during all phases of development and review.**

IAC Checklist / Comment Sheet for Revised Assessment Plans

Checklist / Comments for Continuing Plans

Unit Name:

IAC Peer Review Team:

Scoring Guide: M=Meets Guidelines; U=Does Not Meet Guidelines (“Unmet”); N/A=Not Applicable (rare)

Item from Guidelines	Score	Comments
I. Completed Action Plan from Previous Year		
*Actual outcomes provided for all expected outcomes		
Quality of reported outcomes		
[General Section Score; Other reviewer comments]		
II. Closing the Loop on Previous Year Action Plan		
*Assessment feeds directly back to unit objectives and activities		
Revision, elimination, recommendations for change, and/or carry-over of objectives considered		
*Conclusions made based on comparisons of expected and actual outcomes		
Relationship of resources and outcomes assessed		
[General Section Score; Other reviewer comments]		
III. New Action Plan for Upcoming Year		
*Proper assessment methods identified		
*Specific expected outcome and process measures linked to each objective		
Attitudinal measures (e.g. satisfaction) for internal and/or external constituents used (as appropriate)		
Timeline established		
Staff assigned for implementation		
Comparisons made to similar units		
[General Section Score; Other reviewer comments]		
IV. Overall Score and Recommendation		
Key		
M: Plan can be implemented meaningfully as is, with no substantial revisions recommended.		
U: Plan in its present form would yield minimal information, and substantial revisions are recommended.		
NA: Not Applicable (rare)		

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