

# CECIL COLLEGE INSTITUTIONAL EFFECTIVENESS ASSESSMENT PLAN

2<sup>nd</sup> ed., December 2024



## INTRODUCTION

In contrast to student learning assessment, which is led by the Education Assessment Committee, Institutional Effectiveness Assessment focuses on assessment of administrative and student support functions of a college or university. All of the Middle States' *Standards for Accreditation* include a reference to assessment: "periodic assessment of mission and goals" (Standard I); "periodic assessment of ethics and integrity" (Standard II); "periodic assessment of the effectiveness of programs providing student learning opportunities" (Standard III); "periodic assessment of the effectiveness of programs supporting the student experience" (Standard IV); "periodic assessment of the effectiveness of planning, resource allocation, institutional renewal processes, and availability of resources" (Standard VI); and "periodic assessment of the effectiveness of governance, leadership, and administration" (Standard VII).<sup>1</sup>

Some of the collegial advice the College received after its 2020 accreditation review was to develop processes that would formalize the institutional effectiveness assessment efforts that were already being done. This *Institutional Effectiveness Assessment Plan* outlines this process. Key components of this process include the implementation of annual departmental reports as well as the implementation of periodic comprehensive department reviews.

If you have any questions about these processes, please reach out to the Associate Dean of Academic Assessment and Development or any other member of the Institutional Effectiveness Committee.

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<sup>1</sup> Some may have noticed that Standard V is not included in this list: Standard V (Educational Effectiveness Assessment) is the focus of the Education Assessment Committee.

*As we met with campus constituents and drafted this assessment plan, we realized that there was some confusion about different types of activities that can all be labeled “assessment.” The following definitions are provided in order to clarify the differences between these activities.*

## **DEFINITIONS**

**Institutional Effectiveness Assessment** is an assessment process that evaluates the overall effectiveness of a department or institution in achieving mission, goals, and compliance with accreditation standards. Usually, this kind of assessment focuses on operation and quality goals such as student satisfaction data, retention rates, data on student internships, “client” satisfaction with departmental services, efficacy of departmental processes, and other metrics of department activity.

**Quality Control** aspects of assessment involve ensuring that standards for quality in a certain area are maintained. For example, the College’s financial audit ensures the college meets certain standards there, and the Quality Matters review of online courses ensures instructors maintain defined standards in those courses. Quality control aspects of assessment are closely related to, and sometimes considered part of, Institutional Effectiveness Assessment.

**Assessment of Student Learning** attempts to answer the question of whether students are achieving the learning goals the College has identified for them. This kind of assessment can happen at the course level, the program level, or at the institution level and includes program-specific learning as well as general education.

**Placement** is the process through which the College assesses the level of knowledge students have when they first enroll at the College. This process is most often used to place students in the appropriate English or Math course.

## **CECIL COLLEGE**

### **2021-2025 Strategic Plan Overview**

#### **VISION**

Transforming the lives of our students and enriching our community.

#### **MISSION**

Cecil College provides a supportive learning environment that focuses on innovation, student success, academic progress, and workforce development. We are committed to promoting opportunities that enrich the quality of life for the diverse communities we serve.

#### **VALUES**

**Accountability:** We take responsibility for our words and actions, operate with transparency, and hold individuals accountable to those they serve.

**Collaboration:** We foster a cooperative environment that seeks consensus and builds on the strength of each individual within the College and the community.

**Community:** We demonstrate compassion for the well-being and success of our students, our community, and each other.

**Excellence:** We strive for excellence in all facets of our academic enterprise and operations.

**Inclusion:** We promote respect, inclusivity, and equity, recognizing differences as strengths.

**Innovation:** We pursue innovative learning environments for our students and community.

**Integrity:** We commit to ethical and honest conduct.

**Stewardship:** We honor public trust by being principled stewards of the human, fiscal, and physical resources of the College.

#### **STRATEGIC PRIORITIES**

Strategic Priority One: Advance Student Access, Equity, and Success

Strategic Priority Two: Enhance Academic Excellence

Strategic Priority Three: Optimize Workforce Development

Strategic Priority Four: Expand Community Partnerships and Engagement

#### **STRATEGIC PLAN ALIGNMENT**

For a long time the institution has been using data to track and evaluate departmental effectiveness. This plan formalizes those processes. The Assessment Plan was updated after careful review of strategic priorities and existing conditions. This Assessment Plan's integrated approach specifically addresses the Middle Standards for Accreditation which requires the "periodic assessment" of all aspects of an institution and using assessment results for planning, budgeting, and improvement.

## **WHY DO ASSESSMENT?**

At its heart, institutional effectiveness assessment is about increasing quality in higher education. Decades ago, this quality was measured by inputs, such as student SAT scores, number of faculty with doctorate degrees, and number of volumes in the library. Now, institutions are expected to track data that shows they are meeting national and state regulations and standards, meeting quality standards for improvement, and using that data for planning and budgeting. Together these data facilitate student success and improve all departments on campus. In doing this, the institution attempts to answer the questions: how do we understand what students need to succeed? What changes do we need to make to improve? How do we measure that improvement? How do we ensure that the college is making the best use of the resources it has?

## **GOALS OF INSTITUTIONAL EFFECTIVENESS ASSESSMENT**

The purpose of institutional effectiveness assessment is twofold. Most importantly, assessment documents what is happening at the institution, as well as steps to improve what is happening. Second, assessment helps establish a foundation for planning, resource allocation, and decision making.

The Middle States Commission on Higher Education (MSCHE) requires institutions to assess all aspects of its activities in a way that is organized, systematic, sustainable, periodic, and useful. That is, the College must engage in assessment every year. The process must be sustainable over time, given the College's resources (both human and financial). And the College must use the data/results to make changes (this is also called "closing the loop"). Uses of assessment data most often include a combination of improving programming and services and supporting planning and budgeting.

Examples of measures that could be used in institutional effectiveness assessment might include surveys, retention rates, attendance at events, tracking professional development of staff, deferred maintenance, etc.

Enough data should be evaluated to reach well supported conclusions. That is, assessments must be defensible but need not be exhaustive.

The student learning assessment guidelines outlined below should be used for all administrative and student support units.

## **CONTINUOUS ASSESSMENT**

All department assessment goals must be assessed at least every two years. We recommend that a program assesses at least one half of its outcomes each year, ensuring that each goal is assessed in a 2-year period.

This assessment will be reported in an annual departmental report.

## **INSTITUTIONAL EFFECTIVENESS ASSESSMENT COMMITTEE**

The Institutional Effectiveness Assessment Committee (IEAC) is charged with the following tasks:

- To guide the philosophy of assessment of institutional effectiveness at Cecil College
- To review and update the College's IEAC assessment plan
- To collectively review and provide feedback on department annual reports
- To serve as a resource for institutional effectiveness assessment including developing assessment instruments and rubrics
- To work with the college leadership team to ensure alignment between strategic planning and institutional effectiveness assessment

The Institutional Effectiveness Assessment Committee is chaired by the Associate Dean for Academic Assessment and Development and includes 4 department directors who broadly represent the departments at the College. Ideally, no more than two members are from the same division. The Data Analytics and Reporting Manager serves on the committee ex officio.

Information regarding the Educational Assessment Committee's charges can be found in the *Academic Assessment Plan*.



## ANNUAL DEPARTMENT REPORTS

Due: July 31st for the preceding fiscal year. See Appendix A for a template. If you are assigned to write a Comprehensive Department Review, you do not need to write an annual report in the same fiscal year.

Annual department reports are due each year by July 31. Departments should work as a team to reflect on the following topics. Most questions will be able to be answered in one to two paragraphs.

- Discuss progress on departmental goals set last year. How did goals relate to the College strategic plan?
- What internal or external changes have occurred in the last year that have had a significant impact on your department? Please describe the effect these changes have had.
- Complete the required assessment report (Appendix B) and discuss the ways in which your department (a) discusses assessment as a group, and (b) has used assessment results to improve department goals and initiatives. **Attach a copy of the required assessment report to this annual report.** (Note: the rubric that the Institutional Effectiveness Assessment Committee will use to review this section of the Annual Report is included in Appendix C.)
- What innovative technologies have members of your department employed in the conduct of their classes this fiscal year?
- Discuss your staffing levels – goals unable to meet, vacancies, etc. Are you meeting goals?
- Does the department use programs by third-party providers?<sup>2</sup> If so, discuss how these services were chosen and what steps are in place to evaluate them.
- Review the Middle States standard(s) that relates most closely to your department.<sup>3</sup> Discuss the ways in which your department contributes to the standard(s). If you have questions about which standard(s) apply best to your department, consult your VP.
- What efforts has your department made to contain costs or avoid cost increases?
- Identify a minimum of two, and no more than five, departmental goals for the coming year. Goals should be aligned with the College strategic plan.
- Discuss the goal(s) your department has related to diversity. What are those goals? How do you plan to reach these goals? Starting in 2023, discuss your progress on these goals.<sup>4</sup>
- Prepare a forecast of budget requirements expected to be incurred over the next fiscal year, including increases in full-time and part-time personnel, replacement of equipment, and future technology requirements.
- Discuss any other significant projects or accomplishments of your department and students.

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<sup>2</sup> In their [“Third-Party Providers Policy”](#), MSCHE defines a third-party provider as “An entity, institution or organization that has a contract or written arrangement to provide services to the institution.” This policy requires that “The institution shall clearly define the terms of such arrangements, conform with commonly accepted best practices in higher education, maximize transparency of the relationship with the third-party provider, and adhere to applicable laws and regulations.” The intention behind these requirements is that all accredited institutions should ensure “the quality, integrity, and transparency of all activities conducted in their name...” Examples of services that might be provided by a third party include the delivery of student learning opportunities, the delivery of student support services, services that assess student learning, and operational or business functions. (See also [Third-Party Providers Procedures](#).)

<sup>3</sup> You can find the Middle States *Standards for Accreditation* at the following link: <https://www.msche.org/standards/>

<sup>4</sup> For example, your department might decide to increase representation in publicity, might disaggregate data to look at underrepresented groups, might identify department-specific trainings related to diversity, etc..

Annual reports are reviewed by the IEAC and the appropriate vice president. The IEAC reviews assessment reports, using the rubric on the next page. The IEAC will share the combined feedback report with department heads.

See Appendix E for a template for this report. If you wish, replace the Cecil logo on the title page with an appropriate photo from your program.

## COMPREHENSIVE DEPARTMENT REVIEW

Due: July 31st for the preceding fiscal year. See Appendix D for a template. If you wish, replace the Cecil logo on the title page with an appropriate photo from your department.

If you are assigned to write a Comprehensive Department Review, you do not need to write an annual report in the same fiscal year.

Work collaboratively with your department to provide narrative and/or data-based answers to the questions below.

In addition to annual reports, specified departments are required to complete a Comprehensive Department review every 8 years. A schedule for these reviews is provided at the end of this section. This review is intended to be an opportunity for departments to reflect on strengths and weaknesses, envision the future shape of the department, articulate goals and aspirations, and consider the implications of developments in the field.

The program review should include an Introduction, which includes a description of the department and its goals and objectives and their relation to the College's strategic plan.

The Comprehensive Department Review should provide and discuss the following data. Please work with your Vice President to obtain the necessary data. Prepare a one-page fact sheet that summarizes the department's activities from the past five years (for example, number of library instruction sessions completed, crime statistics, success of phishing campaigns, etc.).

The Comprehensive Review should address the following questions:

- How does the department contribute to the mission and strategic plan of the College?
- How does the department contribute to student success at the College?
- Discuss your program's diversity initiatives. What are the goals and what progress has been made toward these goals?
- Review the Middle States standard(s) that relates most closely to your department.<sup>5</sup> Discuss the ways in which your department contributes to the standard(s). If you have questions about which standard(s) apply best to your department, consult your VP.
- Complete the required assessment report (Appendix B) and discuss the ways in which your department (a) discusses assessment as a group, and (b) has used assessment results to improve the department goals and initiatives. Attach a copy of the required assessment report to this annual report. (Note: the rubric that the Institutional Effectiveness Assessment Committee will use to review this section of the Annual Report is included in Appendix C.)
- What changes have been made in the department in the past five years? Why did the department make these changes – on the basis of what evidence?
- How has feedback from the college community (formal or informal) informed department changes?
- Are the equipment and other resources available to the department adequate for the current needs of the department? Is there adequate administrative support?

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<sup>5</sup> You can find the Middle States *Standards for Accreditation* at the following link: <https://www.msche.org/standards/>

- Does the department use services designed by third-party providers?<sup>6</sup> If so, discuss how these services were chosen and what steps are in place to evaluate them.
- On the basis of available data, what does the department judge to be the main successes and areas for improvement of its programs and services? Briefly describe a plan to address areas for improvement.

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<sup>6</sup> In their [“Third-Party Providers Policy”](#), MSCHE defines a third-party provider as “An entity, institution or organization that has a contract or written arrangement to provide services to the institution.” This policy requires that “The institution shall clearly define the terms of such arrangements, conform with commonly accepted best practices in higher education, maximize transparency of the relationship with the third-party provider, and adhere to applicable laws and regulations.” The intention behind these requirements is that all accredited institutions should ensure “the quality, integrity, and transparency of all activities conducted in their name...” Examples of services that might be provided by a third party include the delivery of student learning opportunities, the delivery of student support services, services that assess student learning, and operational or business functions. (See also [Third-Party Providers Procedures](#).)

### COMPREHENSIVE DEPARTMENT REVIEW SCHEDULE

This three-year schedule is designed to kick-start the department review process in advance of the next Middle States visit in spring 2028. A six-year rotation will be developed in the future.

<b>2023-24</b>	<b>2024-25</b>	<b>2025-26</b>
Academic Success Center	Athletics	Advising
Admissions	Facilities	Catalyst
Career Services	Financial Services	Financial Aid
Library	IT Infrastructure	Foundation
Registration	Lifelong Learning	Human Resources
	Marketing	IT Data and Reporting
	Public Safety	IT Enterprise Applications
	Student Life	Milburn Stone Theatre



**APPENDIX A: TEMPLATE FOR ANNUAL REPORT**



# **CECIL COLLEGE**

[INSERT DEPARTMENT NAME HERE]

[year] annual report

## DEPARTMENT ANNUAL REPORT

### **I. PROGRESS ON DEPARTMENTAL GOALS SET LAST YEAR**

Discuss progress on departmental goals or projects set last year. How did these goals relate to the College strategic plan?

### **II. EFFECTS OF INTERNAL OR EXTERNAL CHANGES**

What internal or external changes have occurred in the last year that have had a significant impact on your department? Please describe the effect these changes have had.

### **III. ASSESSMENT OF INSTITUTIONAL EFFECTIVENESS**

Complete the required assessment report and discuss the ways in which your department (a) discusses assessment as a group, and (b) has used assessment results to improve goals and initiatives. **Attach a copy of the required assessment report to this annual report** (see Appendix B).

### **IV. INNOVATIVE TECHNOLOGIES**

What innovative technologies have members of your department employed in the conduct of their work this fiscal year?

### **V. STAFFING**

Discuss your staffing levels – goals unable to meet, vacancies, etc. Are you meeting goals?

### **VI. USE OF PROGRAMS BY THIRD PARTY PROVIDERS**

Does the department use programs by third-party providers? (See definition on page 7 of *Institutional Effectiveness Assessment Plan*.) If so, discuss how these services were chosen and what steps are in place to evaluate them.

### **VII. MIDDLE STATES**

Review the Middle States standard(s) that relates most closely to your department.<sup>7</sup> Discuss the ways in which your department contributes to the standard(s). If you have questions about which standard(s) apply best to your department, consult your VP.

### **VIII. COST CONTAINMENT**

What efforts has your department made to contain costs or avoid cost increases?

### **IX. OTHER SIGNIFICANT PROJECTS OR ACCOMPLISHMENTS**

Discuss any other significant projects or accomplishments of your department.

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<sup>7</sup> You can find the Middle States *Standards for Accreditation* at the following link: <https://www.msche.org/standards/>

**X. DEPARTMENTAL GOALS FOR THE COMING YEAR**

Identify a minimum of two, and no more than five, departmental goals or projects for the coming year. Goals should be aligned with the College strategic plan.

**XI. DEPARTMENTAL GOALS RELATED TO DIVERSITY**

Discuss the goal(s) your department has related to diversity. What are those goals? How do you plan to reach these goals? Starting in 2023, discuss your progress on these goals.

**XII. BUDGET REQUIREMENTS**

Prepare a forecast of budget requirements expected to be incurred over the next fiscal year, including increases in full-time and part-time personnel, replacement of equipment, and future technology requirements.

**APPENDIX B: ASSESSMENT GRID TEMPLATE**

### ASSESSMENT GRID TEMPLATE

*Each department should identify approximately 4-8 goals. These goals should not be tasks to complete but should be quality indicators you would be able to track over time. Add lines to the table below as needed. Below your completed grid, add a narrative that explains department discussions surrounding assessment, things you have learned from the process, and any follow-up the department plans to do.*

<u>Goal</u>	<u>Measure(s)</u>	<u>Results/Success Rate</u>	<u>Reason/Hypothesis</u>	<u>Action</u>

Narrative (Discuss the program’s assessment plan (or schedule), any challenges faced in the assessment process, and any discussion/meetings in which the department discussed assessment. Discuss any large changes in data or any outside influences that affected results.)



**APPENDIX C: RUBRIC FOR INSTITUTIONAL EFFECTIVENESS ASSESSMENT REPORTS**

Institutional Effectiveness Assessment Committee  
Annual Department Assessment Report Review

Department \_\_\_\_\_

	Excellent	Needs Improvement	Unsatisfactory
<b>Goals</b>	Articulates measurable goals including verbs such as “supply,” “ensure,” “maintain,” “provide,” “build,” etc. Each goal focuses on one topic. The number of goals is neither too few to adequately assess the program nor so many as to make the assessment process onerous (generally, this means about 4-8 goals).	Mix of measurable and unmeasurable goals. Goal identifies method for achieving the goal. Goals may cover more than one topic. The number of goals is slightly too few or too many.	Goals articulates an item to be completed as opposed to an activity to be evaluated. There are either too many or too few goals. Goals are unmeasurable.
<b>Measures (Direct or Indirect)</b>	Uses a variety of measures. Includes a statement of the expected achievement or identifies the standard for success.	Relies on one measure. Does not include a statement of the expected achievement for success at this goal.	No measures identified. No statement of expected achievement for success at this goal.
<b>Results</b>	For all measures, reports the degree to which they meet the expected achievement or standard for success. Includes numbers, ratings, or other data.	For some measures, reports the degree to which they meet the expected achievement or standard for success. May include some numbers, ratings, or other data.	Does not report the degree to which they meet the expected achievement or standard for success. Has no numbers, ratings, or other data.
<b>Reason/Hypothesis</b>	Explanation of what has led to success or to the less-than-desirable outcomes. Explanation is strong and logically plausible.	Explanation of what has led to success or the less-than-desirable results is weak and/or not logically plausible.	No explanation of results
<b>Action</b>	Includes a related and attainable follow-up action, whether it is small or large or somewhere in the middle, that is proportional to the reasons identified. “Continue to monitor” may be the related and attainable follow-up action.	Follow-up actions are not specifically related to assessment results	No follow-up actions identified.
<b>Narrative</b>	Discusses the program’s assessment plan (or schedule), any challenges faced in the assessment process, and any discussion/meetings in which assessment was discussed. Discuss any large changes in data or any outside influences that affected result.		No discussion.

**APPENDIX D: TEMPLATE FOR COMPREHENSIVE DEPARTMENT REVIEW**



# CECIL COLLEGE

[INSERT DEPARTMENT NAME HERE]

COMPREHENSIVE DEPARTMENT REVIEW [YEAR]

**DEPARTMENT  
COMPREHENSIVE DEPARTMENT REVIEW**

**I. INTRODUCTION**

Describe the department and its goals and objectives and their relation to the College's strategic plan.

**II. FACT SHEET**

Prepare a one-page fact sheet that summarizes the department's activities from the past five years (for example, number of library instructional sessions completed, crime statistics, success of phishing campaigns, etc.)

**III. MISSION AND STRATEGIC PLAN**

How does the department contribute to the mission and strategic plan of the College?

**IV. STUDENT SUCCESS**

How does the department contribute to student success at the College?

**V. DIVERSITY**

Discuss your department's diversity initiatives. What are your goals and what progress has been made toward these goals?

**VI. MIDDLE STATES**

Review the Middle States standard(s) that relates most closely to your department. Discuss the ways in which your department contributes to the standard(s). If you have questions about which standard(s) apply best to your department, consult your VP.

**VII. ASSESSMENT**

Complete the required assessment report (Appendix B) and discuss the ways in which your department (a) discusses assessment as a group, and (b) has used assessment results to improve department goals and initiatives. **Attach a copy of the required assessment report to this annual report** (see Appendix B). (Note: the rubric that the Institutional Effectiveness Assessment Committee will use to review this section of the Annual Report is included in Appendix C.)

**VIII. CHANGES**

What changes have been made in the department in the past five years? Why did the department make these changes? What evidence supported the change(s)?

**IX. FEEDBACK**

How has feedback from the college community (formal or informal) informed department changes?

**X. EQUIPMENT AND RESOURCES**

Are the equipment and other resources available to the department adequate for the current needs of the department? Is there adequate administrative support?

#### **XI. THIRD-PARTY PROVIDERS**

Does the department use services designed by third-party providers? (See definition on p. 8 of the *Institutional Effectiveness Assessment Plan*.) If so, discuss how these services were chosen and what steps are in place to evaluate them.

#### **XII. SUCCESSES AND SHORTCOMINGS**

On the basis of available data, what does the department judge to be the main successes and areas for improvement of its programs and services? Briefly describe a plan to address areas for improvement.