



# INSTITUTIONAL EFFECTIVENESS

## Planning, Budgeting and Evaluation

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### **INSTITUTIONAL EFFECTIVENESS PROCESS: AN OVERVIEW**

Athens State University maintains a comprehensive and coordinated planning, budgeting, and evaluation system to support the institutional effectiveness process. These integrated functions improve the University's ability to identify areas of strength and weakness, prioritize goals, make evidence-based financial decisions, focus on continuous improvement, and enhance the institution's accountability to stakeholders.

The institutional effectiveness process is on-going and broad-based, involving all academic programs and administrative organizational units. The process is research-based, incorporating the analysis of internal and external factors to allow the University to identify its strengths, weaknesses, opportunities, and threats and to develop strategies accordingly. The budgeting process is based on institutional priorities supporting academic quality and the efficient use of financial resources. The annual assessment process allows data-driven decisions to effect continuous improvement at the program and administrative unit level.

Measurements of institutional effectiveness are contained in the *Institutional Effectiveness Matrix*, a comprehensive working document that links performance indicators to eight (8) institutional goals and nine (9) learning goals based on organizational function (academic and administrative/support) and outcome category (Learning, Program-Operational and Service Delivery).

Senior-level administrators hold the primary responsibility of managing the University's institutional effectiveness process, with faculty and program officers overseeing the operations related to developing and implementing their respective plans and formulating corrective actions where necessary.

### **STRATEGIC PLANNING FUNCTION AND CYCLE**

The strategic planning process provides direction, objectives, goals, benchmarks, and actions that ensure advancement of the University both internally and externally. Accordingly, the University's vision, mission, and goals ultimately serve as the foundation for strategic planning.

Pursuant to the *Strategic Direction Policy*, the Board of Trustees approves strategic goals and a strategic plan for a period of not less than three years from the date on which the plan is approved, also reviews and reaffirms the plan on an annual basis. The

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The Strategic Planning Committee, is charged with the responsibility of monitoring the progress of the University's Master Plan, while assisting the President and Vice Presidents to continue the process of planning for the future. Among the Committee's responsibilities is the development of the 3-Year Strategic Plan, also referenced as the Short-Range Plan (SRP). This plan identifies a series of strategic actions to be pursued within the next 3-4 years aimed at achieving the goals of the University in fulfillment of its mission.

The Committee is chaired and co-chaired by the President and the Provost, respectively, and is composed of twelve (12) ex-officio (non-voting) members appointed by virtue of the office they hold and not subject to the term limit, and seven (7) voting members from faculty, staff, students, and alumni for a total composition of 19 members, appointed by the President to a staggered 3-year term. The President also appoints an additional staff member to serve as a non-voting recorder for the Committee. Individual members in the Committee serve as representatives of the interests of the University rather than as advocates of specific groups or areas.

Planning cycles spread over 1, 3, and 10-year planning periods to accommodate both internal and external requirements. Specific planning periods are stated in the *Institutional Effectiveness Cycle*.

## **Components and Steps in the Planning Process**

### **Institutional Mission Review Process**

The review of the mission statement and goals is a critical element of the strategic planning process and rests with the Strategic Planning Committee.

The mission statement is reviewed every three years to accommodate environmental changes that may impact the effectiveness and efficiency of the institution. Additional circumstances may trigger the mission review process at any time, including changes that are substantive in nature proposed by the institution and approved by the Board of Trustees and the appropriate regulatory or accreditation entity.

To ensure that the mission review process is data-driven, the Office of Institutional Research and Assessment may be asked to conduct a series of internal and external analyses to identify the status and trends of such factors as student demographics, local economies, job markets, competitive advantage, and other key indicators in the state and North Alabama counties that may influence student enrollments and/or the establishment of new academic programs. This information combined with internal institutional data is shared with the President and the Administrative Council for consideration. Upon the President's decision, and following procedures stipulated by the Strategic Planning Committee, the mission and goals review process is initiated.

The process starts with a series of customized questions based on specific objectives as follows: (1) clarifying institutional goals and market opportunities; (2) enhancing academic program quality and availability; (3) improving student and faculty support systems; and (4) enhancing institutional presence in the community. Following broad-based consultations and the thorough analysis of relevant information, the Strategic Planning Committee drafts a new mission statement and goals. The draft is disseminated throughout the institution for a specific period of time as an additional opportunity to provide feedback.

The new mission statement draft is forwarded to the President and the Administrative Council for consideration. Following the President's approval, the revised mission statement is submitted to the Board of Trustees (BOT) for final approval. Upon BOT's approval, the new mission is disseminated and published in all major University publications, including the Catalog, the Class Schedule, and the Website.

### **The Master Plan – Vision 2020 (Long Range Plan, LRP)**

The planning process begins with the development of the institution's Master Plan also referenced as the Long Range Plan (LRP), the 10-year master plan of the University and the foundation for the strategic direction of the University. Emanating from the University mission, the Master Plan compiles Athens State University's vision and sets the goals and objectives to be pursued. Adjustments to changing circumstances, if needed, are addressed through the 3-Yr Strategic Plan (SRP) and corresponding budgeting process.

During the year prior (9<sup>th</sup> year) to the last year covered by the Master Plan, the President appoints a new University committee charged with the responsibility of formulating the institutional goals and priorities that will guide decision making for the next 10 years.

### **The 3-Yr Strategic Plan (SRP)**

The 3-Yr Strategic Plan or SRP is a three-year plan based on the goals and objectives stipulated in the Master Plan (LRP) that must be accomplished in the short term. The SRP specifies strategic initiatives to be undertaken for each one of the objectives formulated consistent with the institutional goals.

An annual *Strategic Plan Progress Report* is submitted to the President and presented to the Board of Trustees in their April meeting.

### **Annual Assessment Plan (AAP)**

Consistent with organizational goals and priorities set forth in the LRP and SRP, and specific to individual functional areas of responsibility, academic programs and administrative support units develop their annual operational assessment plan. The *Annual Assessment Plan* includes the program's objectives, assessment methodology, expected target outcomes, and the intended use and dissemination of results. Annual Assessment Plans for the next academic year are submitted to the Office of Institutional

Research and Assessment in April and are implemented at the beginning of August. Data collection is carried on thorough the academic year (August – July). Further details on the AAP are provided under the Assessment (Evaluation) Process section below. Objectives and expected outcomes are fully aligned with institutional and/or learning goals as appropriate.

## **BUDGETING PROCESS**

Annually the Vice President of Financial Affairs, who chairs the Budget Advisory Committee (BAC) initiates the budget process. The budget process usually starts in the spring during the month of April. Since a large portion of the operating budget is comprised of state appropriation, the process may be delayed due to the timing of the legislative session. In addition to the Vice President of Financial Affairs, the Budget Advisory Committee consists of the following members: the Business Manager/Treasurer, the presiding officers from the Faculty Senate and the Staff Senate, and three faculty members from each one of the three colleges.

The Chair convenes the BAC to discuss the upcoming budget process. Subsequent to the meeting of the BAC, official notification of the start of the budgeting process is sent to department heads, deans, and vice presidents followed by a budget packet comprised of a series of guidelines and worksheets to formulate their budget requests for the next academic year. At this time they are also encouraged to solicit input from their employees in the various departments as to operational and position needs and to use that information as well as their short and long range plans in formulating their formal budget request.

The budget packet consists of the following documents: 1) A cover sheet memorandum which describes what is enclosed in the budget packet and discusses dates the budget hearings will be held; 2) A Summary sheet which describes each budget form included in the packet and the purpose for each form; 3). The following forms: Employee Budget Worksheet; Operational budget worksheet; and a Critical Need Worksheet. The Vice President of Financial Affairs provides a printout of the current year to date budget and actual for the departments to assist them in their analysis and budget development.

Budget hearings are conducted by the BAC as scheduled with the respective vice president, college dean, and department head in attendance. At this time, program officers present their priorities for the upcoming year and provide a justification for their budget requests. The Chair provides information about the upcoming budget such as known increases in retirement costs and other fixed increases in expenditures that will have an effect on the budget and available funds. Minutes of the hearings are taken by the Executive Assistant to the VP of Financial Affairs.

Budget requests are discussed along with the units' current budget and a final budget request for each unit is submitted. Based on all budget requests, the BAC formulates a recommended budget for the University, which is presented by the Chair to the President's Cabinet, along with a list of unfunded positions and critical need items. Following input from Cabinet members, the President makes the ultimate decision on which items to fund.

The Official University Budget is prepared and submitted to the Board of Trustees for approval at its July meeting. In instances where a tuition increase is integrated in the budget, a request for approval is submitted to the BOT's Executive Committee, who meets in a special session in June to consider and approve the tuition increase request.

Subsequent to state appropriations for the institution, the departments are notified of their approved budget amount for the upcoming fiscal year. Funding through other sources, i.e. grants, are communicated to the respective program as moneys are received and allocated.

## **ASSESSMENT (EVALUATION) PROCESS**

Pursuant to the *Institutional Assessment Policy*, all academic programs and administrative/support organizations are required to evaluate their annual performance. The policy in combination with procedures/processes and guidelines assign responsibility for assessment and timelines for the completion of the cycle and integrate quality assurance measures.

The outcomes assessment process follows programs' goals and objectives as stated in the Master Plan and the 3-Yr Strategic Plan, and is guided by the performance indicators identified by faculty and staff and stated in the Institutional Effectiveness Matrix.

The outcomes assessment process follows a parallel approach where programs and organizational units formally plan their assessment activities for the next academic year, collect (measure) and analyze outcome data throughout the academic year, and report and implement changes based on those results. Details of the assessment process and the tools to manage and sustain it are stated in the Athens State University Outcomes Assessment System.

The process consists of three phases, each one requiring official and standardized documentation:

### **Phase I: Development and Implementation of the Annual Assessment Plan (AAP)**

Following the dissemination of the *Annual Assessment Plan Guidelines and Instructions* by the Office of Institutional Research and Assessment (OIRA) in February, all program officers from academic and administrative units, through their internal committees, begin the development of their AAPs for the next academic year.

The *Annual Assessment Plan* is submitted by April 15 to OIRA, which reviews the plans for completeness and compliance with assessment quality standards. OIRA reports assessment planning activities, including program compliance, to the Executive Assessment Committee (EAC). All academic programs and administrative/support units implement their AAPs in early Fall (August 1<sup>st</sup>). and begin collecting assessment data throughout the academic year.

## **Phase II: Data Collection**

Immediately upon implementation of the AAPs, programs and administrative/support units begin collecting performance data throughout the academic year (Fall, Spring, Summer). Administrative organizations with financial resources management responsibilities (e.g. Business Office, University Advancement, and the Foundation) collect and report data based on fiscal or calendar year consistent with their external auditing process.

## **Phase III: Development and Submission of the Annual Assessment Report (AAR)**

During early August, OIRA disseminates the *Annual Assessment Report/Action Plan Guidelines* and submits statistical data results to all academic programs and administrative/support units from all indirect methods (e.g. surveys and other administrative, university-wide assessment instruments administered by OIRA).

All data generated via direct methods (e.g. course-embedded instruments and/or programs' internal records) is submitted by each program and administrative/support unit to OIRA for documentation and upload in the respective AARs.

Aggregated data from direct and indirect methods of assessment are further analyzed and measured against expected target outcomes for a final determination of program performance (extent to which outcomes were met). Annual Assessment Reports are submitted to OIRA by September 15<sup>th</sup>.

## **Phase III: Development and Submission of the Action Plan (AP)**

Simultaneous with the development and submission of the AAR, and based on assessment data findings, programs develop an *Action Plan* complete with improvement strategies, tasks and actions; responsible entity; resources; timeframe; and performance indicators (outcomes).

Upon completion of the assessment cycle for the academic year, OIRA consolidates all three documents into one, the *Consolidated Annual Assessment Plan* (CAAP) to present a complete and logical view of outcomes assessment activities and the actions taken by individual programs and organizations to effect continuous improvement. At this time OIRA certifies individual program's compliance with the assessment cycle, pursuant to University policy.

In addition to the AAP, AAR, and AP, the assessment process involves the development and/or periodic revision of a variety of documents to substantiate the ability of the academic programs and organizational units to conduct their evaluations. These include all assessment instruments (i.e. surveys, forms, exams, scoring rubrics, student portfolios, internal records and/or log systems) used to measure expected outcomes. Academic programs and administrative and support units that rely on and/or include assessment data from external sources (i.e. third party audits, certifications, and/or standardized test scores) must submit the appropriate documentation as part of their records.

## **Instructional Program Review**

Pursuant to the *Program Review Policy*, academic programs not accredited by a discipline-specific (national) organization, conduct a review of their respective program every five years. Nationally-accredited programs use the assessment and review processes prescribed by their respective accrediting agency as part of their annual organizational performance plan and report.

Internally, the University has established processes, procedures, and specific criteria for conducting program reviews by the college dean, department chairs, and program faculty. Results from these reviews are used to make changes to improve operations, curriculum, and/or other program areas as needed.

The two most important goals of ATSU's program review are: 1) to examine the ways to maximize resources and, 2) to explore additional ways to increase efficiency while maintaining the highest level of quality in all academic programs.

Review Criteria includes: 1) cost-benefit measures including program cost-to-revenue ratio; 2) qualitative and quantitative metrics regarding faculty and instructional resources, external certifications, student demand, and student achievement; 3) organizational efficiency of instructional delivery, and 4) degree programs' achievement of learning outcomes.

## **EXTERNAL ASSESSMENT**

### **The Quarterly Performance Report**

As an institution of higher learning in Alabama, Athens State University is mandated to submit the *Quarterly Performance Report* (QRP) to the State. Annually in September, the University reports data results for selective goals and objectives for the last 4 quarters of the previous fiscal year aimed at documenting performance based on the institution's mission and vision statements.

## **USE OF ASSESSMENT RESULTS FOR CONTINUOUS IMPROVEMENT**

Following implementation of systematic outcomes assessment within the institutional effectiveness process, the Office of Institutional Research and Assessment conducts an audit of all AARs and submit the *Institutional Effectiveness: Use of Assessment Findings for Continuous Improvement Report* to the Executive Assessment Committee. This document, published in December, summarizes the proposed and/or planned changes made by programs and administrative/support units based on the findings of the assessment process. Data is reported through a set of standardized codes that define specific actions taken by programs.