Institutional Effectiveness

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ASSESSMENT RETREAT

Leadership Council | Action Plan
Academic Year 2024-2025

Academic Year 2024-2025 Leadership Council - Assessment Retreat | Action Plan

Data Point	Fall 2024 Assessment Retreat	Spring 2025 Progress Report	Fall 2025 Assessment Retreat
	Action Plan:	**Progress Report:**	**Actions Completed:**
1 **Student Learning Outcomes** **COURSE and CO-CURRICULAR** **Strategic Roadmap Category 2:** Enhance financially sustainable demain-driven quailty programs and CSF A2, B1, and C1	• Undergraduate and Graduate programs will review opportunities to address RNL feedback pertaining to student learning.	**In Progress:** The VPAA and OIE met with Undergraduate CORE and Graduate CORE directors to discuss relevancy, rigor, and inclusiveness of SLOs in January and February 2025 and will implement over the summer for Fall 2025. Plan in motion to review Graduate CORE Diversity items.	**MET** RNL 2023 Progress/Completion Examples – 1. Implementation of UG CORE changes for Fall 2025, will trend data 2. GRAD CORE made changes for Fall 2025
	• For AY 2024/2025 - Review/revise **Co-Curricular Student Learning Outcomes opportunities** and scale up across all 6 College divisions, where applicable. Ensure compliance with Higher Learning Commission – Assumed Practices. • Review Co-Curricular opportunities for IDI Survey and IPE	**In Progress:** A Co-Curricular Focused Plan is in process under the direction of the VPER, IPE focuses on new courses live in Fall 2025, pilot in Summer 2025; IDI separated from IPE in the course for Spring 2025; will make a decision this summer of location for IDI and process	**In Progress:** 1. Focused plan will be completed in 2025/2026 (CSF B 1) 2. IPE 301 Course shell updates live effective Fall 2025 (CSF C1)
	• Several academic departments will update Course SLOs per program specific accreditation guidelines, ensure maintenance of layering into Institutional SLOs.	**In Progress:** The VPAA and OIE will host an Academic Division Retreat in June 2025 to discuss all data points and develop a plan for updating programmatic course SLOs, as applicable. General Education updated AY	**MET** Academic Division underwent structural changes effective Fall 2025 (i.e., Healthcare Leadership & Business Department and General Education & Health Sciences Department) and we will review Course SLOs to ensure inclusion and

		24-25 and will implement changes for Fall 2025 PTA: updated SLO map to CAPTE 2024 standards and implementation underway CRNA/DNP: aligned in SLOs moving forward EdD working on SLOs	relevancy. Course SLOs were updated by Undergraduate Nursing to align with new curriculum changes. PTA SLOs updated based on CAPTE Guidance
2 **Teaching and Learning** **Strategic Roadmap Category 1:** Expand and leverage partnerships that support student scholarship and education and CSFs A1 and A2	• Undergraduate and Graduate programs will review opportunities to address RNL feedback and demonstrate the impact of efforts.	**In Progress:** The Spring 2025 deployment of the Student Satisfaction Surveys closed in April 2025. The data will be disseminated in August 2025 and new action items are identified as needed. RNL return rate on-campus: 18% and online: 20%	**In Progress:** RNL data was collected and data shared, however action plans will be created for 2025/2026
	• Develop performance measures to follow RIZE implementation in HealthCare Business and Community Health departments to assist other college academic departments and higher education learning models.	**MET** RIZE curriculums approved through College governance processes and HLC	**In Progress:** First Rize course enrollments (Artificial Intelligence Literacy Certificate (AILC) – 3, PMMC - 1 for Fall 2025 underway. Will review course evaluation data and other metrics to determine next steps.
	• Implement and Review processes to support stackable credentialing and develop better awareness of uses in higher education.	**MET and Ongoing:** AA-47 Advanced Standing Credit is under review, continue review through CSF A-2	**In Progress:** CSF A2 Workgroup created
	• Artificial Intelligence Ad-hoc Committee will continue to perform AI need analysis for students, faculty, and staff	**In Progress:** AI Ad-hoc Committee has begun to identify needs for faculty, staff and students.	**In Progress:** CSF A2 Artificial Intelligence Task Force created, LC training at AR Fall 2025 CIC offered webinar series in Fall 2025
	• Ruffalo Noel Levitz Comparative Analysis Post	**In Progress:**	**NOT MET**

	Spring 2023 deployment • Ruffalo Noel Levitz Spring 2023 data	Numerous initiatives implemented or updated based on this 2023 data. The data from the Spring 2025 RNL survey will be disseminated in August 2025 and new action items identified as needed.	Data has been shared from RNL 2025 and action plans will be created for 2025/2026. Action items for AY 24-25 for RNL results of 2023 not met outside of Course Review progress below.
	Areas for review and strategizing are select items under the following scales for the <u>online environment</u> – **Instructional Services and Academic Services** • 3 - Instructional materials are appropriate for program content. (2023, 2021,2019) • 4 - Faculty provide timely feedback about student progress. (2023, 2021, 2019) • 20 - The quality of online instruction is excellent. (2023, 2021, 2019) • 25 - Faculty are responsive to student needs. (2023, 2021) • 7 - Program requirements are clear and reasonable. (2023, 2021) Areas for review and strategizing are select items under the following scale for the <u>on-campus environment</u> – **Instructional Effectiveness** • 8 - The content of the courses within my major is valuable. (2023, 2021)	**MET and Ongoing:** Course Review in select programs reviewing Credit to Contact Hours	**In Progress:** Course Review in select programs reviewing Credit to Contact Hours Develop faculty development workshops, resources and other opportunities

	• 16 - The instruction in my major field is excellent. (2023,2021) • 47 - Faculty provide timely feedback about student progress in a course. (2023, 2021) • 58 - The quality of instruction I receive in most of my classes is excellent. (2023, 2021, 2019)		
3 **Recruitment, Enrollment, Retention, and Advising** **Strategic Roadmap Category 2:** Enhance financially sustainable demain-driven quailty programs and CSF A2, B1, and C1	• Increase total enrollment by 128 students over the next academic year through new and retained student enrollment (target is 1250 for census day FA25)	**In Progress:** The Strategic Enrollment Management (SEM) Committee hosted a Strategic Planning Day event in February 2025 and created action items to target this goal. The Strategic Enrollment Management (SEM) Focused Plan template has been released, and initial sections have been completed to guide this goal.	**MET and Partially MET** AY 2024-2025 500 new students enrolled AY 25-26 goal is 570 new students Census day goal of 1250 not met
	• Increase retention rate for the College by 3% for a new target of 83% for FA24 to FA25 (CSF A2) o Fall 2024	CC – 80%, UG – 80%, GRAD – 81%, CERT – 64%)	**MET** KPI increased for retention. Early Alert Discussion upcoming with Academic Directors and Advisors	**MET** Academic Directors with faculty primary responsible party for initiatives moving into AY 25-26.
	• Implement at risk student early alert advising system process and determine appropriate metrics to determine success through Anthology HLC QI project (decrease student withdrawal to not exceed 100 students per year)	**MET** REACH succeed platform implemented in Spring 2025 and currently under use. Best practices, training, and educational items have been developed and disseminated to necessary parties. Discussion to include dialogue in Syllabus template. The withdrawal rate also set to <100 students.	**MET** Metrics include to be discussed in AY 2025-2026. Additional training occurred at the Fall Faculty and Staff Development Session in September. Consistency in language and instructions completed. More training opportunities developed for Fall 2025

4 **Alumni, Clinical, and Employer Connections** **Strategic Roadmap Category 3:** Develop a clear brand, enablity support from alumni and others and CSFs B1, C1, and C2	• Implement NHA Clinical Shared Model at multiple locations.	**In Progress:** Clinical shared model implemented and will begin SU 2025 with four (4) CPIs at Nebraska Medicine. One CPI student enrolled in Spring 2025.	**Not Met** Continued planning in AY 2025/2026
	• The Academic Division will review the Alumni and Employer Survey process and assist with strategies on how to improve response rates	**In Progress:** The VPAA and OIE will host an Academic Division Retreat in June 2025 to discuss this process and strategize ways to improve.	**Not Met** Continued planning in AY 2025/2026 Feedback – 1. Shared links disseminated but response rates are still not reflective of efforts 2. NAP COA visit to create plan of action 3. Review process and content
5 **Career Planning, Clinical Advancement** **Strategic Roadmap Category 1:** Expand and leverage partnerships that support student scholarship and education and CSFs A1 and A2	• Implement NHA Clinical Shared Model at multiple locations.	**In Progress** NHA CPI at Ne Med Summer 2025. Will work with UGN for possibilities in other institutions (i.e., Blair)	**Not Met** Reevaluate in AY 2025-2026
	• Ensure an infrastructure is in place to accurately share with all founding and community partners our key performance indicators specific to their organization (e.g., employees, dependents, spouses, programs enrolled, etc.)	**In Progress:** VPAA gathers numbers of graduates and employment at partnerships Partners receive a mid-year and Annual report with KPIs specific to their organization (total students, their programs, community/service work collaboration, other programming...etc.)	**MET** Oversight moved to the President's Office with roles and responsibilities for ELC, LC, and Communications and Development Division established and communicated September 9th, updated and progress communicated at Leadership Council on November 4th.
	• Implement select Anthology Occupation Insights dashboards and develop process through Anthology HLC QI project Anthology	**On Hold** until outstanding Anthology Items are addressed, and resources and human	**On Hold**

		bandwidth are available	
6 **Student Satisfaction |** **Key Performance** **Indicators** **Strategic Roadmap** **Category 3:** Develop a clear brand, enablity support from alumni and others and CSFs B1, C1, and C2	• Services to assist in Financial Aid department structure, compliance procedures, and improved satisfaction for all constituents will be implemented in AY 24-25	**In Progress** HEAG hired December 2024 to support FA services.	**MET** HEAG services have been exceptional and College moving forward with hiring of FA counselors.
	• Commencement Ceremony student feedback will be reviewed and process enhancements made	**MET** Commencement Ceremony processes on website; departments continuing to update graduation hooding and pinning ceremony processes for each semester and student focused celebration efforts **Graduation FAQs | Clarkson College**	**MET** Spring 2025
	• Develop a clear brand, enablity support from alumni and others and CSFs B1, C1, and C2	**MET and Ongoing:** Doing Business As supports brand awareness in the community. Image campaign in process (Online Ads, Airport Ad, Outdoor billboards) Alumni engagement plan in place and being executed. Alumni Board roadmap communicated to the College and community alignment. Alumni testimonials in process with Communications, Enrollment and Program Directors working together.	**Ongoing:** New Development and Alumni Administrator hired August 2025.

	• Key Performance Indicators will be reviewed, and definitions will be shared and implemented through the Quality Initiative Project (QIP) and the Strategic Enrollment Management (SEM) Plan with clear benchmarks across constituents:
	  ○ Graduation/Completion Rate
	  ○ Retention Rate (Benchmark now 83%)
	  ○ Persistence Rate (Benchmark now 90%)
	  ○ Student Attrition (Benchmark is to have less than 100 withdraw, retain 50 more students on average, withdraw <100 students)
	    ▪ Reasons Why Students Leave Trend
	    ▪ Transfer Outs
	    ▪ Student Success at Other Institutions Post-Clarkson College
	    ▪ New Leave of Absence Policy effective Spring 2025
	  ○ At Risk Student Strategies
	    ▪ (B-C) DFWI Course Rates
	    ▪ Student Alert System
	    ▪ Interventional Strategies
	    ▪ Intervention Survey for Faculty Feedback (Maintain for Spring 2025 in conjunction with Early Alerts)
	    ▪ Number of Contacts Data
	    ▪ Midterm vs Final Grade Analysis
		In Progress:
		The OIE Task Force will support the data analysis efforts of the SEM Committee and maintain work on KPI data, trending, and reporting.
		
		The College will always continue to focus on HLC, federal compliance, and specialized accreditor KPI needs.
			In Progress:
			The transition to Anthology Student has made the data more accessible to all but reporting has become more manual. Standard operating procedures (SOPs) will be created to minimize the manual load. Data accuracy is a concern, but we are aware of it. Definitions of key performance indicators (KPIs) will be necessary to meet the current state processes. There needs to be a discussion on the appropriateness of current benchmarks for KPI and the attainment of our goals.
			
			OIE Task Force has shown data, via the SEM Committee platform and Leadership Council Assessment Retreat, on Student Alerts in relation to Student Success in courses, DFWI courses, and student attrition (both quantitative and qualitative data). Continue to update the Student Alert form to track relevant information and provide training on data input for the College. Strategies to ensure effectiveness and efficiency of this interventional strategy will be reviewed/developed in 2025/2026.

	o Student Satisfaction (NSES, GES, RNL)		Data presented to Leadership Council in September, with follow-up discussion in November 2025 at Leadership Council Assessment Retreat where action plans will be discussed for action in 2025/2026.

	o Enrollment
	    ▪ Headcount (Fall, Spring, Summer, AY)
	    ▪ Enrollment Demographics (match Midwest demographics)
	    ▪ Cancelled Applications
			Team approach taken towards Census Day headcounts with refinement from Spring 2024 to present. SEM Committee working on cancelled application strategies for 2025/2026.

	• KPI trend data will be reviewed to determine appropriateness of benchmarks every 3-5 years.	**In Progress:** Leadership Council, the SEM Committee and other stakeholders will provide insights into this review process at scheduled events	**In Progress:**
	• Create customizable dashboards for all stakeholders to provide on demand data on KPIs to aid in decision making	**On Hold** until outstanding Anthology Items are addressed and resources and training are available	**In Progress:** The Director, Information Technology and Institutional Effectiveness will review past Anthology provided training to determine best way forward for incorporation of Power BI data on various platforms
7 **Workplace Culture** **Strategic Roadmap Category 3:** Develop a clear brand, enablity support from alumni and others and CSFs B1, C1, and C2	• Strategies to improve satisfaction in areas of Performance Management and Communication as per the Great Colleges to Work For Survey will be completed.	**In Progress:** Emerging Leadership project is on Employee Recognition and will be presented to Leadership Council on June 24, 2025. HR held refresher training for Leadership Council on	**Ongoing:** Added pulse survey October 2025 and will complete two times per year for "in time" feedback for Directors and to support actionable items for Great Colleges to Work for Survey. Action Planning in November and December 2025.

		performance management in February 2025. Working with NE Medicine to implement Pulse survey in Fall 2025. This will give each department or division 1-2 action items to work on over a set time frame. Micro-pulse surveys can be sent throughout the year based on Great Colleges to Work for survey results. HR will pilot a few DiSC workshops over the summer and fall with various departments before having the rest of the employees take the DiSC assessment. Improvement for Director onboarding and training focus areas will be implemented Fall 2025. Improvements for all employees onboarding underway.	Added Advanced Leadership Program for assistant directors and administrators. Directors, VPs, and President will complete 360 assessments, and this cycle will occur every 3 years. All College employees will complete DiSC assessment by December 1st and programming on college wide leadership workshop and connections to DiSC will occur at SPD in January 2026. Will hold workshops as well. Implementing new Soaring Falcon Award starting for Spirit Week 2026. (Emerging Leadership Cohort Recommendation) HR has started having HR info sessions with new employees, holding quarterly. First one was held in Sept. 2025. HR is working with CTL to create toolkits on HR intranet, centralized hub for various resources that will help directors, faculty, staff, adjunct faculty. Initial meeting with CTL is on 11/10, so more to come.
		Many departments are working on improved communication through huddles, celebration slides, goal groups, etc.	Creating surveys that Directors can send to department to get info on how employee like to be recognized, added that question to new employee questionnaire.

8 **Programmatic/Department Review and Strategic Planning** **Strategic Roadmap:** All categories and CSFs	• HLC Quality Initiative Project will be kept on track (2 years)	**In Progress:** QI project approved by HLC January 9, 2025 QI Workgroup maintaining weekly meetings QI Workgroup and OIE developing a system to track necessary items for a successful QIP	**In Progress:** Tracking completed trainings, shared educational resources, survey feedback for faculty, staff and students are in progress.
	• COA Re-Accreditation support will be available in preparation of site visit in Fall 2025.	**In Progress:** VPPA supporting COA visit date being established for October 2025	**Ongoing:** COA Visit October 29th and 30th (2025), successful visit and awaiting report
	• ACEN UGN Re-Accreditation support will be available in preparation of site visit in 2026	UGN in preparation for ACEN visit Fall 2026	ACEN UGN Visit set for September 1st, 2nd, and 3rd (2026)
	• JRCERT Rad/MI Re-Accreditation support will be available in preparation of site visit in Fall 2025.	JRCERT accreditation items submitted April 30th, visit moved from fall 2025 to Spring 2026	JRCERT Visit set for February 9th and 10th (2026)
	• Connectedness to College Strategic Roadmap, Top Priorities and CSFs will continue to be communicated across divisions and college community participation maintained. Serve our Students & Community Well — Expand and leverage partnerships that support student scholarships and education Increase Customer Services — Enhance financially sustainable demand-driven quality programs Financial Sustainability through Visibility — Develop a clear brand, enabling support from alumni and others	**Items Met, In Progress, and Ongoing:** College Roadmap in place with connection to CSFs and KPIs	**Ongoing:**
∞	Continuous Improvement Process is always ongoing. • Higher Learning Commission 2025 Conference attendance by select IAC members	**Ongoing:** HLC annual conference attended by Dr. Nebel, Dr. Miller, Ms. Liles, Ms. Paul, Ms. Hagenau, Ms. C. Jones	**Ongoing:** The Institutional Accreditation Committee (IAC) has informed the College operations and policies with HLC guidance obtained from the annual conference or webinars as

			evidenced by the creation of Artificial Intelligence Task Force, Focus on Values, Career Readiness
	• Quality Initiative Project (Years 6-7 - 2024/2025, 2025/26 – Approved 01-09-2025 by HLC) • Quality Initiative Report (Years 8-9; 2026/27, 2027/2028) • Comprehensive Evaluation for Reaffirmation (Year 10 – 2028/29)	**In Progress:** QI Workgroup maintaining weekly meetings OIE maintains QIP updates on institutional Effectiveness	**In Progress:** Feedback data has been collected from all constituents (i.e., students, faculty, and staff) regarding Anthology Products or training and informed new training, tutorials, presentations. This effort will continue until the completion of the project in 2027. The Evidence Collection phase for reaccreditation has begun and will continue for the next 3 years.
	• Institutional and Programmatic Accreditation Standards and Compliance (CAHIIM 2025, JRCERT 2026, COA 2025, ACEN 2026)	**MET:** CAHIIM Virtual Site visit completed on April 23-24, 2025, for BS Health Information Administration program. Met all 25 standards	
	• Maintain accurate and timely external reporting compliance	**NOT MET:** Currently awaiting Anthology Student Reports to aid in automation of calculated reporting Monitor Department of Education for changes to 2025/2026 IPEDS, (QI group meets weekly) and Data Governance meets weekly as well	**In Progress** Continued efforts will be necessary to address this item as reporting has become a more manual process than desired. Significant consideration must be given to ensuring the accuracy of data being reported. A data reporting plan needs to be devised in 2025/2026
	• Roles, Responsibilities, and Accountability	Continue to share information and	

	• Review Annual Report timeline and content	provide support at annual Assessment Retreats and applicable events.	

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