



RESOURCE MANUAL

for The Principles of Accreditation:
Foundations for Quality Enhancement



Southern Association of Colleges and Schools
Commission on Colleges

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SECTION 7: Institutional Planning and Effectiveness

- 7.1** The institution engages in ongoing, comprehensive, and integrated research-based planning and evaluation processes that (a) focus on institutional quality and effectiveness and (b) incorporate a systematic review of institutional goals and outcomes consistent with its mission. (*Institutional planning*) [CR]

Rationale and Notes

Effective institutions demonstrate a commitment to principles of continuous improvements, based on a systematic and documented process of assessing institutional performance with respect to mission in all aspects of the institution. An institutional planning and effectiveness process involves all programs, services, and constituencies; is linked to the decision-making process at all levels; and provides a sound basis for budgetary decisions and resource allocations.

Institutions with missions that expand beyond teaching into research and public/community service set strategic expectations in all these areas.

The purpose of this Core Requirement is to assure that the institution has an appropriate broad-based approach to institution-wide effectiveness that supports its mission and serves as a framework for planning. This is followed by evaluation activities that allow the institution to discern whether it is making the progress it had anticipated in its planning efforts, and making corrections as needed. Unlike other standards that relate to assessing outcomes on a more “micro” unit-by-unit basis (see Standard 8.2 of this document), this standard emphasizes the more “macro” aspects of planning and evaluation. The two are, of course, related and should certainly not be inconsistent with each other.

These “macro” planning and evaluation activities often entail a longer time horizon than unit planning. The activities of the institution’s planning and evaluation system may be scheduled at periodic intervals that make sense for the institution and its mission.

Institutional narratives—and reviewer expectations—often involve parsing the words of this standard carefully. For example, note there are two sets of processes required: planning *and* evaluation. Also, establishing compliance with the adjectives in the standard is generally made explicit: ongoing, comprehensive, integrated, research-based, and systematic. Each word is important and deserves attention. While the standard does not require a formal strategic plan or similarly named document, the expectations of the standard closely parallel that type of process. The key is that the institution can show its processes are undertaken seriously, with a focus on institutional improvement.

Questions to Consider

- Are there both planning and evaluation processes at the institutional level?
- Is the process ongoing, and not something initiated to get through the accreditation review?

- In what sense are the processes comprehensive? Is this more than academic planning? More than enrollment planning? More than financial planning? More than facilities planning?
- For institutions with missions that are broader than classroom instruction, how are goals and expected outcomes set for research, public/community service, or other aspects of the mission?
- How are the processes themselves integrated? Does evaluation arise from planning expectations? Does evaluation feed back into changes in institutional plans?
- How is the comprehensive “macro” planning effort integrated with “micro” unit-level planning and evaluation? How does it inform resource allocation decisions?
- In what sense are these processes research based? What types of data are collected and analyzed?
- Are plans and evaluations of results mission consistent?
- What evidence exists that the institution-wide planning and evaluation processes result in continuing improvements in institutional quality?
- Is there appropriate institutional research and budgetary support for assessment programs throughout the institution?
- Are appropriate internal and external constituents and stakeholders involved in the planning and evaluation process?

Sample Documentation

- Descriptions of the institutional planning and evaluation processes, including a timetable.
- Documents related to the most recent applications of these processes (e.g., formal comprehensive plans, periodic updates).
- Specific examples of how institutional research has led to continuing improvement or otherwise affected the institution.
- Specific examples to document adherence to the adjectives: ongoing, comprehensive, integrated, research-based, systematic.
- Minutes from board meetings, cabinet meetings, ad hoc committees and task forces (or other similar documents) that show that planning and evaluation are taken seriously and that there is broad involvement.

Reference to SACSCOC Documents, If Applicable

None noted.

Cross-References to Other Related Standards/Requirements, If Applicable

- Standard 7.2 *(Quality Enhancement Plan)*
 Standard 7.3 *(Administrative effectiveness)*
 CR 8.1 *(Student achievement)*

Standard 8.2.a (*Student outcomes: educational programs*)

Standard 8.2.b (*Student outcomes: general education*)

Standard 8.2.c (*Student outcomes: academic and student services*)

7.2

The institution has a Quality Enhancement Plan that (a) has a topic identified through its ongoing, comprehensive planning and evaluation processes; (b) has broad-based support of institutional constituencies; (c) focuses on improving specific student learning outcomes and/or student success; (d) commits resources to initiate, implement, and complete the QEP; and (e) includes a plan to assess achievement.

(Quality Enhancement Plan)

Rationale and Notes

The Quality Enhancement Plan (QEP) is an integral component of the reaffirmation of accreditation process and is derived from an institution's ongoing comprehensive planning and evaluation processes. It reflects and affirms a commitment to enhance overall institutional quality and effectiveness by focusing on an issue the institution considers important to improving student learning outcomes and/or student success.

By providing details on a specific component or subcomponent for the comprehensive planning and evaluation process, the institution can delve into more detail than would appear in Standard 7.1 (Institutional planning) on a topic the institution itself has identified as a priority. As an ongoing process, the QEP will be reviewed by the On-Site Reaffirmation Committee, allowing a peer review committee to better understand the institution's focus on student learning and/or student success. In addition, it will allow the institution to benefit from the insights of the committee to strengthen its efforts as it moves forward. It is important to note that the topic of the QEP may be something that is already underway, or it may represent a new initiative; the focus of the QEP will depend heavily on where the institution is relative to its own comprehensive planning and evaluation process. Put another way, there is not an expectation that an institution will "stop what it is doing" until it finds out the result of the reaffirmation review. In fact, to do so would represent a weakness in the ongoing planning and evaluation process already in place. Instead, the QEP is done in the spirit of an institution seeking continuous improvement.

Because the QEP is more detailed than other elements of the reaffirmation process, it should be a standalone document, not a narrative within the Compliance Certification. That document should address each of the specific components within the standard. Comments on each of those components follow.

A topic identified through ... ongoing, comprehensive planning and evaluation processes

The QEP describes a carefully designed and focused course of action that addresses an identified element from within the institution's comprehensive planning process that focuses

on continuous improvement regarding student learning outcomes and/or student success. The QEP should not be considered as something to be “bolted on” the planning process, but instead something that arises from that process. If no element of the institutional plan (or other comprehensive, strategic planning document) at the institution addresses these topics, there may be a concern under Standard 7.1 (*Institutional planning*) regarding the comprehensiveness of the institution’s planning process in evaluating its effectiveness in fulfilling its mission.

Broad-based support of institutional constituencies

Generally this element of the QEP can be established by demonstrating that the comprehensive planning and evaluation process itself has this element. In any event, the chosen QEP topic should have this characteristic. Since most comprehensive planning and evaluation processes will have multiple potential QEP topics embedded within the strategic plan, the decision to “pick one” should have broad support of appropriate constituencies. Similarly, the institution should demonstrate that this broad involvement also is being carried over into the implementation strategies as the QEP proceeds.

Focuses on improving specific student learning outcomes and/or student success

Student learning is defined broadly in the context of the QEP as enhancing student knowledge, skills, behaviors, and/or values. Student success is also defined broadly as improvements in key student outcomes such as student retention, completion, time-to-degree, placement in field, or performance in “gatekeeper” courses. While the potential topics cover a very broad range of options, the chosen QEP should be specific as to what its goals are, and why those goals are important to the institutional mission.

Commits resources to initiate, implement and complete the QEP

Resources should be interpreted more broadly than just direct monetary expenditures. There is no obligation for a specific, advance monetary commitment for the QEP. Instead, the QEP should identify the realistic resources, including personnel, needed for successful implementation and should explain how the institution will marshal these resources. Depending on whether the QEP project is a new initiative, this may be both forward and backward looking, and the case for a commitment of resources may build upon previous successful implementation of similar activities. Because the QEP is a demonstration of continuous improvement at the institution, however, there should definitely be clarity as to future plans related to the chosen topic. In most cases, QEP efforts are not formally “completed.” If successful, the QEP becomes an ingrained part of the institution’s activities and culture. In that sense, the concept of “completion” refers to what will be reported to SACSCOC within the institution’s Fifth-Year Impact Report.

Includes a plan to assess achievement

The institution may well have process outcomes for past and present initiation phases of the QEP, and that information would be a helpful part of the plan. However, this part of the standard refers specifically to the assessment of specific student learning and/or student success measures that the institution is addressing within the QEP topic. As mentioned above, if the QEP is seen as a continuous improvement activity of the institution, there is an expectation that there will be

meaningful data regarding the achievements of the QEP available when the institution submits its Fifth-Year Interim Report.

NOTES

The QEP is a course of action that is specific to an institution and its mission. It is intended to be part of self-identified needs at a particular institution. It is an opportunity for an institution to be creative in an area related to compliance with the Principles. Therefore, although an institution may want to study QEPs completed by other institutions, an institution's QEP should reflect the needs of the institution and be specific to its own comprehensive planning process.

Questions to Consider

- Has the institution identified and provided a clear and concise description of a significant topic directly related to student learning and/or student success?
- What are the specific goals of the QEP for the institution and for its students?
- How does the QEP support the mission of the institution?
- What was the research-based process that led to this issue being within the institution's comprehensive planning and evaluation processes?
- What resources (personnel, financial, physical, academic, etc.) are necessary for the successful implementation of the QEP? Look both backward and forward, depending on where the institution is in its implementation.
- What assessment instruments or data is being/will be used to measure achievement of the QEP's goals?
- How is/will the progress of the QEP be monitored (timelines, administration and oversight of its implementation by qualified individuals, etc.)?
- How will the institution ensure adequate resources and sufficient expertise and experience to guide the implementation and continuation or completion of the project?
- Who are the affected constituencies and how have they been involved in developing the QEP?

Sample Documentation

A separate QEP document/PDF apart from the Compliance Certification.

Reference to SACSCOC Documents, If Applicable

SACSCOC policy: [QEP: Lead Evaluator Nomination Process](#)

Cross-References to Other Related Standards/Requirements, If Applicable

CR 7.1 *(Institutional planning)*

- CR 8.1 *(Student achievement)*
Standard 8.2.a *(Student outcomes: educational programs)*
Standard 8.2.b *(Student outcomes: general education)*
Standard 8.2.c *(Student outcomes: academic and student services)*

7.3 **The institution identifies expected outcomes of its administrative support services and demonstrates the extent to which the outcomes are achieved.**
(Administrative effectiveness)

Rationale and Notes

It is critical that administrative support services are provided effectively in order for the institution to obtain its strategic goals as well as operational efficiency. Administrative support service units normally include offices and departments such as finance and procurement, facilities and physical plant, administrative services, development/advancement, research office, the president’s office, etc. These offices serve the educational mission of the institution in a much more indirect way than do offices related to educational programs or academic and student services, but they are just as critical for the ability of the institution to achieve its mission. The efficient operation of these units is critical whether these functions are provided internally or outsourced to a contractor.

While these units rarely have “expected learning outcomes,” “expected outcomes” for administrative units typically include outcomes such as efficiency and quality of service targets (e.g., energy usage, response times, error rates, “clean report” targets, satisfaction rates); monetary targets (e.g., fund-raising targets, research grant targets, auxiliary income targets). Many times, the goals are explicit parts of the budgeting process or components of the strategic plan. For this standard, institutions should interpret “expected outcome” in a manner consistent with that administrative unit’s role in the institution. It is the institution’s responsibility to explain how and why these expected outcomes are determined.

In many cases, administrative outcomes are hard to separate from student support outcomes. Examples would include public safety, which has an administrative function but also generally has a co-curricular student support function, and financial aid, which likewise has a budgetary function as well as a co-curricular educational function. Generally, these “dual function” units would be addressed in Standard 8.2.c (Student outcomes: academic and student services). If those units are instead addressed in this standard, it is incumbent on the institution to explain how this determination follows from its mission and organizational structure; it is strongly suggested that this explanation appear in both standards of the Compliance Certification. While institutions may organize functions differently, it is expected that all administrative services engage in a process to evaluate their effectiveness.

Institutions should determine the organizational levels at which assessment is useful and efficient for administrative units. This tends to vary greatly across institutions due to size and complexity of the institution, and explicit decisions regarding organizational structure. Institutions are not

required or expected to use the same assessment procedures for its administrative structure as those used for units that have specific student learning expectations. Reviewers should be mindful that administrative effectiveness can be achieved in a variety of ways and the mentality that “one size fits all” is inappropriate and diminishes the individual missions of institutions. This is especially true regarding the use of language to describe processes; for example, “assessment,” “evaluation,” “goals,” “outcomes,” and “objectives” may have precise meaning to a reviewer; but, the institution may have a meaningful effectiveness system even if it is not as precise with its language as the reviewer would like.

NOTE ON SAMPLING

There is an expectation that an institution is required to be able to demonstrate administrative effectiveness for all key administrative activities. The volume of material represented by all this activity can be quite large, especially at larger and more complex institutions. To this end, an institution may provide a sampling of the effectiveness of its administrative units at the time of its comprehensive review. Sampling, for the purpose of accreditation, includes the following three elements: (1) a representation that is mindful of the institution’s mission; (2) a valid cross-section of units from across the administrative organizational chart, with every major division represented; and (3) a compelling case as to why the sampling and assessment findings are an appropriate representation of the institution’s administrative services. Sampling does not preclude the institution from having effectiveness data/analysis available on all units. It is the prerogative of a SACSCOC On-Site Committee to conduct a more in-depth review of an institution’s data/findings/analysis on the effectiveness of all its administrative activities than provided via sampling.

Questions to Consider

- Are expected outcomes defined in ways that allow meaningful measurement of actual outcomes?
- Is there evidence of goal-setting and assessment activities for each unit?
- Can you meaningfully determine whether expectations were met?
- How does administrative assessment relate to the goals found within the comprehensive planning and assessment processes of the institution?
- Does your organizational structure hinder or advance administrative effectiveness?
- For units with combined administrative and student support functions, how do you deal with both elements?
- Are your expected outcomes of administrative units consistent with the data underlying your institutional budget?
- If the institution used sampling, why were the sampling and findings an appropriate representation of the institution’s administrative units?

Sample Documentation

- Organizational charts and an explanation of how the institution's administrative support service units undertake effectiveness reviews.
- Expected outcomes for administrative support services.
- Findings from the evaluation of those outcomes.
- Generally unit-level reports are provided instead of overarching summaries.
- Explanation of how unit assessments relate to comprehensive planning and evaluation.
- If sampling is used, (1) how the sampling is representative of the institution's mission, (2) documentation of a valid cross-section of units, and (3) make a case as to why sampling and assessment findings are an appropriate representation of the institution's units.

Reference to SACSCOC Documents, If Applicable

None noted.

Cross-References to Other Related Standards/Requirements, If Applicable

CR 7.1 *(Institutional planning)*

Standard 13.2 *(Financial documents)*