NorthWest Arkansas Community College

HLC ID 1319

AQIP: AQIP Pathway Systems Appraisal   Visit Date: Not Set

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1 - Reflective Overview

The first section of the System's Appraisal Feedback Report is the Reflective Overview. Here the team provides summary statements that reflect its broad understanding of the institution and the constituents served. This section shows the institution that the team understood the context and priorities of the institution as it completed the review.

In the Reflective Overview, the team considers such factors as:

1. Stage in systems maturity (processes and results).
2. Utilization or deployment of processes.
3. The existence of results, trends and comparative data.
4. The use of results data as feedback.
5. Systematic improvement processes of the activities each AQIP Category covers.

Instructions for Systems Appraisal Team

During this stage of the Systems Appraisal, provide the team's consensus reflective overview statement, which should be based on the independent reflective overviews written by each team member. The consensus overview statement should communicate the team's understanding of the institution, its mission and the constituents it serves. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

Overall: NWACC's President has served NWACC since 2013. The institution is the largest community college in Arkansas and serves more than 17,000 students. A major strategic plan that included widespread constituent input was implemented in 2015. In 2017, the BOT approved revised mission and vision statements. NWACC has participated in 17 AQIP Action Projects.

Category 1: Providing quality programming and assessment is a stated priority and one of the NWACC's seven strategic goals and #2 in the NWACC 2018-2019 Strategic Plan. NWACC has built a Common Learning Framework that incorporates General Education, Course Level Learning, and Program Level Learning Outcomes that provides common guidelines, processes, programming, and assessment. NWACC used a variety of input sources to develop the Common Learning Framework: college community, external stakeholders, and professional organizations.

Category 2: Following the Carver Model of governance, NWACC has developed ends statements for the communities it serves: learners, businesses, owner/taxpayer's, pre-k to grade 16 students, and internal college community members. There are indications that NWACC is developing and/or maintaining strong relationship with business and industry, higher education institutions, and national organizations.

Category 3: NWACC states that valuing employees through ensuring solid hiring practices and ongoing professional development opportunities is one of its primary areas of focus. NWACC has prioritized hiring qualified and committed individuals and providing up-to-date, relevant professional development as aspects in carrying out its mission, vision, core values and strategic

plan.

Category 4: NWACC has taken steps to update its mission and vision over the last five years, soliciting input from multiple, relevant sources. NWACC has evaluated itself at an integrated level of maturity. The revised mission and vision statements emphasize providing accessible, affordable, quality education to its core service area

Category 5: Communication of the strategic plan, key performance measures, and institutional processes and results are achieved as part of the budget planning process and the annual distribution of the "Ends, Goals, and Objectives" document at the college wide fall forum.

Category 6: NWACC notes several efforts to maintain a college culture and infrastructure that support continuous quality improvement: conversation day, Quality Council, Policy review process, efficient energy usage, and incorporation of technology into assessment processes.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2 - Strategic Challenges Analysis

Strategic Challenges are those most closely related to an institution's ability to succeed in reaching its mission, planning and quality improvement goals. Review teams formulate judgments related to strategic challenges and accreditation issues through careful analysis of the Institutional Overview and through their own feedback provided for each AQIP Pathway Category. These findings offer a framework for future improvement of processes and systems.

Instructions for Systems Appraisal Team

Strategic Challenges may be identified on the Independent Category worksheets as the review progresses. The team chair will work with the team to develop a consensus Strategic Challenges statement based on their independent reviews. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

As noted throughout the portfolio, the College needs to determine external benchmarks and internal targets for its data collection across multiple surveys and platforms. Doing so should assist the College in determining project goals and determining when initiatives are successfully meeting the needs of the College. Additionally, the College would benefit from better use of the data it collects and determining if the data collected is supporting the priorities of the institution.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3 - Accreditation Evidence Screening Summary

Systems Appraisal teams screen the institution's Systems Portfolio evidence in relation to the Criteria for Accreditation and the Core Components. This step is designed to position the institution for success during the subsequent review to reaffirm the institution's accreditation. In order to accomplish this task, HLC has established linkages between various Process and Results questions and the Criteria's Core Components. Systems Appraisal teams have been trained to conduct a "soft review" of the Criteria/Core Components for Systems Portfolios completed in the third year of the AQIP Pathway cycle and a more robust review for Systems Portfolios completed in the seventh year. The formal review of the Criteria and Core Components for purposes of reaffirming the institution's accreditation through the comprehensive evaluation that occurs in the eighth year of the cycle, unless serious problems are identified earlier in the cycle. As part of this Systems Appraisal screening process, teams indicate whether each Core Component is "strong, clear, and well-presented," "adequate but could be improved," or "unclear or incomplete." When the Criteria and Core Components are reviewed formally for reaffirmation of accreditation, peer reviewers must determine whether each is "met", "met with concerns", or "not met".

The full report documents in detail the Appraisal team's best judgment as to the current strength of the institution's evidence for each Core Component and thus for each Criterion. It is structured according to the Criteria for Accreditation and the Systems Appraisal procedural document. Institutions are encouraged to review this report carefully in order to guide improvement work relative to the Criteria and Core Components.

Immediately below the team provides summary statements that convey broadly its observations regarding the institution's present ability to satisfy each Criterion as well as any suggestions for improvement. Again, this feedback is based only upon information contained in the institution's Systems Portfolio and thus may be limited.

Instructions for Systems Appraisal Team

In this section, the team should create summary statements/suggestions for improvement for each of the Criteria for Accreditation.

Evidence

There are several areas within the portfolio in which the team was able to find adequate levels of evidence in support of the Criterion, although these areas could have been better supported if the institution were to make better use of its data and summary results moving forward.

In Criterion 3 there are two Core Components that the team indicated were Unclear. These were 3.A. and 3.C. Specifically, It is unclear in the narrative if the institution's program quality and learning goals are consistent across all modes of delivery and all locations. Additionally it is unclear from the narrative the level of attainment of learning goals by graduates outside of individual programs with outside examination requirements. In 3.C.1. the College noted it had revised its current policy to better ensure that faculty credentials have been reviewed and updated and remain in compliance with regional, national and state accrediting and review organizations, however the

narrative did not provide clear information on how this was accomplished or what the review entailed. It was also unclear how faculty in career programs and dual credit instructors are credentialed. The team found it was also unclear if staff members in student service fields are appropriated qualified, trained and supported in their professional development.

In Criterion 5, the College provides details on its technology infrastructure but does not adequately address the physical infrastructure and emergency management processes to support its educational mission.

As noted in the strategic issues and quality of the portfolio, the overall lack of summary data and insights into the data by the institution may have contributed to a lack of evidence.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4 - Quality of Systems Portfolio

In this System Appraisal, peer review teams should acknowledge any work that the institution has begun toward addressing the Criteria for Accreditation and the Core Components. The more focused analysis remains on the AQIP Categories and the institution's evidence related to the Process (P), Results (R), and Improvement (I) questions. In cases where there was HLC follow-up stemming from the institution's previous reaffirmation review, the institution may request closer scrutiny of those items during this Systems Appraisal.

Instructions for Systems Appraisal Team

Because it stands as a reflection of the institution, the Systems Portfolio should be complete and coherent, and it should provide an open and honest self-analysis on the strengths and challenges facing the institution. In this section, the peer review team provides the institution with constructive feedback on the overall quality of the Systems Portfolio, along with suggestions for improving future Systems Portfolio submissions.

Evidence

Overall the System's Portfolio had both stronger and weaker components and seemed to be in multiple voices. Most of the Results sections of the portfolio were not fully completed and did not share summary results or insights. The College might benefit from a review of the goals of writing to the AQIP and Accreditation processes with a focus on writing evidentiary statements in support of the Criterion for future submissions. The institution may benefit from a writing guide and perhaps a single voice to provide more cohesion to the narrative and to the evidence files.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5 - AQIP Category Feedback

The Systems Appraisal Feedback Report addresses each AQIP Category by identifying strengths and opportunities for improvement. Through detailed comments, which are tied to the institution's Systems Portfolio, the team offers in-depth analysis of the institution's processes, results and improvement efforts. These comments should be straightforward and consultative, and should align to the maturity tables. This allows the team to identify areas for improvement and recommend improvement strategies for the institution to consider.

I - Helping Students Learn

Focuses on the design, deployment, and effectiveness of teaching-learning processes (and on the processes required to support them) that underlie the institution's credit and non-credit programs and courses.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Common Learning Outcomes, Program Learning Outcomes, Academic Program Design, Academic Program Quality and Academic Integrity.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

CATEGORY 1: HELPING STUDENTS LEARN

Category 1 focuses on the design, deployment and effectiveness of teaching-learning processes (and the processes required to support them) that underlie the institution's credit and non-credit programs and courses.

1.1: COMMON LEARNING OUTCOMES

Common Learning Outcomes focuses on the knowledge, skills and abilities expected of graduates from all programs. The institution should provide evidence for Core Components 3.B., 3.E. and 4.B. in this section.

1P1 Describe the processes for determining, communicating and ensuring the stated common learning outcomes, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Aligning common outcomes (institutional or general education goals) to the mission, educational offerings and degree levels of the institution (3.B.1, 3.E.2)

Systematic

NWACC has a process for aligning common outcomes to the mission and educational offerings through a Common Learning Framework for general education. The process is understandable and repeatable and shared on internal and external websites. The Assessment Committee is beginning to make the process explicit and measurable for all courses and programs.

- Determining common outcomes (3.B.2, 4.B.4)

Reacting

Although the institution has identified General Education Learning Outcomes and it is apparent that the common outcomes are generally understood, it is not apparent from the narrative how the learning outcomes are chosen, how faculty were involved in the process, or how often these are reviewed for currency.

- Articulating the purposes, content and level of achievement of the outcomes (3.B.2, 4.B.1)

Aligned

The Student Learning Assessment Committee meets regularly and reports to the faculty senate and VP of Learning monthly. Conversation Day is utilized to articulate the purpose and status of outcomes. The Assessment Committee maintains an updated website that articulates the purpose, content and level of achievement of outcomes. The processes are explicit and repeatable, although it is not evident that they are evaluated periodically for improvement.

- Incorporating into the curriculum opportunities for all students to achieve the outcomes (3.B.3, 3.B.5)

Systematic

The processes the institution uses to incorporate curriculum opportunities to achieve common learning outcomes (a distributed general education system) is understood, repeatable and is prone to make the goals explicit and measureable. The institution is also working to incorporate

general education outcomes into co-curricular activities as well.

- Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs (3.B.4)

Reacting

NWACC provides an example of how one program ensures that outcomes remain relevant. However, there is no discussion about a process by which the institution systematically assures that outcomes remain relevant in terms of being aligned with student, workplace and societal needs.

- Designing, aligning and delivering cocurricular activities to support learning (3.E.1, 4.B.2)

Reacting

NWACC describes the variety of clubs and organizations as well as service learning opportunities that support learning but there is no discussion of the process that the institution systematically and predictably utilizes to design, align and deliver co-curricular activities that support learning. To move to a systematic level of maturity the process needs to identify clear, repeatable engagement processes that involve multiple stakeholders and is evaluated periodically for improvements.

- Selecting the tools, methods and instruments used to assess attainment of common learning outcomes (4.B.2)

Systematic

Rubrics are in place to measure writing, critical thinking and applying mathematics. NWACC states that the Assessment Committee selects the tools, methods and instruments used but apart from indicating that data is collected and analyzed, the process used to select tools, methods and instruments is not discussed. This response could have been strengthen by providing information on the processes the used by the Assessment Committee in selecting tools and the involvement of varied constituencies and the faculty in the process.

- Assessing common learning outcomes (4.B.1, 4.B.2, 4.B.4)

Systematic

The college has a defined process for assessing common learning outcomes. The assessment appears to be embedded in courses in the general education curriculum defined by the faculty as aligning with the common learning outcomes and thus is generally understood, repeatable and documented. To move to the aligned level of maturity, the institution should include

periodic evaluation of the process for improvement purposes.

1R1   What are the results for determining if students possess the knowledge, skills and abilities that are expected at each degree level? The results presented should be for the processes identified in 1P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Systematic

While the college was able to provide some results data, the results were not provided in a way to determine if students had attained institutional targets or benchmarks on their performance. Along with the collection of data, the faculty and the college may want to consider what the expectations of student performance are at the program and institutional level and report the data in a way that shows attainment, or lack thereof of the outcomes.

- Comparison of results with internal targets and external benchmarks

Reacting

The College did not share internal targets and only one set of external benchmarks was provided, although it is unknown if that was the benchmark the College was wishing to attain. To move to the systematic level of maturity, the institution needs to set internal targets that are shared, trended across years, and that foster improvement efforts.

- Interpretation of results and insights gained

Reacting

The response did not directly address this area. To advance to systematic, the institution needs to analyze and share data that fosters improvement efforts.

1I1   Based on 1R1, what process improvements have been implemented or will be implemented in the next one to three years? (4.B.3)

The Academic Assessment Faculty Toolkit, that describes the assessment process, has been completed and is available on the Student Assessment of Learning Committee's webpage. The Assessment Committee is considering utilizing Google Forms to improve the collection and analysis process. Two AQIP Action Projects are exploring how the new LMS, Canvas, can be utilized to improve the collection of analysis of data.

 The College needs to determine what the expectations of student learning for the common goals and establish internal targets and external benchmarks against which it can measure performance.>

1.2: PROGRAM LEARNING OUTCOMES

Program Learning Outcomes focuses on the knowledge, skills and abilities graduates from particular programs are expected to possess. The institution should provide evidence for Core Components 3.B., 3.E. and 4.B. in this section.

1P2   Describe the processes for determining, communicating and ensuring the stated program learning outcomes and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Aligning learning outcomes for programs (e.g., nursing, business administration, elementary teaching, etc.) to the mission, educational offerings and degree levels of the institution (3.E.2)

Systematic

The college has a process for adopting program level outcomes that reflect knowledge, skills and attitudes of students completing discipline programs. The program outcomes are unique to each educational program but fall under the broad institutional mission, objectives and outcomes. Periodic review of the processes of program learning outcomes would assist the College in moving to the aligned level of maturity.

- Determining program outcomes (4.B.4)

Systematic

Some programs utilize advisory boards to help determine program outcomes. Other program outcomes are compared using national exams, job placement data, and common assessment rubrics used throughout the curriculum. Data is discussed at fall and spring divisional meetings to determine what changes should be made to the curriculum and/or to the measurement tool. This process is generally understood and repeatable.

- Articulating the purposes, content and level of achievement of the outcomes (4.B.1)

Systematic

Course syllabi and the website state the type of assessment done in each program and the outcomes achieved. While NWACC illustrates a process for articulating the purposes, content and level of achievement for outcomes, it is not evident the process is repeated and evaluated on a continuous basis.

- Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs (3.B.4)

Systematic

The college uses both external and internal stakeholders to ensure transferability of coursework, and that curriculum is meeting employer and student needs. To move to the aligned level of maturity, the institution may consider how this process is periodically reviewed and how the key lessons learned are applied across programs.

- Designing, aligning and delivering cocurricular activities to support learning (3.E.1, 4.B.2)

Systematic

Examples of co-curricular opportunities such as internships, student organizations and clubs and service learning are provided. To advance in maturity, the institution might consider how the co-curricular activities are designed or chosen to support student learning and how this process is explicit and periodically reviewed.

- Selecting the tools, methods and instruments used to assess attainment of program learning outcomes (4.B.2)

Systematic

Those programs with specialized accrediting bodies assess program level outcomes annually. This is especially pertinent for programs in the Health Sciences Division. Additionally the Institutional Research office provides data on enrollment, retention, and completion for cohorts of students. Comparative data is also available from the NCCBP. The college uses the Annual Occupational Graduate Survey and Transfer Graduate Survey to track success of its students.

To advance in maturity, NWACC might consider how they select tools, methods and instruments for those without specialized accreditation.

- Assessing program learning outcomes (4.B.1, 4.B.2, 4.B.4)

Reacting

The college did not provide a response to this area.

> 1R2 What are the results for determining if students possess the knowledge, skills and abilities that are expected in programs? The results presented should be for the processes identified in 1P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in

collecting the data and how the results are shared. These results might include:

- Overall levels of deployment of the program assessment processes within the institution (i.e., how many programs are/not assessing program goals)

Systematic

Only the health programs are discussed. There appears to be other sections in the portfolio that describe how many programs are assessed and the cycle that program assessment follows, however that is not described in this response.

- Summary results of assessments (include tables and figures when possible)

Reacting

The response only provides limited information on the Health Professions or five programs that require a national examination for licensing or certification. To advance in level of maturity, NWACC needs to provide evidence that all programs undergo assessment.

- Comparison of results with internal targets and external benchmarks

Reacting

None were provided. To advance in maturity, NWACC needs to document that it has set internal targets and identified external benchmarks.

- Interpretation of assessment results and insights gained

No interpretation of assessment results was provided.

1I2   Based on 1R2, what process improvements have been implemented or will be implemented in the next one to three years? (4.B.3)

The college is working to align several processes to be more integrated. The primary resources for this process is the College Wide Assessment Plan and the adoption of the LMC, Canvas. Moving forward the college is also working to mature in its assessment process for co-curricular assessment. NWACC might consider developing a process for identifying internal targets and external benchmarks and how to use them to interpret and analyze actual results.

1.3: ACADEMIC PROGRAM DESIGN

Academic Program Design focuses on developing and revising programs to meet stakeholders' needs. The institution should provide evidence for Core Components 1.C. and 4.A. in this section.

1P3   Describe the processes for ensuring new and current programs meet the needs of the institution and its diverse stakeholders. This includes, but is not limited to, descriptions of key processes for the

following:

- Identifying student stakeholder groups and determining their educational needs (1.C.1, 1.C.2)

Systematic

The college supports a diverse population of credit enrolled noncredit, ethnic, age, program, co-enrolled, online hybrid, etc. Culturally and linguistically diverse. Each with their own needs. The college uses skill based testing Accuplacer as one tool. Student profile is another. There is a gap in the institutional response with the focus solely on beginning freshmen. To strength and moved to an aligned level of maturity the institution might consider a broader narrative that also addresses other populations.

- Identifying other key stakeholder groups and determining their needs (1.C.1, 1.C.2)

Reacting

The college only identifies one additional set of stakeholders, Culturally & Linguistically Diverse (CLD) students, which may be a large population but there must be additional populations that the college work with such as employers, non-traditional students, veterans, etc.

- Developing and improving responsive programming to meet all stakeholders' needs (1.C.1, 1.C.2)

Systematic

The college maintains relationships with the K-12 community as well as a private, charter and home schooled students in the area. The college also host the annual workforce meetings each spring and uses advisory committee feedback as another resource related to employer needs. To move forward, the institution might consider how this process is periodically reviewed and how key lessons learned are shared among units.

- Selecting the tools, methods and instruments used to assess the currency and effectiveness of academic programs

Systematic

NWACC uses a varied approach to selecting tools, methods and instruments to assess the currency and effectiveness of academic programs such as surveys and meetings with

stakeholders. To advance in maturity NWACC may want to consider other methods that are repeatable, documented and evaluated.

- Reviewing the viability of courses and programs and changing or discontinuing when necessary (4.A.1)

Systematic

The Curriculum Committee and CAO Office oversee the review of course and program viability. Programs undergo a 7 year cycle program review process. Enrollment data, retention data and national exam pass rates, etc. are used to determine program viability. There is not discussion of how discontinuing a program occurs.

1R3 What are the results for determining if programs are current and meet the needs of the institution's diverse stakeholders? The results presented should be for the processes identified in 1P3. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of assessments (include tables and figures when possible)

Reacting

Program changes in three areas are shared as examples of institutional program change. To advance in maturity levels, NWACC should consider how this process is understood in all programs, a repeatable process and one that is regularly evaluated.

- Comparison of results with internal targets and external benchmarks

Reacting

The college responded with a brief narrative concerning one program, Criminal Justice, but did not provide any data, targets or benchmarks.

- Interpretation of results and insights gained

< /> The response referenced assessment data that was not provided to the reviewers.

1I3   Based on 1R3, what process improvements have been implemented or will be implemented in the next one to three years?

The college uses standard program assessment tools with external partners and advisory groups to evaluate courses and programs. The reading and writing programs are one example of long-term assessment and change.

1.4: ACADEMIC PROGRAM QUALITY

Academic Program Quality focuses on ensuring quality across all programs, modalities and locations. The institution should provide evidence for Core Components 3.A. and 4.A. in this section.

1P4 Describe the processes for ensuring quality academic programming. This includes, but is not limited to, descriptions of key processes for the following:

- Determining and communicating the preparation required of students for the specific curricula, programs, courses and learning they will pursue (4.A.4)

Systematic

The college has specific processes for determining and communicating appropriate levels of preparation for admission to the College. The Admissions and Advising staff have the role in guiding current and potential students through these requirements.

- Evaluating and ensuring program rigor for all modalities, locations, consortia and dual-credit programs (3.A.1, 3.A.3, 4.A.4)

Systematic

The college was accredited by the National Alliance of Concurrent Enrollment Partnerships in 2016, and adheres to requirements for concurrent enrollments required by the state of Arkansas. Faculty from the college liaison with high school instructors to assure rigor and alignment with course offerings. The response seems to indicate this process is generally understood, repeatable and often documented however it does not reference other modalities, such as online teaching

- Awarding prior learning and transfer credits (4.A.2, 4.A.3)

 Reacting

Although there is a form in place, which was provided by the institution, the narrative did not provide a description of the processes for either Transfer of credit or Prior Learning. To move forward to a systematic maturity, the institution should consider improving the description of the process to include how it is repeatable and periodically evaluated.

- Selecting, implementing and maintaining specialized accreditation(s) (4.A.5)

Reacting

The response indicates there is a generally understood and repeatable proves for maintaining accreditation but it does not provide information on how the institution determines the needs of specialized accreditation.

- Assessing the level of outcomes attainment by graduates at all levels (3.A.2, 4.A.6)

Reacting

Programs with specialized accreditations utilize exams to assess the level of outcomes attainment by graduates. The University of Arkansas which receives many graduates from NWACC submits annual reports to allow for institutional follow-up. There is room to consider graduate surveys, capstone course, assessment processes, etc. in order to evaluate outcomes attainment by all graduates beyond those that are in programs with specialized accreditation or those that transfer to U of A.

- Selecting the tools, methods and instruments used to assess program rigor across all modalities

Reacting

The repeatable and systematic process used to select tools, methods, and instruments used to assess program rigor across modalities is not described.

1R4 What are the results for determining the quality of academic programs? The results presented should be for the processes identified in 1P4. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of assessments (include tables and figures when possible)

Reacting

Among 2017-18 academic year graduates, the college had a 100% pass rate across all programs requiring either state or national licensing./certification. Results are provided for business and computer information students. The three year out survey for dual credit students conducted in 2016 is not yet completed. There is room for improvement in providing a more systematic and data driven review of summary results

- Comparison of results with internal targets and external benchmarks

Reacting

None were provided

- Interpretation of results and insights gained

Reacting

Other than a reference to an advisory board considering the data, none were provided.

1I4 Based on 1R4, what process improvements have been implemented or will be implemented in the next one to three years?

The college worked to improve student's understanding of transferability of courses, including additional information in student handbooks, classroom visits, and mailings. The college also expanded its use of Advisory Boards and partnerships with the University of Arkansas or Early Childhood Education. To advance in maturity, the institution needs to identify internal targets and external benchmarks, collect data, and integrate its analysis

1.5: ACADEMIC INTEGRITY

Academic Integrity focuses on ethical practices while pursuing knowledge. The institution should provide evidence for Core Components 2.D. and 2.E. in this section.

1P5 Describe the processes for supporting ethical scholarly practices by students and faculty. This includes, but is not limited to, descriptions of key processes for the following:

- Ensuring freedom of expression and the integrity of research and scholarly practice (2.D.2.E.1, 2.E.3)

Systematic

The college has adopted policies related to academic freedom which is reflected a board policy, academic standards, and the faculty handbook. Additionally, the student code of conduct covers student conduct and is distributed during new student orientation, in the student handbook and referenced in course syllabi and program handbooks. To advance in maturity, the institution may consider periodically evaluating this process.

- Ensuring ethical learning and research practices of students (2.E.2, 2.E.3)

Reacting

The Academic Standards policy (I-510) is the foundation to ensure students ethical learning and research practices. NWACC would benefit from enhancing their discussion of this element of the portfolio. For instance, is there an IRB for students and faculty research? Is there a plagiarism policy? It is assumed by this reviewer that all of these policies and practices exist at the college. It would enhance the portfolio to address them.

- Ensuring ethical teaching and research practices of faculty (2.E.2, 2.E.3)

Reacting

The college did not respond specifically to this question.

- Selecting the tools, methods and instruments used to evaluate the effectiveness and comprehensiveness of supporting academic integrity

Reacting

The Academic Complaint and Grievance Policy provides students the opportunity to dispute. The program "Advocate" is used for complaints. While these examples are commendable, NWACC does not discuss the process for institution uses to select the tools, methods and instruments used to evaluate the support of academic integrity.

1R5 What are the results for determining the quality of academic integrity? The results presented should be for the processes identified in 1P5. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures where appropriate)

Reacting

Not addressed

- Comparison of results with internal targets and external benchmarks

Reacting

Not addressed

- Interpretation of results and insights gained

Reacting

Not addressed.

1I5 Based on 1R6, what process improvements have been implemented or will be implemented in the next one to three years?

Program faculty are using student input for changes to program delivery and outcome development. The academic standards committee has made changes in the process they are responsible for. Librarians are included on instructional committees to improve student and faculty learning resources. The librarians are also improving information literacy as part of instruction and learning. To advance in maturity, the institution needs to consider how it can collect data that demonstrate results and compares to internal targets and internal benchmarks.

CATEGORY SUMMARY

Create a Category Summary Statement (3–10 sentences) that captures the individual team member's perception of the institution's current overall level of maturity (and the relevant challenges and strengths) and how the institution might further advance its quality agenda.

NWACC demonstrates an ongoing desire to address and improve helping students learn, particularly through the College's assessment process. The institutions level of maturity ranges from reacting to systematic in most cases. NWACC would benefit from a systematic and strategic review of the processes used to help students learn and in identifying data that demonstrate internal targets and external benchmarks. Throughout this category, NWACC provides ad-hoc examples and at times does not address portfolio elements.

The college made major improvements in curriculum development processes. New assessment and evaluation tools have been acquired and shared to the college community.

The responses by the institution did not always address the questions being asked. Overall summary data was rarely provided or lacked important context or data elements. The institution provided little insight or interpretation of results in the narrative. The college also does not appear to set internal or external benchmarks, although there are intermittent reference to the NCCBP. The college has the overall structures in place to reach the level of systematic but do not seem to be using the structures to make data informed decisions.

CATEGORY STRATEGIC ISSUES

The College lacked summary data and gave very little insight to the data being gathered

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

II - Meeting Student and Other Key Stakeholder Needs

Focuses on determining, understanding and meeting needs of current and prospective students and other key stakeholders, such as alumni and community partners.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Current and Prospective Student Needs, Retention, Persistence and Completion, Key Stakeholder Needs, Complaint Processes, and Building Collaborations and Partnerships.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

 CATEGORY 2: MEETING STUDENT AND OTHER KEY STAKEHOLDER NEEDS

Category 2 focuses on determining, understanding and meeting needs of current and prospective students and other key stakeholders, such as alumni and community partners.

2.1: CURRENT AND PROSPECTIVE STUDENT NEED

Current and Prospective Student Need focuses on determining, understanding and meeting the non-academic needs of current and prospective students. The institution should provide evidence for Core Components 3.C. and 3.D in this section.

2P1 Describe the processes for serving the academic and non-academic needs of current and prospective students. This includes, but is not limited to, descriptions of key processes for the following:

- Identifying underprepared and at-risk students, and determining their academic support needs (3.D.1)

Systematic

The College's freshmen are required to complete a placement exam. Students placing into one or more developmental courses are required to participate in a student success course. Freshmen are also required to participate in orientation, which includes a risk factor exam. The institution also uses

intrusive interventions that includes assigning and monitoring student on Academic Watch, Academic Probation and Academic Suspension. Students have the option to appeal financial aid and academic suspension. Faculty use an early alert survey to notify the institution of students struggling in coursework. The College's response would be improved by addressing processes for identifying academic support needs of returning students, part-time student, online students, veteran students and those students with English as a Second Language.

- Deploying academic support services to help students select and successfully complete courses and programs (3.D.2)

Reacting

The College's protocol in communicating the support services available to students is clearly stated. However, the College did not adequately describe the process of deploying academic support services to help students select and successfully complete courses and programs. Systematic maturity may be achieved be creating a clear repeatable and regularly reviewed deployment process.

- Ensuring faculty are available for student inquiry (3.C.5)

Systematic

The College has established expectations ensuring faculty are available for student inquiry. Examples include faculty routinely holding 15 office hours per week, responding to email and LMS communication, etc. This response might be strengthened by including how these decisions and practices came to be and how they are periodically reviewed for improvement purposes. It is also unclear how these expectations are applied to adjunct faculty.

- Determining and addressing the learning support needs (tutoring, advising, library, laboratories, research, etc.) of students and faculty (3.D.1, 3.D.3, 3.D.4, 3.D.5)

Reacting

The College's responses provides a list of academic support services offered and whether they are required or recommended to address learning support needs. However, this response does not discuss the process for determining and addressing learning support needs. The response would be strengthened by including how the institution anticipates emerging support needs.

- Determining new student groups to target for educational offerings and services

Systematic

The College provides an example of how it analyzed labor market needs to create the Associate of Applied Science in Construction Technology. Concurrent enrollment is another area NWACC is directing the attention of its high school relations department. However, the college's response does not indicate how this process is repeated, regularly reviewed, or applied for other areas to benefit.

- Meeting changing student needs

Systematic

The College offers a wide range of programs, services and instructional modalities. Courses are

offered during the day, evenings and weekends. It also utilizes various surveys and standard instruments to identify student needs.

However, in its response the College does not address its process used to determine student needs nor measures used to determine its success in meeting these needs.

- Identifying and supporting student subgroups with distinctive needs (e.g., seniors, commuters, distance learners, military veterans) (3.D.1)

Reacting

The College highlighted Mental Health, International, and Enrollment Support initiatives provided to support students, but the response does not directly address many of the subgroups highlighted in the prompt. Examples of programs that support other student subgroups is shared, there is no explanation of the processes in which they are identified, developed, and implemented.

- Deploying non-academic support services to help students be successful (3.D.2)

Reacting

The College uses a Peer Association for Student Success and the LIFE Program as examples of non-academic support deployed for students. It is unclear which students participate in this program and how they are identified. Movement toward systematic maturity would require a response that addresses the process of selecting students and a periodic review of this process.

- Ensuring staff members who provide non-academic student support services are qualified, trained and supported (3.C.6)

Reacting

The College does not describe the process utilized to ensure that staff are qualified trained and supported. As they acknowledge, "Divisions, committees, and leadership groups each have some processes in place to determine training needs" but those processes are not outlined in this section of the portfolio. The processes shared are focused primarily on new employee hiring and onboarding. This response would be strengthened by providing clarity as to how the institution ensures staff members access professional development.

- Communicating the availability of non-academic support services (3.D.2)

Systematic

The College publicizes college's support services through new student orientation, the MyNWACCConncection Portal, Instructor syllabi, campus-wide Monitors, and classroom visits. While there seems to be a process in place for first-time full-time students, the College's response does not address the other student populations.

- Selecting the tools, methods and instruments to assess student needs

Systematic

The College utilizes results from the Ruffalo-Noel Levitz Student Survey, NCCBP, and internal

surveys requested from departments. While the College indicates tools that used to assess student needs, a more mature response would include the processes used to select the tools, methods, and instruments to assess student needs.

- Assessing the degree to which student needs are met

Systematic

The College uses a combination of nationally benchmarked and in-house developed instruments. These include biennial participation in Ruffalo-Noel Levitz Survey and annual participation in the National Community College Benchmark Project. Additionally, the College uses locally developed surveys and focus groups. Surveys include graduate surveys, Learner Services surveys and surveys of local Chambers of Commerce members. Growth toward aligned maturity may involve regular institutional evaluation of the assessment process for improvement.

2R1 What are the results for determining if current and prospective students' needs are being met? The results presented should be for the processes identified in 2P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Reacting

The College limited its response to summary results of mental health services. No other summary results were provided.

- Comparison of results with internal targets and external benchmarks

Reacting

No response was provided by the College.

- Interpretation of results and insights gained

Reacting

No response was provided by the College.

2I1 Based on 2R1, what process improvements have been implemented or will be implemented in the next one to three years?

The College described several non-academic support programs for students. However, the narrative lacked elaboration on the processes for identifying, deploying and evaluating these programs, particularly in terms of setting internal targets and external benchmarks.

2.2: RETENTION, PERSISTENCE AND COMPLETION

Retention, Persistence and Completion focuses on the approach to collecting, analyzing and distributing data on retention, persistence and completion to stakeholders for decision making. The institution should provide evidence for Core Component 4.C. in this section.

2P2 Describe the processes for collecting, analyzing and distributing data on retention, persistence and completion. This includes, but is not limited to, descriptions of key processes for the following:

- Collecting student retention, persistence and completion data (4.C.2, 4.C.4)

Systematic

The College reviews the retention rates for all first-time students, First-Time Full-Time degree-seeking students, developmental student retention, and overall student retention. Additional retention data is gathered and analyzed on specialty populations such as Veterans, and under-served student populations. Growth toward aligned maturity might involve periodical evaluation of this process.

- Determining targets for student retention, persistence and completion (4.C.1, 4.C.4)

Systematic

The College's student retention, persistence and completion goals are informed by the state's productivity-based funding model. The model is a mechanism to align institutional funding with statewide priorities and includes categories for Effectiveness, Affordability, Adjustments and Efficiency.

- Analyzing information on student retention, persistence and completion

Systematic

The College analyzes retention, persistence and completion data for first-time full-time degree seeking, students enrolled in developmental education, as well as overall retention. Retention rates are tracked for specialty programs, such as nursing, physical therapy, developmental education and emergency medical technician. NWACC compares its graduation rates against a cohort of 11 institutions from around the country. While pursuing analysis of retention, persistence and completion is evident, aligned maturity may be achieved through demonstration of a regularly reviewed process.

- Meeting targets for retention, persistence and completion (4.C.1)

Reacting

The College did not provide information on retention, persistence, or completion targets or progress toward meeting targets. Systematic maturity in this area requires the College to establish internal targets and external benchmarks.

- Selecting the tools, methods and instruments to assess retention, persistence and completion (4.C.4)

Systematic

The College monitors retention rates using the standard IPEDS definition. The institution also uses internal and external measurement that include an annual survey exit survey of graduates. While the College describes some of the tools, methods, and instruments used for assessment, it does not describe the process used to select these tools.

Other Identified Processes

Reacting

The College's response included a section on Outcomes, measures tracked and tools utilized, however the narrative did not address how these resources were selected or evaluated.

2R2 What are the results for student retention, persistence and completion? The results presented should be for the processes identified in 2P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Reacting

The College provided summary results on an initiative to improve remedial pass rates and success in gateway courses. Retention rate data was also included in the response. Movement toward systematic maturity would include summary results that illustrate data trends of institutional measures over time.

- Comparison of results with internal targets and external benchmarks

Reacting

The College included external targets in the Category 2 narrative, but did not include this data in the Results.

- Interpretation of results and insights gained

Reacting

The College offered some interpretation of results previously in the narrative, but did not address this topic in this section.

2I2 Based on 2R2, what process improvements have been implemented or will be implemented in the next one to three years? (4.C.3)

Overall, the College's response would benefit by establishing internal targets and external benchmarks and publishing results. While the College identifies improvements made for veterans, dependents, and at-risk students, there is no corresponding data to illustrate the impact of these improvements on the targets population.

2.3: KEY STAKEHOLDER NEEDS

Key Stakeholder Needs focuses on determining, understanding and meeting needs of key stakeholder groups, including alumni and community partners.

2P3 Describe the processes for serving the needs of key external stakeholder groups. This includes, but is not limited to, descriptions of key processes for the following:

- Determining key external stakeholder groups (e.g., alumni, employers, community)

Systematic

The College has partnerships with the K-12 community that include the public, private, charter and home school students. The College's Office of High School Relations has representation on chamber educational committees, attends superintendent and workforce meetings. The College also collaborates with other 2 and 4-year educational institutions in the region. The College's response would benefit by including the process that supports how these groups are identified.

- Determining new stakeholders to target for services or partnership

Reacting

The College did not provide the process by which it determines new stakeholders to target.

- Meeting the changing needs of key stakeholders

Systematic

The College uses its career program advisory committees, community diversity dialogues, and environmental scanning to stay abreast of changing needs of its constituencies'. The response would benefit with more information about the needs of each stakeholder. Advancement toward aligned maturity could happen with a fuller description of how this process is explicit, repeatable and periodically evaluated.

- Selecting the tools, methods and instruments to assess key stakeholder needs

Systematic

The College identified the Ruffalo-Noel Levitz SSI survey as a national institutional tool. The institution also uses feedback from the Student Senate, Strategic Planning forums and student surveys to better understand the unmet needs of the students. The response would be improved by including the processes used in selecting these tools, methods and instruments.

- Assessing the degree to which key stakeholder needs are met

Reacting

The College's response did not align with the posed question.

2R3 What are the results for determining if key stakeholder needs are being met? The results presented should be for the processes identified in 2P3. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Reacting

The College limited its response to Construction Technology. To achieve systematic maturity, shared

results from all stakeholder needs should be included in the response.

- Comparison of results with internal targets and external benchmarks

Reacting

No response was provided by the institution.

- Interpretation of results and insights gained

Reacting

No response was provided by the institution

2I3 Based on 2R3, what process improvements have been implemented or will be implemented in the next one to three years?

The College approved new certificate of proficiency programs approved that were formerly non-credit technical apprenticeship offerings. Criminal justice, dental assisting, and nursing assistant course locations were moved in Fall 2017 to improve accessibility to high school students in Washington County. Adult Education courses moved in order to provide students a more college inclusive experience and add ease to the transition to college courses. The College's response in this section included little explanation of processes and evaluation. More established internal targets or external benchmarks would also be recommended course of action.

2.4: COMPLAINT PROCESSES

Complaint Processes focuses on collecting, analyzing and responding to complaints from students or key stakeholder groups.

2P4 Describe the processes for collecting, analyzing and responding to complaints from students and stakeholder groups. This includes, but is not limited to, descriptions of key processes for the following:

- Collecting complaint information from students

Systematic

The College has a robust, understood and documented process for collecting student complaints. The institution may want to consider how this process is regularly reviewed for improvement purposes to move to the aligned maturity level.

- Collecting complaint information from other key stakeholders

Systematic

The College processes complaint information from other key stakeholders through strategic forums, advisory committees and meeting with external groups. As described, the process for receiving and processing complaints appears to be ad-hoc. Complaints are discussed at the President's Cabinet. The response could be strengthened by including how this process is explicit, repeatable and periodically

reviewed.

- Learning from complaint information and determining actions

Reacting

The College describes the process for resolution of student behavior issues. No information was provided in the narrative on how the College learns from analysis of its complaints over time. To move to the systematic maturity the College may consider defining a learning process that includes periodic review.

- Communicating actions to students and other key stakeholders

Reacting

The College provided a response explaining that the Director of Student Conduct communicates with impacted parties for conduct complaints. However, there is no discussion related to communicating actions to students and other stakeholders outside of conduct issues.

- Selecting the tools, methods and instruments to evaluate complaint resolution

Reacting

The College explained how *Advocate* is used to report the number of cases, types of cases, report Clery numbers, and recidivism rates. The response does not address the process used for the selection of *Advocate* or other tools, methods, and instruments to evaluate complaint resolution.

2R4 What are the results for student and key stakeholder complaints? The results presented should be for the processes identified in 2P4. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Reacting

The College shared data collected since the implementation of Advocate in 2012. More than 250 complaints received, over 200 complaints resolved without sanction, and 40 complaints resulted in sanctions that included 5 expulsions/suspensions from the college. Summary results outside of conduct and grievance data are not described.

- Comparison of results with internal targets and external benchmarks

Reacting

The College did not provide a response.

- Interpretation of results and insights gained

Reacting

The College did not provide a response.

2I4 Based on 2R4, what process improvements have been implemented or will be implemented in the next one to three years?

The College intends to focus on additional training of faculty and staff, as well as more fully implementing aspects of the *Advocate* software. Given the original implementation of the software was in 2012-13 it is important that the campus work to mature campus processes around both student complaints, and formalize a process for other stakeholder complaints.

As an oft-repeated issue with this submission, the College needs to determine appropriate internal targets and external benchmarks.

2.5: BUILDING COLLABORATIONS AND PARTNERSHIPS

Building Collaborations and Partnerships focuses on aligning, building and determining the effectiveness of collaborations and partnerships to further the mission of the institution.

2P5 Describe the processes for managing collaborations and partnerships to further the mission of the institution. This includes, but is not limited to, descriptions of key processes for the following:

- Selecting partners for collaboration (e.g., other educational institutions, civic organizations, businesses)

Reacting

The College listed current and potential partners for collaboration but did not provide information regarding the processes used for selecting partners.

- Building and maintaining relationships with partners

Systematic

The College uses its Advisory Boards as a conduit for eliciting feedback on educational and training needs in the area. The College also maintains articulation agreements with over 20 four-year colleges and universities in the region. Concurrent enrollment opportunities are also a priority for partnerships in the region, with both public and private K-12 schools. Growth toward aligned maturity would involve an explicit, repeatable partnership process that is periodically reviewed.

- Selecting the tools, methods and instruments to assess partnership effectiveness

Reacting

The College describes an assessment process that is informal and varied by partnership and division of the College. Growth toward systematic maturity would involve the creation of a clear, repeatable, and periodically reviewed process for this response.

- Evaluating the degree to which collaborations and partnerships are effective

Reacting

The College completes a campus wide survey each year to measure services to the K-12 partners, but

does not provide evidence of evaluating effectiveness or how it determines the effectiveness of partnerships outside of K-12.

2R5 What are the results for determining the effectiveness of aligning and building collaborations and partnerships? The results presented should be for the processes identified in 2P5. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Reacting

No response was provided by the College.

- Comparison of results with internal targets and external benchmarks

Reacting

No response was provided by the College.

- Interpretation of results and insights gained

Reacting

No response was provided by the College.

2I5 Based on 2R5, what process improvements have been implemented or will be implemented in the next one to three years?

The College has plans to provide increased access to the Secondary Career Center program offered in partnership with Northwest Technical Institute, making access available to more high school students in the county.

The College would benefit from formalizing processes and designing evaluation processes for its many partnerships. This action will allow the institution to align resources to support programming that is effective and meets the needs of the students.

CATEGORY SUMMARY

The College has established some processes, but lacks a level of formal evaluation of programs and processes.

The College responses in this section focused on full-time students, although they have a large part-time population, how they serve them was not evident.

While the college provided examples how they serve students and stakeholders and what partnerships exist, the institution would benefit from pursuing a systematic process for serving students and stakeholders.

Additionally, the College reports little summary data, appears to have few targets and no external benchmarks. Defining these items would help the institution mature overall and help drive decision-

making.

Finally, while the Colleges responses indicate it has processes to support this section, there was little detail shared. Instead the information just highlighted current programs.

CATEGORY STRATEGIC ISSUES

Lack of description of actual processes (rather than examples of the product of the processes) that are repeatable, systematic and regular. Some responses do not address the portfolio prompt. Lack of process descriptions, summary data, internal targets and external benchmarks. External benchmarking is apparent in evidence section but not addressed in narratives, and overall lack of insight into data that is presented.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

III - Valuing Employees

Explores the institution's commitment to the hiring, development, and evaluation of faculty, staff and administrators.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Hiring, Evaluation and Recognition and Development.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

CATEGORY 3: VALUING EMPLOYEES

Category 3 explores the institution's commitment to the hiring, development and evaluation of faculty, staff and administrators.

3.1: HIRING

Hiring focuses on the acquisition of appropriately qualified/credentialed faculty, staff and administrators to ensure that effective, high-quality programs and student support services are provided. The institution should provide evidence for Core Component 3.C. in this section.

3P1 Describe the process for hiring faculty, staff and administrators. This includes, but is not limited to, descriptions of key processes for the following:

- Recruiting, hiring and orienting processes that result in staff and administrators who possess the required qualification, skills and values (3.C.6)

Aligned

The College reviews vacant position descriptions in conjunction to ensure that the job description accurately reflects the position responsibilities, that the necessary skills and education are identified, and that the essential functions and reporting relationships needed to perform the job are identified and listed on the job description. The processes address key goals and strategies through JD reviews. Coordination and communication among units is emphasized through HR staff. The College has an inclusive defined hiring and onboarding process.

- Developing and meeting academic credentialing standards for faculty, including those in dual credit, contractual and consortia programs (3.C.1, 3.C.2)

Systematic

The college revised its policies to better ensure that faculty credentials are reviewed and updated and remain in compliance with regional, national and state accrediting bodies. However, the process to meet academic credentialing standards is new in 2017. The description for faculty seems to be understood, repeatable and documented although the response would be stronger if it also included a description of dual credit, contractual and consortia programs.

- Ensuring the institution has sufficient numbers of faculty to carry out both classroom and non-classroom programs and activities (3.C.1)

Systematic

The College maintains all faculty ratios required by Program accrediting bodies, including requirements for number of full-time faculty for each program. In the budgeting process, the deans and CAO determine the need for full-time faculty in the various disciplines. Factors considered include enrollment trends, utilization of services, staffing patterns, availability/accessibility of adjunct faculty, unique features of the program area that requires a faculty replacement, and upcoming open positions. NWACC would benefit from a more explicit description of determining periodical review of processes to determine efficacy.

- Ensuring the acquisition of sufficient numbers of staff to provide student support services

Systematic

The College receives oversight by the State of Arkansas and has an annual Appropriations Bill that details position classification, salary and number of positions at the institution. Every other year the College may request new positions that have been identified as an area of need. In preparation of the Biennium requests, Human Resources asks Cabinet Member to identify divisional strategic goals. The response could be strengthened by including how it is periodically reviewed.

- Tracking outcomes/measures utilizing appropriate tools

Reacting

The college measures employee engagement every other year and conducts exit interviews focused on areas of improvements. It is unclear how these tools and interviews are used over time, or what they are capturing.

3R1 What are the results for determining if recruitment, hiring and orienting practices ensure effective provision for programs and services? The results presented should be for the processes identified in 3P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Reacting

The College narrative provided some information about percentage of sections taught by full-time faculty, but did not set the context of targets or benchmarks.

- Comparison of results with internal targets and external benchmarks

Reacting

The College did not provide a response.

- Interpretation of results and insights gained

Reacting

The College did not provide a response.

3I1 Based on 3R1, what process improvements have been implemented or will be implemented in the next one to three years?

The College has focused on three initiatives, training for hiring committees, onboarding of new employees, and supervisor training. The effectiveness of these measures may be more productive with internal targets analyses and external benchmarks identified as goals.

3.2: EVALUATION AND RECOGNITION

Evaluation and Recognition focuses on the assessment and recognition of faculty, staff and administrators' contributions to the institution. The institution should provide evidence for Core Component 3.C. within this section.

3P2 Describe the processes that assess and recognize faculty, staff and administrators' contributions to the institution. This includes, but is not limited to, descriptions of key processes for the following:

- Designing performance evaluation systems for all employees

Systematic

For classified employees, the evaluation process is based on state-mandated policies. For non-classified employees, the process is currently under development. For faculty, a new process designed by the faculty and has not yet been evaluated or fully implemented. Academic Deans and the President receive a 360 degree evaluation.

- Soliciting input from and communicating expectations to faculty, staff and administrators

Reacting

Input was solicited from employees in 2016 via a survey entitled "Survey on Transparency and Openness." The portfolio does not document the routine processes to solicit input from employees or to communicate expectations to employees.

- Aligning the evaluation system with institutional objectives for both instructional and non-instructional programs and service.

Systematic

Employee goals are aligned to the Strategic Plan of the College by directly promoting one or more of the institution's End Statements, although it is unclear from the narrative what these are. A better description of processes and documentation could help move the institution to an aligned practice.

- Utilizing established institutional policies and procedures to regularly evaluate all faculty, staff and administrators (3.C.3)

Systematic

Employees have annual performance evaluations in March each year. In the summer employees meet with supervisors to set annual objectives for the upcoming year. These objectives should line up with the objectives outlined in the strategic planning updated provided at the fall forum each August. NWACC would benefit from describing the procedures that form the process of what employees engage in to prepare for these two meetings as well as how evaluations differ across different employee categories.

- Establishing employee recognition, compensation and benefit systems to promote retention and high performance

Systematic

An employee recognition luncheon is held annually, with recognition of service. The College also provides performance management training through Leadership NWACC.

The college has started including a total compensation package in the annual employee memorandum that shows not only the employees' salary, but the monetary value of the total compensation contributed by the college in support of the employees' benefit package. More explicit information on how employees will be recognized and compensated could help the institution mature to the next level.

- Promoting employee satisfaction and engagement

Reacting

The College participates with the Ruffalo-Noel Levitz Employee Satisfaction Survey. It is unclear how the survey supports employee satisfaction and engagement, rather than serving as a metric.

- Tracking outcomes/measures utilizing appropriate tools

The response did not match the category the College was responding to. One option for response here would include the Ruffalo-Noel Levitz Employee Satisfaction Survey.

3R2 What are the results for determining if evaluation processes assess employees' contributions to the institution? The results presented should be for the processes identified in 3P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Reacting

No response was provided.

- Comparison of results with internal targets and external benchmarks

Reacting

No response was provided.

- Interpretation of results and insights gained

Reacting

No response was provided.

3I2 Based on 3R2, what process improvements have been implemented or will be implemented in the next one to three years?

The College implemented People Admin software as an online application tracking system for screening employee qualifications. The HR Department collaborated with Professional Development design required training for all search committee chairs; and to streamline the recruiting process. Additionally, the College launched the Bi-ennial Ruffalo-Noel Levitz Satisfaction Survey.

There appears to be many processes that have either been newly implemented or have been revised since the last portfolio. The narrative would have been better supported with clearer information concerning survey mechanism, as well as internal targets and external benchmarks set for the survey instruments. No real data was shared and the College provided no insight.

3.3: DEVELOPMENT

Development focuses on processes for continually training, educating and supporting employees to remain current in their methods and to contribute fully and effectively throughout their careers at the institution. The institution should provide evidence for Core Components 3.C. and 5.A. in this section.

3P3 Describe the processes for training, educating and supporting the professional development of employees. This includes, but is not limited to, descriptions of key processes for the following:

- Providing and supporting regular professional development for all employees (3.C.4, 5.A.4)

Systematic

The College maintains mandated federal and state employee education training such as Title IX, FERPA, HIPPA and Concealed Carry on Campus. The response also provides a list of other training and professional development opportunities, although it is unclear the level of participation or the processes that determined the relevancy of the offerings.

- Ensuring that instructors are current in instructional content in their disciplines and pedagogical processes (3.C.4)

Systematic

Faculty have access to the Teaching and Learning Center. The Center offers an event, Celebrate Learning, prior to the beginning of the semester and it routinely provides forums for faculty to share best practices from national or regional

Conferences with colleagues. LMS training is also available. Additionally, Faculty professional development grants can be applied for in each academic division. The College would benefit from a description of its systematic process to ensure instructors are maintaining currency in their discipline.

- Supporting student support staff members to increase their skills and knowledge in their areas of expertise (e.g. advising, financial aid, etc.) (3.C.6)

Systematic

Staff members in the College's Student Services Division are provided opportunities for training and attending conferences during the year. It was unclear from the response how much support is provided or the level of participation, or by what processes funds were distributed.

- Aligning employee professional development activities with institutional objectives

Reacting

As a teaching institution, the Teaching and Learning Center is clearly supports the College's learning centered mission, however the response from the College does not provide evidence of how other professional development activities are determined or aligned with College priorities.

- Tracking outcomes/measures utilizing appropriate tools

Reacting

No response was provided.

3R3 What are the results for determining if employees are assisted and supported in their professional development? The results presented should be for the processes identified in 3P3. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Systematic

The College provides summary results for the Leadership Programs. The College notes that assessments for professional development activities show an increase in participants' knowledge of other departments and an increased opportunity for interdepartmental communication, although this data was not provided. Retention and participation numbers does little to demonstrate success of the program.

- Comparison of results with internal targets and external benchmarks

Reacting

No significant comparison of results was provided.

- Interpretation of results and insights gained

Reacting

Although limited insight was provided, it was out of context as the data was not provided in the response.

3I3 Based on 3R3, what process improvements have been implemented or will be implemented in the next one to three years?

The College has launched several leadership programs but as noted by the College can improve its professional and leadership development activities by developing better metrics for leadership development activities and retention and better communicating leadership advancement and development opportunities.

CATEGORY SUMMARY

The College is predominantly at the systematic level of maturity, although the narrative throughout lacked descriptions of key processes. From a results standpoint the College is reacting with a lack of internal targets and external benchmarks.

CATEGORY STRATEGIC ISSUES

The College would benefit from better articulation of actual processes.
The College lacks overall targets and benchmarks across institutional processes.
The College did not respond to many of the prompts.

Input was solicited from employees in 2016 via a survey entitled "Survey on Transparency and Openness". The portfolio does not document the routine processes to solicit input from employees and to communicate expectations to employees

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

IV - Planning and Leading

Focuses on how the institution achieves its mission and lives its vision through direction setting, goal development, strategic actions, threat mitigation, and capitalizing on opportunities.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Mission and Vision, Strategic Planning, Leadership and Integrity.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

CATEGORY 4: PLANNING AND LEADING

Category 4 focuses on how the institution achieves its mission and vision through direction setting, goal development, strategic actions, threat mitigation and capitalizing on opportunities.

4.1: MISSION AND VISION

Mission and Vision focuses on how the institution develops, communicates and reviews its mission and vision. The institution should provide evidence for Core Components 1.A., 1.B. and 1.D. within this section.

4P1 Describe the processes for developing, communicating and reviewing the institution's mission, vision and values, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Developing, deploying, and reviewing the institution's mission, vision and values (1.A.1, 1.D.2, 1.D.3)

Aligned

The Arkansas Board of Education defines the role and scope for all universities and colleges in the state of Arkansas. In 2016-2017, NWACC underwent a review and a revision of the vision and mission. The process was explicit, is repeatable and implies that it will be periodically reviewed.

- Ensuring that institutional actions reflect a commitment to its values

Systematic

The College's Value Statements are reviewed every five years. The formal process for reviewing institutional compliance with mission, vision, and values rests with the Board of Trustees. The mission, vision, and values are linked with the Arkansas Higher Education Coordinating Board.

- Communicating the mission, vision and values (1.B.1, 1.B.2, 1.B.3)

Aligned

The College's mission, vision and values are published on the website, and in various public documents and on standing banners displayed throughout campus buildings. Coordination and communication among units is emphasized.

- Ensuring that academic programs and services are consistent with the institution's mission (1.A.2)

Systematic

The state of Arkansas defines the role and scope of each institution as governed by the Arkansas Higher Education Coordinating Board. The institution's mission drives the end statements created during the strategic planning process. Administrators consider how new programs are consistent with the institution's mission. NWACC would benefit from a process description of how this is accomplished systematically and reviewed periodically throughout the institution.

- Allocating resources to advance the institution's mission and vision, while upholding the institution's values (1.D.1, 1.A.3)

Aligned

The allocation of resources follows a formalized 5-year strategic planning process, publicly outlined on the college web page. This process guides the development of strategic objectives, which, inform the allocation of resources at the college.

- Tracking outcomes/measures utilizing appropriate tools (e.g. brand studies, focus groups, community forums/studies and employee satisfaction surveys)

Reacting

Examples of surveys offered are provided but the response is limited to advisory boards and alumni committees and does not provide a description of the process or what data and information is collected and used to track outcomes.

4R1 What are the results for developing, communicating and reviewing the institution's mission, vision and values? The results presented should be for the processes identified in 4P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Systematic

The College provided some comparison and summary results of Employee Satisfaction as measured by the Ruffalo-Noel Levitz survey. Overall, the new mission and values statements were better understood. The College did not indicate how existing data is used.

- Comparison of results with internal targets and external benchmarks

Reacting

No response provided.

- Interpretation of results and insights gained

Systematic

Data from the Noel Levitz survey was collected and used to influence future actions in the 5- year planning cycle. NWACC is focusing on providing more employee input, though the process and how the results are used is not provided.

4I1 Based on 4R1, what process improvements have been implemented or will be implemented in the next one to three years?

The College is focused on its Value statements with an emphasis on better communication, integration and alignment. Additionally, the College has completed environmental scans irregularly and is working to develop a more efficient and ongoing process.

As noted with other areas of the portfolio the College needs to set internal targets and external benchmarks for many of its processes to better measure efficiency and effectiveness.

4.2: STRATEGIC PLANNING

Strategic Planning focuses on how the institution achieves its mission and vision. The institution should provide evidence for Core Components 5.B. and 5.C. in this section.

4P2 Describe the processes for communicating, planning, implementing and reviewing the institution's plans and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Engaging internal and external stakeholders in strategic planning (5.C.3)

Systematic

During the Strategic Planning process, numerous opportunities were provided for both internal and external constituencies to participate. These opportunities included the review and development of the College's Mission Statement. There is little discussion of how the process is reviewed for improvements.

- Aligning operations with the institution's mission, vision and values (5.C.2)

Systematic

The College works to align with mission, vision and values through the seven strategic goals. Annual goals and objectives are reflected in the operating budgets. Plans are developed in context with strategic goals and funded through the annual budget process. The narrative does not describe the process by which this happens beyond listing examples.

- Aligning efforts across departments, divisions and colleges for optimum effectiveness and efficiency (5.B.3)

Aligned

NWACC has a strong process for aligning efforts across departments and divisions for optimum effectiveness and efficiencies. The academic division makes use of two governance bodies, the Deans' Council and Faculty Senate. While NWACC lists a variety of committees charged with aligning processes The process is explicit, repeatable and reviewed for improvements.

- Capitalizing on opportunities and institutional strengths and countering the impact of institutional weaknesses and potential threats (5.C.4, 5.C.5)

Aligned

The College uses multiple inputs for planning. These include a Board planning retreat that includes a SWOT analysis. Additionally, the Expanded Cabinet visits with the local economic development council to discuss employment trends and job needs in the community. Trends are incorporated into the development of the College's annual budgeting cycle. There are multiple inputs and constituencies that are included in mitigating the impacts of institutional weaknesses and potential threats.

- Creating and implementing strategies and action plans that maximize current resources and meet future needs (5.C.1, 5.C.4)

Systematic

The College develops strategic objectives with input from senior leadership and their respective teams. The objectives are aligned with the seven Strategic Goals. Strategic objectives include both internal and external factors and are a response to current and future needs.While there were several examples provided the narrative did not explain the process in depth.

- Tracking outcomes/measures utilizing appropriate tools (e.g. achievement of goals and/or satisfaction with process)

Aligned

The institution has developed tracking measures through 16 KPI's that are explicit, repeatable and periodically evaluated by the strategic planning team. Goals and objectives are available electronically via a dashboard within the college's portal.

4R2 What are the results for communicating, planning, implementing and reviewing the institution's operational plans? The results presented should be for the processes identified in 4P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Reacting

Employee satisfaction according the Noel Levitz tool has shown improvement. This data is the same as the data provided in a previous section without providing a new context for examining the results.

- Comparison of results with internal targets and external benchmarks

Reacting

No response provided.

- Interpretation of results and insights gained

Reacting

The response did not align with question.

4I2 Based on 4R2, what process improvements have been implemented or will be implemented in the next one to three years?

NWACC has identified several areas for improvement centered on the planning and strategic planning processes of the college and including formalizing the planning cycle, establishing measures and goals, and realigning Key Performance Indicators with new state performance funding models. With all of these planned improvements, determining internal targets and external benchmarks would allow the College to mature in this category.

4.3: LEADERSHIP

Leadership focuses on governance and leadership of the institution. The institution should provide evidence for Core Components 2.C. and 5.B. in this section.

4P3 Describe the processes for ensuring sound and effective leadership of the institution, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Establishing appropriate relationship between the institution and its governing board to support leadership and governance (2.C.4)

Aligned

The College is overseen by a Board of Trustees that functions as a policy governance board. The by-laws and policies of the Board provide for a clear separation of duties between the board and president. The process for establishing appropriate relationships between the institution and its governing board is explicit, repeatable and documented through policy. To advance in maturity, NWACC might consider how these policies are periodically reviewed for improvement opportunities.

- Establishing oversight responsibilities and policies of the governing board (2.C.3, 5.B.1, 5.B.2)

Aligned

The Board oversees the President's performance through the college Ends and Executive Limitations. The Ends and Executive Limitations are reviewed publicly. The Board approves the college budget and results of state financial audits are made to the board. The process for establishing oversight responsibilities is explicit and well documented in policy and manuals. Various stakeholder roles are generally understood and relate to institutional goals and strategies.

- Maintaining board oversight, while delegating management responsibilities to administrators and academic matters to faculty (2.C.4)

Aligned

The Board is responsible for the evaluation and hiring of the College President. Academic matters of the college, such as curriculum approval, faculty evaluation, and faculty pay are governed by set operating policy and procedures which are approved through the College's set infrastructure. The board does approve new programs, as required by the Arkansas Department of Higher Education. The process for delegating management responsibilities is explicit, repeatable and generally understood.

- Ensuring open communication between and among all colleges, divisions and departments

Aligned

Monthly board of trustee meetings are open to the public with minutes made available on the college website. Internal communications are achieved through a variety of mechanisms including: published on the internal portal, open meetings, a "Daily Announcements" web page with events, forums, and recognition "Notes from the President" and all College forums.

- Collaborating across all units to ensure the maintenance of high academic standards (5.B.3)

Aligned

The state of Arkansas requires all state programs that are not nationally accredited through a discipline-specific accrediting body to undergo a state program review once every seven years. All state program reviews completed since the last accreditation cycle have had successful outcomes. Additionally, 23 programs have received national accreditation.

- Providing effective leadership to all institutional stakeholders (2.C.1, 2.C.2)

Reacting

Institutional stakeholders are defined in the Ends Statements as the Learner Community, the Business Community, the Owner (Taxpayer) Community, the Pre-Kindergarten through 16 Community, and the College Community. The response addresses how the board is charged with addressing all stakeholders, however does not address how the College addresses leadership for stakeholders.

- Developing leaders at all levels within the institution

Systematic

Leadership development at the Cabinet level is embedded in evaluation processes and is based on key

areas of improvement. Additionally, the college has several formal leadership development opportunities for employees serving in midlevel positions. The process for development of leadership within faculty ranks appears to be informal and could benefit from a more official opportunity for faculty. It is unclear if adjunct faculty have the same opportunities as full-time faculty.

- Ensuring the institution's ability to act in accordance with its mission and vision (2.C.3)

Aligned

The College operates as an independent entity, under the auspices of the Arkansas Department of Higher Education and the Arkansas Higher Education Coordinating Board. The college and its governing Board of Trustees exist to serve the constituencies defined by the college mission, vision, and college ends-statements.

- Tracking outcomes/measures utilizing appropriate tools

Systematic

The College uses several measures for evaluating leadership and communication issues such as the Ruffalo-Noel Levitz survey for students and employees, as well as survey data from the leadership programs. There are some ad-hoc measures that have been collected sporadically, that may benefit for a more formalized and planned collection and process.

4R3 What are the results for ensuring long-term effective leadership of the institution? The results presented should be for the processes identified in 4P3. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Systematic

The narrative provided a new set of questions captured as part of the Employee satisfaction survey with results from both the 2014 and 2016 administration. Faculty and staff achievements are presented by the President to the board on an annual basis. No data was provided concerning the leadership development programs. The college would benefit expanding data collection opportunities beyond Ruffalo-Noel Levitz.

- Comparison of results with internal targets and external benchmarks

Reacting

No response provided.

- Interpretation of results and insights gained

Systematic

The College undertook some improvement initiatives based on the results of the 2014 survey in the areas of sense of purpose and communication. There was marginal improvement in these areas in the

2016 results. The College could benefit from a review of the strategies to determine what, if any, were successful. While some interpretation of results was shared, limited insights were identified.

4I3 Based on 4R3, what process improvements have been implemented or will be implemented in the next one to three years?

The college has found several opportunities to improve data collection such as choosing metrics for its leadership development programs. As with its plans for the current leadership programs, new training and professional development training would benefit from success metrics.

4.4: INTEGRITY

Integrity focuses on how the institution ensures legal and ethical behavior and fulfills its societal responsibilities. The institution should provide evidence for Core Components 2.A. and 2.B. in this section.

4P4 Describe the processes for developing and communicating legal and ethical standards and monitoring behavior to ensure standards are met. In addition, identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Developing and communicating standards

Systematic

The College has ethical standards incorporated within its policy. College employees are expected to follow the Employee Code of Conduct policy which establishes the expectation for employees to complete all mandatory compliance training and follow all state and federal laws and guidelines for higher education. The response from the College does not address how this information is communicated with the employees.

- Training employees and modeling for ethical and legal behavior across all levels of the institution

Aligned

The college uses a training module called We Comply. The training module is mandatory. The college also makes and effort to look for character traits in hiring and evaluating candidates. A new package will show employees are aware of the new and changed policies. The process for training employees for ethical and legal behavior is explicit, repeatable and seems to be periodically evaluated. There appears to be coordination and communication among units and stakeholders.

- Operating financial, academic, personnel and auxiliary functions with integrity, including following fair and ethical policies and adhering to processes for the governing board, administration, faculty and staff (2.A.)

Systematic

Key control activities are assessed and monitored by the College. Measures include segregation of duties, documentation of transactions, appropriate authorizations, securing and restricting access to resources based on roles, and reconciliation and review to verify accuracy, completeness,

appropriateness and compliance. The College uses external auditors and Financial Aid undergoes a financial audit on a 3-year cycle.

- Making information about programs, requirements, faculty and staff, costs to students, control, and accreditation relationships readily and clearly available to all constituents (2.B.)

Aligned

The College makes information available on the website. Additionally, as required by federal policy, the college maintains a federal consumer information and consumer information page on the website. The College could enhance its maturity in this area by describing the process in place to regularly update information on the website.

4R4 What are the results for ensuring institutional integrity? The results presented should be for the processes identified in 4P4. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Systematic

The College provided data on the completion rates of compliance training by academic year. Additional data points such as data concerning effectiveness would be a next step in maturity for the institution.

- Comparison of results with internal targets and external benchmarks

Reacting

No response provided.

- Interpretation of results and insights gained

Reacting

No response provided.

4I4 Based on 4R4, what process improvements have been implemented or will be implemented in the next one to three years?

The College has focused on rolling out a new mandatory training module, "We Comply" and will be exploring the use of an ethical climate survey. A mandatory Ethics and Compliance training module has been added and will be implemented in September 2018. The employee code of conduct policy is scheduled for revision in Fall 2018.

CATEGORY SUMMARY

The College has many processes in place that are systematic or aligned in their maturity level. The College could benefit from an evaluation component to measure effectiveness, perhaps broadening their use of external instruments.

CATEGORY STRATEGIC ISSUES

Evaluation and metrics for determining effectiveness of policies and training.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

V - Knowledge Management and Resource Stewardship

Addresses management of the fiscal, physical, technological, and information infrastructures designed to provide an environment in which learning can thrive.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Knowledge Management, Resource Management and Operational Effectiveness.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

CATEGORY 5: KNOWLEDGE MANAGEMENT AND RESOURCE STEWARDSHIP

Category 5 addresses management of the fiscal, physical, technological and information infrastructures designed to provide an environment in which learning can thrive.

5.1: KNOWLEDGE MANAGEMENT

Knowledge Management focuses on how data, information and performance results are used in decision-making processes at all levels and in all parts of the institution.

5P1 Describe the processes for knowledge management, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Selecting, organizing, analyzing and sharing data and performance information to support planning, process improvement and decision making

Systematic

NWACC data request process is streamlined, and the requests are tracked for planning purposes. The Office of Institutional Research (OIR), in partnership with the campus community, manages data in alignment with making informed decisions, facilitating teaching and learning and measuring effectiveness. The data request has both an online and print version available to all employees. Requests are tracked in a database. Priority is given to student needs, followed by state/federal reporting and administrative needs. To move forward with aligned processes the College may wish to

consider periodically evaluating their CQI and determining if they are in fact closing the loop.

- Determining data, information and performance results that units and departments need to plan and manage effectively.

Aligned

The College Department and divisions request specific reports, data or dashboards for functions within the organization for strategic planning and day-to-day management. Additionally, ITS and Institutional Research maintain Key Performance Indicators as well as an annual institutional data Fact Book which is made available across internal and external constituencies.

- Making data, information and performance results readily and reliably available to the units and departments that depend upon this information for operational effectiveness, planning and improvements

Aligned

The College uses Real-time reports from Banner for operational effectiveness, planning and improvements are available on the MyNWACC Connection portal. Examples of available reports include student enrollment and registration, budget, admissions, graduate and other reports that are specifically

operational effectiveness, planning, and improvements Aligned 2 Systematic 2 Reacting1 requested by department, divisions and leadership. Data and reports for benchmarking purposes are available through the IR web site. The College participates in the National Community College Benchmarking Project (NCCBP) whose reports are made available to employees annually.

- Ensuring the timeliness, accuracy, reliability and security of the institution's knowledge management system(s) and related processes

Aligned

At NWACC the Information Technology department is responsible for the physical storage and the accessibility of the majority of institutional data. Most system data is stored on servers in a secure Network Operation Center. Data is backed-up nightly and backup tapes are stored in an offsite location. Access to the NOC is limited to network services staff and equipped with UPS/Power backup which is tested weekly.

- Tracking outcomes/measures utilizing appropriate tools (including software platforms and/or contracted services)

Aligned

In NWACC most data on students and employee data is housed in the Banner Student Management system. Standard and customized reports exist to extract Banner data into reports for tracking outcomes and measures for department and division use. The College also uses ApplicationXtender

to scan, store, retrieve, and preserve documents

5R1 What are the results for determining how data, information and performance results are used in decision-making processes at all levels and in all parts of the institution? The results presented should be for the processes identified in 5P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Reacting

Although, the College adopted an Argos Institutional Research Dashboard containing state performance funding data, accreditation, and KPIs (ends, goals, etc.) and is accessible thru the NWACC portal to all faculty and staff. However, the response did not provide any summary data.

- Comparison of results with internal targets and external benchmarks

Reacting

The college participates in the NCCBP and states that the comparison reports are provided to necessary stakeholders, however does not provide any comparison results in the portfolio. Additionally, the portfolio says the knowledge management is comprehensive and strategic but does not explain how

- Interpretation of results and insights gained

Reacting

The College did not provide any interpretation of results or insights gained.

5I1 Based on 5R1, what process improvements have been implemented or will be implemented in the next one to three years?

The College Cabinet works to improve all processes including planning. The tools for data management are standard and relevant. What is not discussed is how the tools are used, the process for data collection and reporting. Quality Council members have been tasked with refining current processes and developing more measurable annual objectives in support of the college's strategic goals.

5.2: RESOURCE MANAGEMENT

Resource Management focuses on how the resource base of an institution supports and improves its educational programs and operations. The institution should provide evidence for Core Component 5.A. in this section.

5P2 Describe the processes for managing resources, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Maintaining fiscal, physical and technological infrastructures sufficient to support operations (5.A.1)

Systematic

The NWACC annual budget process begins each October and ensure fiscal responsibility as well as fiscal alignment with the strategic plan. The College invests competent staff members who work closely with colleagues to streamline budgeting and reporting systems. IT monitors information systems up time, resource utilization, resource capacity, security, data redundancy and data integrity. NWACC has invested cloud-based solutions, including the campus website, portal and the Canvas Learning Management System. Data systems are governed by the Data Information System Subcommittee. Narrative on the Physical infrastructure maintenance is not provided.

- Setting goals aligned with the institutional mission, resources, opportunities and emerging needs (5.A.3)

Systematic

At NWACC in 2019 the budget development process the College implemented supporting budget request with the strategic plan. Requisition are entered directly into the system to better manage budgets and projects. Processes fund the strategic goals rather than funding for unplanned and unapproved requests that do not contribute to students and the College's success

- Allocating and assigning resources to achieve organizational goals, while ensuring that educational purposes are not adversely affected (5.A.2)

Reacting

The response by the institution did not answer the prompt. Additional financial and budgetary reports have been created and the college participates in national bechmarks metrics but the portfolio does not provide any data.

- Tracking outcomes/measures utilizing appropriate tools

The NWACC IT departments uses request forms with project scoring rubrics. How are other project requests prioritized? Website usage is monitored with Google analytics. Data collected is used to hone messaging and make improvements to the College's website with an emphasis on serving the needs of the students. It unclear from the response what other tools are used to monitor other data requests.

5R2 What are the results for resource management? The results presented should be for the processes identified in 5P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Systematic

The NWACC portfolio reported "clean Audits" reports reflect the college accounting and financial processes meet standards. The annual Legislative audits and international financial rating agencies reports reflect positive opinions on the financial status and accounting practices of NWACC. NWACC states that "OIR also provides a comprehensive list of measures collected through the Annual Institutional Research Calendar" but does not provide those summary results or any others.

- Comparison of results with internal targets and external benchmarks

Reacting

Nothing was provided

- Interpretation results and insights gained

5I2 Based on 5R2, what process improvements have been implemented or will be implemented in the next one to three years?

The college is in the process of building a new data sharing site. The new site will focus on student needs and adjustments. The revamped college budgeting processes and its reporting tools reflect the campus strategic priorities. Cost containment is reflected at the department level in reporting tools.

The Argos system has enabled the college to increase the reporting needed to departments. This tool also allows for quicker prototyping and reporting finished data. Improvements in the narrative appear to be historical in nature with the exception of the revisions to the website with stronger analytics and the potential implementation of Ad Astra for scheduling, degree mapping and room utilization.

OIR now creates and runs all college surveys through Survey Monkey, which enables the college to maintain quality control and avoid redundancies The narrative provides a few examples of processes that have been improved with the implementation of additional Argos reporting tools. However, overall this section lacks data or summary analysis.

5.3: OPERATIONAL EFFECTIVENESS

Operational Effectiveness focuses on how an institution ensures effective management of its operations in the present and plans for continuity of operations into the future. The institution should provide evidence for Core Component 5.A. in this section.

5P3 Describe the processes for operational effectiveness, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Building budgets to accomplish institutional goals

Reacting

Budget managers have an opportunity to present new initiatives. Cost containment is practiced as a matter of good stewardship and divisions are encouraged to reallocate existing funds. Although NWACC speaks about the budget process in this section but does not provide the actual process.

- Monitoring financial position and adjusting budgets (5.A.5)

Systematic

NWACC has a process for monitoring financial budgets that begins with the budget unit and expands to the Controller and VP of Finance. Budgets may be adjusted during the budget year based on significant variances in anticipated enrollment or revenue projections. College leadership monitors the actual to budgeted expenditures monthly. While NWACC speaks to the leaders who monitor budgets, the college does not address the actual processes for adjusting budgets.

- Maintaining a technological infrastructure that is reliable, secure and user-friendly

Systematic

The NWACC IT department employs strategies to promote a reliable, secure and user-friendly technology infrastructure. NWACC has invested in many cloud based solutions, including the campus website, portal and a recent shift to the Canvas Learning Management System. Data systems are governed by the Data Information System Subcommittee. NWACC states it has a process for maintaining a safe technological infrastructure and reliable technology but does not describe how it routinely and systematically completes this process.

- Maintaining a physical infrastructure that is reliable, secure and user-friendly

Reacting

The process described is for Technology initiatives and strategies rather than how the campus maintains a reliable and secure physical infrastructure**.**

- Managing risks to ensure operational stability, including emergency preparedness

Aligned

Enhancements to the NWACC technical disaster recovery plan have enabled the College to align to state information systems guidelines and has resulted in zero audit findings in this area. The college has also invested in data recovery insurance. The college response does not address the question of emergency preparedness for the campus facilities

- Tracking outcomes/measures utilizing appropriate tools

NWACC maintains Payment Card Industry Data Security Standards certification. Additionally, cyber liability insurance has become a cornerstone component of risk management associated with protection from cyber-crime and data breaches, limiting financial exposure. This includes doing quarterly internal and external vulnerability scanning. While technology is address here, the needs and tracking of emergency preparedness are not covered.

5R3 What are the results for ensuring effective management of operations on an ongoing basis and for the future? The results presented should be for the processes identified in 5P3. All data presented

should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)

Reacting

No actual summary data was provided. Narrative did not provide enough information The results Comparison of results with internal targets and external benchmarks.

Interpretation of results and insights gained

Reacting

None were provided

5I3 Based on 5R3, what process improvements have been implemented or will be implemented in the next one to three years?

Budget processes meet higher education standards. The College IT technologies and process meet the standards of the industry. The College references including more constituent groups in the budget process and the full implementation of the IT committee structure over the next 18 months. The comments refer to improvements in the IT committee structure and in the budget process although very little detail is provided.

Additionally, the College did not respond to the physical plant, nor emergency management issues.

As has been expressed throughout this portfolio the institution would benefit from establishing targets and benchmarks that would allow the College to speak to trends, insights and comparisons in a meaningful way

CATEGORY SUMMARY

While the College has some processes in place that are systematic or even aligned, it continues to struggle with a lack of internal targets and external benchmarks. Without these the portfolio has suffered from categories that are not being addressed

This section of the portfolio is poorly complete, this does not suggest that processes are not in place, but rather that NWACC does not successfully describe its processes, results or improvements related to knowledge management and resource stewardship in the portfolio

CATEGORY STRATEGIC ISSUES

The College as reflected in the portfolio struggles from a lack of internal targets and external benchmarks, measurable results, and lack of process descriptions.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

VI - Quality Overview

Focuses on the Continuous Quality Improvement culture and infrastructure of the institution. This category gives the institution a chance to reflect on all its quality improvement initiatives, how they are integrated, and how they contribute to improvement of the institution.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Quality Improvement Initiatives and Culture of Quality.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

CATEGORY 6: QUALITY OVERVIEW

Category 6 focuses on the Continuous Quality Improvement culture and infrastructure of the institution. This category gives the institution a chance to reflect on all its quality improvement initiatives, how they are integrated and how they contribute to improvement of the institution.

6.1: QUALITY IMPROVEMENT INITIATIVES

Quality Improvement Initiatives focuses on the Continuous Quality Improvement (CQI) initiatives the institution is engaged in and how they work together within the institution.

6P1 Describe the processes for determining and integrating CQI initiatives, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Selecting, deploying and evaluating quality improvement initiatives

Systematic

The College's response notes the primary responsibility for alignment of institutional goals belongs to the Quality Council and the Office of Institutional Effectiveness. The college's Ends statements link all college quality improvement initiatives to strategic goals and priorities. The College noted that a new position (Director of Accreditation and Assessment) began in 2017 to help lead better aligned efforts campus wide. Yet, there is no discussion of how improvement initiatives are selected,

deployed and evaluated.

- Aligning the Systems Portfolio, Action Projects, Comprehensive Quality Review and Strategy Forums

Systematic The College narrative provides a review of planning processes that includes use of the College "End statements", a feedback loop with constituents, qualitative and quantitative data, External data from NHEBI and the Arkansas state master plan for higher education. However, the response did not indicate how this process is integrated into designing action projects, or strategic forums, which seem to exist as set apart from planning processes.

6R1 What are the results for continuous quality improvement initiatives? The results presented should be for the processes identified in 6P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared.

Systematic: The Action Project - "Each Voice Matters" - resulted in process tracks tailored around the policy needs for "General Administrative Policy Development", "Academic Policy Development", and "Compliance/Regulatory Policy Development". The Technology Assisted Action Project resulted in many recommendations that the college is considering implementing. The inclusion of results or data from either of these projects could have helped improve the response and indicated a higher level of maturity.

6I1 Based on 6R1, what quality improvement initiatives have been implemented or will be implemented in the next one to three years?

The College is currently focused on improving student success in developmental math. This work has included an overhaul of curriculum, and a Technology Phase that will invite other divisions across the college to spend a year devoted to determining which technology would meet the desired requirements of the project.

Additionally, the Quality Council updated the committee's charter to better align with needs of the college and are examining how to measure the effectiveness of the committee in a more thorough systematic way. An improvement implemented was having work sessions every week pertaining to the system portfolio or assessment needs. Noel-Levitz surveys were implemented replacing the CCSEE survey. Additionally the College reevaluated the Mission/Value statements to align with strategic goals through a college wide process.

6.2: CULTURE OF QUALITY

Culture of Quality focuses on how the institution integrates continuous quality improvement into its culture. The institution should provide evidence for Core Component 5.D. in this section.

6P2 Describe how a culture of quality is ensured within the institution. This includes, but is not limited to, descriptions of key processes for the following:

- Developing an infrastructure and providing resources to support a culture of quality

Systematic

The College frames its CQI processes within its Strategic Planning housed in the Office of

Institutional Effectiveness. OIE uses strategic planning documents that include revenue, expenditures, programming, facilities and quality for various departments across the institution. The portfolio response describes the strategic plan and OIE involvement, but does not explicitly discuss the process to provide resources that support a culture of quality.

- Ensuring continuous quality improvement is making an evident and widely understood impact on institutional culture and operations (5.D.1)

Systematic

The College has recently adopted the use of 16 Core Indicators of Effectiveness for Community Colleges. The office of institutional research is currently collecting data to create baseline data for division and department level to develop a series goals and actions that define and identify processes within the organization that drive achievement of the Strategic Plan. Narrative did not address the process part of the question, and full implementation of these plans could help the campus achieve greater maturity.

- Ensuring the institution learns from its experiences with CQI initiatives (5.D.2)

Systematic

NWACC is committed to continuously improving its performance while learning from experiences in implementing strategic priorities and goals. The college focuses on making data-informed decisions and evaluating results and feedback to improve its programs and services. As with previous responses, the College would benefit from understanding and describing processes by which it learns from CQI initiatives.

- Reviewing, reaffirming and understanding the role and vitality of the AQIP Pathway within the institution

Systematic

The College seeks to reaffirm its commitment to the AQIP pathway. Activities to achieve this goal include

Workshops once a week during the Fall and Spring semesters to address questions or processes relating to accreditation or assessment. Additionally, AQIP categories are linked in the strategic goal setting forms

6R2 What are the results for continuous quality improvement to evidence a culture of quality? The results presented should be for the processes identified in 6P2. All data presented should include the population studied, the response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared.

Reacting The response highlights specialized accrediting agencies but does not explicitly demonstrate results that serve as evidence for a culture of quality. These most likely exist and the College would benefit from a more detailed description of results in this section of the portfolio.

6I2 Based on 6R2, what process improvements to the quality culture have been implemented or will be implemented in the next one to three year?

The response by the College provided information on policies, vision statements and the revisions to the mission statement but did not adequately address the prompt, providing a narrative that reflect back rather than forward one to three years.

CATEGORY SUMMARY

While the institution has had executive turnover and has established new processes such as the Quality Council and the Director of Accreditation and Assessment, it would also benefit the institution to identify internal targets and external benchmarks. Doing so would enable the College to determine when efforts were "successful" and provide evidence that demonstrates a culture of quality. The NCCBP might also provide additional detail that the institution might find helpful in making its case.

CATEGORY STRATEGIC ISSUES

Identification of internal targets, external benchmarks and what instruments, surveys, data sets are most important for building a culture of quality.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

1 - Mission

The institution's mission is clear and articulated publicly; it guides the institution's operations.

1.A - Core Component 1.A

The institution's mission is broadly understood within the institution and guides its operations.

1. The mission statement is developed through a process suited to the nature and culture of the institution and is adopted by the governing board.
2. The institution's academic programs, student support services, and enrollment profile are consistent with its stated mission.
3. The institution's planning and budgeting priorities align with and support the mission. (This sub-component may be addressed by reference to the response to Criterion 5.C.1.)

Rating

Clear

Evidence

The state of Arkansas defines and approves the role and scope of educational institutions governed by the Arkansas Higher Education Coordinating Board.

NWACC offers occupational, transfer, professional and continuing education opportunities aligned to the needs of the community it services.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

1.B - Core Component 1.B

The mission is articulated publicly.

1. The institution clearly articulates its mission through one or more public documents, such as statements of purpose, vision, values, goals, plans, or institutional priorities.
2. The mission document or documents are current and explain the extent of the institution's emphasis on the various aspects of its mission, such as instruction, scholarship, research, application of research, creative works, clinical service, public service, economic development, and religious or cultural purpose.
3. The mission document or documents identify the nature, scope, and intended constituents of the higher education programs and services the institution provides.

Rating

Clear

Evidence

The mission and vision is articulated publicly through the College's website and in various public documents.

The mission, vision and values statements are periodically reviewed and adopted by the Board of Trustees.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

1.C - Core Component 1.C

The institution understands the relationship between its mission and the diversity of society.

1. The institution addresses its role in a multicultural society.
2. The institution's processes and activities reflect attention to human diversity as appropriate within its mission and for the constituencies it serves.

Rating

Adequate

Evidence

The institution addresses its role in a multicultural society. The institution's processes and activities reflect attention to human diversity as appropriate within its mission and for the constituencies it serves. The travel abroad program and co-curricular activities are mentioned but not well described in the context of mission alignment.

Although there is programming in place, the institution may wish to strengthen this section of the Criterion by providing evidence of evaluation and assessment of current programs to determine if they continue to meet the needs of the populations served.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

1.D - Core Component 1.D

The institution's mission demonstrates commitment to the public good.

1. Actions and decisions reflect an understanding that in its educational role the institution serves the public, not solely the institution, and thus entails a public obligation.
2. The institution's educational responsibilities take primacy over other purposes, such as generating financial returns for investors, contributing to a related or parent organization, or supporting external interests.
3. The institution engages with its identified external constituencies and communities of interest and responds to their needs as its mission and capacity allow.

Rating

Adequate

Evidence

The College's mission and vision reflect the institution's role in the community and its commitment to the public good with a focus on providing accessible, affordable, quality education. Strategic Planning processes included the surrounding community for input.

The evidence could be further strengthened by the College through a better understanding of how the institution's advisory boards contribute to the discussion of mission, vision, and institutional values, as well as determining community needs. It is unclear from the narrative how the work of the boards informs programs and fiscal priorities, although this is a stated desire in the narrative.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2 - Integrity: Ethical and Responsible Conduct

The institution acts with integrity; its conduct is ethical and responsible.

2.A - Core Component 2.A

The institution operates with integrity in its financial, academic, personnel, and auxiliary functions; it establishes and follows policies and processes for fair and ethical behavior on the part of its governing board, administration, faculty, and staff.

Rating

Clear

Evidence

Ethical standards are written into the college policy, including the responsibilities of the Board of Trustees and the President and the employees of the college.

Key control activities are assessed and monitored. They include the segregation of duties designed to reduce the opportunity for an employee to commit and conceal errors or perpetrate fraud.

An annual audit is performed on the financial statements to which no material weaknesses has been reported. In addition, there are multiple operational and certification audits performed in various departments within the College.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2.B - Core Component 2.B

The institution presents itself clearly and completely to its students and to the public with regard to its programs, requirements, faculty and staff, costs to students, control, and accreditation relationships.

Rating

Clear

Evidence

Information regarding programs, costs, faculty credentials and experience and accreditation are all made public on the college website.

Program information includes:

1)   program description

2)   information about the format and location the program is offered

3)   a list of program outcomes

4)   the degree plan

5)   information about tuition and any special fees that apply to the program

6)   career opportunities and employment data for our SMSA

7)   links to similar programs for comparison.

Specialized Accreditation information appears on the program web pages, with a link to the website for the accrediting body.

As required by Federal Financial Aid policy, the college maintains a cost of attendance webpage, federal consumer information, as well as consumer information for NWACC programs.

A description of the founding of the college and its status as an independent community college is on the website.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2.C - Core Component 2.C

The governing board of the institution is sufficiently autonomous to make decisions in the best interest of the institution and to assure its integrity.

1. The governing board's deliberations reflect priorities to preserve and enhance the institution.
2. The governing board reviews and considers the reasonable and relevant interests of the institution's internal and external constituencies during its decision-making deliberations.
3. The governing board preserves its independence from undue influence on the part of donors, elected officials, ownership interests or other external parties when such influence would not be in the best interest of the institution.
4. The governing board delegates day-to-day management of the institution to the administration and expects the faculty to oversee academic matters.

Rating

Clear

Evidence

The NorthWest Arkansas Community College District, which is an independent, separate, legal entity created for the operation of NorthWest Arkansas Community College as defined in Act 252 of the 777th General Assembly (1989) First Extraordinary Session.

Members of the Board of Trustees are elected according to zones within the Bentonville and Rogers school Districts.

The by-laws and policies of the Board provide for a clear separation of duties between the board and president.

Oversight responsibilities for the board are defined through its Board policies found in the Board Handbook.

The Board seek to perform their responsibilities in accordance with the highest standards of integrity, to avoid conflicts of interests, and to disclose those that occur.

Academic matters of the college, such as curriculum approval, faculty evaluation, and faculty pay are governed by college operating policy and procedures, and approved through the College Cabinet, the Dean's Council and Faculty Senate. The board does approve new programs, as required by the Arkansas Department of Higher Education.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2.D - Core Component 2.D

The institution is committed to freedom of expression and the pursuit of truth in teaching and learning.

Rating

Adequate

Evidence

NWACC adopted a policy addressing academic freedom in 2018. Faculty handbook addresses freedom of every instructor to present truth, "as he/she understands it in relation to his/her areas of competence, consistent with course outlines." So by its nature is confined to the classroom. It is unclear in the narrative how the institution supports the overall freedom of expression in the campus community since language from the policy on that topic is not included. The College maintains a student code of conduct governing student conduct.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2.E - Core Component 2.E

The institution's policies and procedures call for responsible acquisition, discovery and application of knowledge by its faculty, students and staff.

1. The institution provides effective oversight and support services to ensure the integrity of research and scholarly practice conducted by its faculty, staff, and students.
2. Students are offered guidance in the ethical use of information resources.
3. The institution has and enforces policies on academic honesty and integrity.

Rating

Adequate

Evidence

Policies are in place to address academic integrity, academic freedom and ethical behavior.

Librarians provide direction on finding and using information ethically as part of library instruction. Librarians provide guidance on reference services, research consultations and introduce students to academic literature.

While the College provides evidence of policies regarding academic honesty and integrity, it would provide stronger evidence if the institution could provide examples of where these topics are taught or reinforced within the curriculum or through co-curricular activities.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3 - Teaching and Learning: Quality, Resources, and Support

The institution provides high quality education, wherever and however its offerings are delivered.

3.A - Core Component 3.A

The institution's degree programs are appropriate to higher education.

1. Courses and programs are current and require levels of performance by students appropriate to the degree or certificate awarded.
2. The institution articulates and differentiates learning goals for undergraduate, graduate, post-baccalaureate, post-graduate, and certificate programs.
3. The institution's program quality and learning goals are consistent across all modes of delivery and all locations (on the main campus, at additional locations, by distance delivery, as dual credit, through contractual or consortial arrangements, or any other modality).

Rating

Unclear

Evidence

It is unclear in the narrative if the institution's program quality and learning goals are consistent across all modes of delivery and all locations. Additionally it is unclear from the narrative the level of attainment by graduates outside of individual programs with outside examination requirements.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3.B - Core Component 3.B

The institution demonstrates that the exercise of intellectual inquiry and the acquisition, application, and integration of broad learning and skills are integral to its educational programs.

1. The general education program is appropriate to the mission, educational offerings, and degree levels of the institution.
2. The institution articulates the purposes, content, and intended learning outcomes of its undergraduate general education requirements. The program of general education is grounded in a philosophy or framework developed by the institution or adopted from an established framework. It imparts broad knowledge and intellectual concepts to students and develops skills and attitudes that the institution believes every college-educated person should possess.
3. Every degree program offered by the institution engages students in collecting, analyzing, and communicating information; in mastering modes of inquiry or creative work; and in developing skills adaptable to changing environments.
4. The education offered by the institution recognizes the human and cultural diversity of the world in which students live and work.
5. The faculty and students contribute to scholarship, creative work, and the discovery of knowledge to the extent appropriate to their programs and the institution's mission.

Rating

Adequate

Evidence

The college maintains appropriate general education, program and course level outcomes. The assessment committee works to ensure that the 8 general education outcomes align with the Common Learning Framework. Faculty and student contribute to scholarship, creative work, and the discovery of knowledge in ways appropriate to their programs and to the institution's role as a community college.

The College could strengthen evidence within this Criterion by describing the evaluation process by which the general education outcomes are regularly reviewed for currency and efficacy within the curriculum.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3.C - Core Component 3.C

The institution has the faculty and staff needed for effective, high-quality programs and student services.

1. The institution has sufficient numbers and continuity of faculty members to carry out both the classroom and the non-classroom roles of faculty, including oversight of the curriculum and expectations for student performance; establishment of academic credentials for instructional staff; involvement in assessment of student learning.
2. All instructors are appropriately qualified, including those in dual credit, contractual, and consortial programs.
3. Instructors are evaluated regularly in accordance with established institutional policies and procedures.
4. The institution has processes and resources for assuring that instructors are current in their disciplines and adept in their teaching roles; it supports their professional development.
5. Instructors are accessible for student inquiry.
6. Staff members providing student support services, such as tutoring, financial aid advising, academic advising, and co-curricular activities, are appropriately qualified, trained, and supported in their professional development.

Rating

Unclear

Evidence

The College's evidence may be improved by sharing college policies on hiring of faculty and staff and the process by which appropriate credentialing is ensured.

NWACC full-time faculty are required to schedule a minimum of 15 hours per week of office hours for students.

 The College conducted an audit on faculty files to ensure compliance with HLC credentialing requirements.

The College revised its current policy to better ensure that faculty credentials have been reviewed and updated and remain in compliance with regional, national and state accrediting and review organizations, however the narrative did not provide clear information on how this was accomplished, specifically related to career programs and dual credit instructors.

The college regularly benchmarks against SACUBO data to ensure that adequate funds are being allocated to faculty lines.

The college regularly reviews the percentage of sections which are taught by full-time faculty and maintains an informal commitment to keep over 50% of sections taught by full-time faculty members.

Employees receive annual performance-based evaluations through and online software. A new process for faculty and designed by the faculty was established this year and will be evaluated at the end of the year for success and improvement.

Academic Deans and the President receive 360° evaluation process.

The Teaching and Learning Center helps faculty find innovative teaching collaborative development opportunities in the use of specialized instructional Technology.

Full-time and part-time faculty participate in two half-day series of learning opportunities prior to the beginning of each semester.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3.D - Core Component 3.D

The institution provides support for student learning and effective teaching.

1. The institution provides student support services suited to the needs of its student populations.
2. The institution provides for learning support and preparatory instruction to address the academic needs of its students. It has a process for directing entering students to courses and programs for which the students are adequately prepared.
3. The institution provides academic advising suited to its programs and the needs of its students.
4. The institution provides to students and instructors the infrastructure and resources necessary to support effective teaching and learning (technological infrastructure, scientific laboratories, libraries, performance spaces, clinical practice sites, museum collections, as appropriate to the institution's offerings).
5. The institution provides to students guidance in the effective use of research and information resources.

Rating

Adequate

Evidence

The college requires students to take a placement exam and if a student places into one or more developmental courses, the student is required to take an addition student success course.

The College has an academic watch, academic probation, and academic suspension policy in place.

The College's offers several student support including: Advising, Student Success Center, Tutoring, Writing Center, Math Center, Early Alert Progress Survey, Veterans Resource Center, Disability Resource Center, Transfer and Transitions Services, Career Services, Learning, Improvement, Fun and Empowerment for High School Students, Peer Association for Student Success mentoring program, a Wellness and Counseling Center, Academic Progress Workshop, and the First Year Student course.

During New Student Orientation, the College offers information to students regarding the campus portal, course syllabi, monitors on campus, and drop-in lectures during class time.

The College did not provide summary data on many of these programs to demonstrate effectiveness or provide an evaluation process to guide improvement of these programs. Providing data would provide reviewers with stronger evidence in this section.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3.E - Core Component 3.E

The institution fulfills the claims it makes for an enriched educational environment.

1. Co-curricular programs are suited to the institution's mission and contribute to the educational experience of its students.
2. The institution demonstrates any claims it makes about contributions to its students' educational experience by virtue of aspects of its mission, such as research, community engagement, service learning, religious or spiritual purpose, and economic development.

Rating

Adequate

Evidence

The College notes that the Common Learning Framework supports the college's mission and vision by ensuring the provision of quality education, however it is unclear from the narrative how this impacts the co-curricular programming of the institution. .

Students have the opportunity to participate in Service Learning and other experiential experiences, but it is unclear how these are connected to the general education curriculum or Common Learning Framework. There narrative does not provide any information on the evaluation of co-curricular activities.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4 - Teaching and Learning: Evaluation and Improvement

The institution demonstrates responsibility for the quality of its educational programs, learning environments, and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement.

4.A - Core Component 4.A

The institution demonstrates responsibility for the quality of its educational programs.

1. The institution maintains a practice of regular program reviews.
2. The institution evaluates all the credit that it transcripts, including what it awards for experiential learning or other forms of prior learning, or relies on the evaluation of responsible third parties.
3. The institution has policies that assure the quality of the credit it accepts in transfer.
4. The institution maintains and exercises authority over the prerequisites for courses, rigor of courses, expectations for student learning, access to learning resources, and faculty qualifications for all its programs, including dual credit programs. It assures that its dual credit courses or programs for high school students are equivalent in learning outcomes and levels of achievement to its higher education curriculum.
5. The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.
6. The institution evaluates the success of its graduates. The institution assures that the degree or certificate programs it represents as preparation for advanced study or employment accomplish these purposes. For all programs, the institution looks to indicators it deems appropriate to its mission, such as employment rates, admission rates to advanced degree programs, and participation rates in fellowships, internships, and special programs (e.g., Peace Corps and Americorps).

Rating

Adequate

Evidence

Programs and courses are designed to meet guidelines established by the Arkansas Higher Education Board. As reference in the narrative, processes are in place for curriculum development, curriculum review and annual program reviews, however it was unclear from the narrative the elements contained in Program Review and the robustness of the evaluation. The evidence could be strengthened with this information.

Technical programs are externally accredited when applicable, but it is unclear how the College determines which programs the institution will seek to receive specialized accreditation.

The college evaluates the transfer of graduates to four year universities.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4.B - Core Component 4.B

The institution demonstrates a commitment to educational achievement and improvement through ongoing assessment of student learning.

1. The institution has clearly stated goals for student learning and effective processes for assessment of student learning and achievement of learning goals.
2. The institution assesses achievement of the learning outcomes that it claims for its curricular and co-curricular programs.
3. The institution uses the information gained from assessment to improve student learning.
4. The institution's processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty and other instructional staff members.

Rating

Adequate

Evidence

The College utilizes a college-wide Academic Assessment Plan. The institution shares results through faculty forums where faculty analyze the data. The institution is beginning a process to assesses co-curricular outcomes. Advisory boards are active and participatory.

The evidence of assessment would have benefit from actual data or examples of how faculty have improved student learning based on the assessment activities.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4.C - Core Component 4.C

The institution demonstrates a commitment to educational improvement through ongoing attention to retention, persistence, and completion rates in its degree and certificate programs.

1. The institution has defined goals for student retention, persistence, and completion that are ambitious but attainable and appropriate to its mission, student populations, and educational offerings.
2. The institution collects and analyzes information on student retention, persistence, and completion of its programs.
3. The institution uses information on student retention, persistence, and completion of programs to make improvements as warranted by the data.
4. The institution's processes and methodologies for collecting and analyzing information on student retention, persistence, and completion of programs reflect good practice. (Institutions are not required to use IPEDS definitions in their determination of persistence or completion rates. Institutions are encouraged to choose measures that are suitable to their student populations, but institutions are accountable for the validity of their measures.)

Rating

Adequate

Evidence

The College stated that student retention, persistence, and completion goals are partially informed by the state's productivity-based funding model. Providing enough information to the reviewers to understanding the impact of the funding model could have benefited this section. The narrative also notes the institution performs regularly reviews of retention, persistence and completion rates for the overall population of students, sub-groups and, disciplinary populations.

The College did not indicate any internal targets for retention, persistence or completion either holistically or by special populations . The response also lacked evidence of how this information is used to inform college reactions, programs and support.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5 - Resources, Planning, and Institutional Effectiveness

The institution's resources, structures, and processes are sufficient to fulfill its mission, improve the quality of its educational offerings, and respond to future challenges and opportunities. The institution plans for the future.

5.A - Core Component 5.A

The institution's resource base supports its current educational programs and its plans for maintaining and strengthening their quality in the future.

1. The institution has the fiscal and human resources and physical and technological infrastructure sufficient to support its operations wherever and however programs are delivered.
2. The institution's resource allocation process ensures that its educational purposes are not adversely affected by elective resource allocations to other areas or disbursement of revenue to a superordinate entity.
3. The goals incorporated into mission statements or elaborations of mission statements are realistic in light of the institution's organization, resources, and opportunities.
4. The institution's staff in all areas are appropriately qualified and trained.
5. The institution has a well-developed process in place for budgeting and for monitoring expense.

Rating

Unclear

Evidence

The College provides training, leadership development and learning opportunities throughout the year.

Staff members have opportunities for training and attending conferences during the year, although it is unclear the level of participation or funding available. The evidence in this section could be better supported with this information.

The College notes it has a process in place for ensuring faculty are appropriately credentialed, but details were not provided. The evidence could be strengthened with this information.

The College constructs annual budgets to accomplish institutional goals and provides mechanisms to monitor and adjust budgets throughout the year. The yearly budget process provides an opportunity to review all budget areas to ensure that their operations contribute to strategic priorities.

The Information Technology (IT) department leverages a multitude of strategies to promote a

reliable, secure and user-friendly technology infrastructure.

The college has developed additional/area focused financial and budgetary reports, i.e., direct Enrollment Costs, Enrollment by Location, and year-to-year comparison.

The Executive Director of Budget, Controller, Vice President of Finance and Administration and the Finance Committee monitor budget to actual results on a monthly basis.

Variances are investigated to determine the overall impact on the financial results of the College. Budgets may be adjusted at any time based on significant variances in anticipated enrollment or revenue projections

During the fiscal year 2019 Budget Development Process, NWACC implemented the initiative of aligning the Budget Requests to the college's strategic plan.

The College does not adequately address the physical infrastructure and emergency management to support its educational mission. In some areas of the response when the prompt asked for information on the physical infrastructure the narrative was about the Technology infrastructure.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5.B - Core Component 5.B

The institution's governance and administrative structures promote effective leadership and support collaborative processes that enable the institution to fulfill its mission.

1. The governing board is knowledgeable about the institution; it provides oversight of the institution's financial and academic policies and practices and meets its legal and fiduciary responsibilities.
2. The institution has and employs policies and procedures to engage its internal constituencies—including its governing board, administration, faculty, staff, and students—in the institution's governance.
3. Administration, faculty, staff, and students are involved in setting academic requirements, policy, and processes through effective structures for contribution and collaborative effort.

Rating

Clear

Evidence

The Board approves the college budget in May of each academic year for the following academic year beginning July 1 and reports of the results of state financial audits are made to the board.

The president of the Student Ambassador and Government Association also serves as the designated student "trustee," who attends the regular board meetings and provides a student voice in the trustees' decision-making processes.

New programs and program changes originate in the respective academic divisions in consultation with community advisory boards and are first presented at the Academic Dean's Council for approval. Since degree program changes frequently affect more than one academic department, this ensures the coordination of course offerings on the schedule.

Academic policies and many Student Services policies and procedures are vetted through the Deans' Council, the Student Services leadership and through Faculty Senate, with final approval through a vote of the full faculty.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5.C - Core Component 5.C

The institution engages in systematic and integrated planning.

1. The institution allocates its resources in alignment with its mission and priorities.
2. The institution links its processes for assessment of student learning, evaluation of operations, planning, and budgeting.
3. The planning process encompasses the institution as a whole and considers the perspectives of internal and external constituent groups.
4. The institution plans on the basis of a sound understanding of its current capacity. Institutional plans anticipate the possible impact of fluctuations in the institution's sources of revenue, such as enrollment, the economy, and state support.
5. Institutional planning anticipates emerging factors, such as technology, demographic shifts, and globalization.

Rating

Clear

Evidence

The College's strategic planning processes included input from both internal and external stakeholders.

Annual goals and objectives are reflected within the operating budget and plans are developed within the context of the strategic goals of the College.

As a part of the annual budgeting process the College conducts a review of external and internal factors that affect enrollment and expected college revenues.

The College has maintained a balanced budget over the past 6 years, using natural attrition, building efficiencies, automation and cost control to keep expenses in line.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5.D - Core Component 5.D

The institution works systematically to improve its performance.

1. The institution develops and documents evidence of performance in its operations.
2. The institution learns from its operational experience and applies that learning to improve its institutional effectiveness, capabilities, and sustainability, overall and in its component parts.

Rating

Adequate

Evidence

NWACC has implemented several new processes to improve quality and to align its practices with the strategic plan.

NWACC has adopted 16 core indicators to demonstrate quality, with baseline measurements currently being examined.

NWACC has a standing committee, the Quality Council, that focuses on ensuring continuous quality improvement throughout the institution and communicating the impact of these improvements. The Co-Chair of the Quality Council offers weekly workshops to address questions or processes for the college community relating to accreditation or assessment. AQIP categories are linked to strategic goal objectives.

The institution could better support the evidence of learning from it operational experiences in this section by providing narrative on how these different processes work together to inform decision making on campus.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

Review Dashboard

Number	Title	Rating
1	Reflective Overview	
2	Strategic Challenges Analysis	
3	Accreditation Evidence Screening Summary	
4	Quality of Systems Portfolio	
5	AQIP Category Feedback	
I	Helping Students Learn	
II	Meeting Student and Other Key Stakeholder Needs	
III	Valuing Employees	
IV	Planning and Leading	
V	Knowledge Management and Resource Stewardship	
VI	Quality Overview	
1	Mission	
1.A	Core Component 1.A	Clear
1.B	Core Component 1.B	Clear
1.C	Core Component 1.C	Adequate
1.D	Core Component 1.D	Adequate
2	Integrity: Ethical and Responsible Conduct	
2.A	Core Component 2.A	Clear
2.B	Core Component 2.B	Clear
2.C	Core Component 2.C	Clear
2.D	Core Component 2.D	Adequate
2.E	Core Component 2.E	Adequate
3	Teaching and Learning: Quality, Resources, and Support	
3.A	Core Component 3.A	Unclear
3.B	Core Component 3.B	Adequate
3.C	Core Component 3.C	Unclear
3.D	Core Component 3.D	Adequate
3.E	Core Component 3.E	Adequate
4	Teaching and Learning: Evaluation and Improvement	
4.A	Core Component 4.A	Adequate
4.B	Core Component 4.B	Adequate
4.C	Core Component 4.C	Adequate
5	Resources, Planning, and Institutional Effectiveness	
5.A	Core Component 5.A	Unclear

5.B	Core Component 5.B	Clear
5.C	Core Component 5.C	Clear
5.D	Core Component 5.D	Adequate

Review Summary

Conclusion

Overall the College would benefit from gaining a better understanding of how to use data in its decision making processes, as well as how to set targets and benchmarks to better determine what processes, projects, and initiatives are successful. This would help the institution mature overall in its Continuous Quality journey,

Overall Recommendations

Criteria For Accreditation
Unclear

Sanctions Recommendation
Not Set

Pathways Recommendation
Not Set

No Interim Monitoring Recommended.