

QUALITY CHECKUP REPORT

Rochester Community and Technical College

Rochester, MN
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Quality Checkup team members:

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Background on Quality Checkups conducted by the Academic Quality Improvement Program

The Higher Learning Commission's Academic Quality Improvement Program (AQIP) conducts Quality Checkup site visits to each institution during the fifth or sixth year in every seven-year cycle of AQIP participation. These visits are conducted by trained, experienced AQIP Reviewers to determine whether the institution continues to meet The Higher Learning Commission's *Criteria for Accreditation*, and whether it is using quality management principles and building a culture of continuous improvement as participation in the Academic Quality Improvement Program (AQIP) requires. The goals of an AQIP Quality Checkup are to:

1. Affirm the accuracy of the organization's online Systems Portfolio and verify information included in the portfolio that the last Systems Appraisal has identified as needing clarification or verification (System Portfolio Clarification and Verification);
2. Review with organizational leaders actions taken to capitalize on the strategic issues and opportunities for improvement identified by the last Systems Appraisal (Systems Appraisal Follow Up);
3. Alert the organization to areas that need its attention prior to Reaffirmation of Accreditation, and reassure it concerning areas that have been covered adequately (Accreditation Issues Follow Up);
4. Verify federal compliance issues such as default rates, complaints, USDE interactions and program reviews, etc. (Federal Compliance Review); and
5. Assure continuing organizational quality improvement commitment through presentations, meetings, or sessions that clarify AQIP and Commission accreditation work (Organizational Quality Commitment).

The AQIP peer reviewer(s) trained for this role prepare for the visit by reviewing relevant organizational and AQIP file materials, particularly the organization's last *Systems Appraisal Feedback Report* and the Commission's internal *Organizational Profile*, which summarizes information reported by the institution in its *Annual Institutional Data Update*. The report provided to AQIP by the institution is also shared with the evaluator(s). Copies of the Quality Checkup report are provided to the institution's CEO and AQIP liaison. A copy is retained by the Commission for the institution's permanent file, and will be part of the materials reviewed by the AQIP Review Panel during Reaffirmation of Accreditation.

Clarification and verification of contents of the institution's *Systems Portfolio*

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Check-up. The team reviewed key documents, met with institution staff and students and were able to arrange special meetings as needed. Specifically;

- Prior to the visit, team members reviewed
 - o Systems Portfolio
 - o Systems Appraisal Feedback report
 - o Action project description
 - o Quality progress report (update to systems portfolio)
 - o 1997 PEAQ visit report
 - o 2001 PEAQ visit report
- During visit, the team met with the Leadership Cabinet , AQIP Strategy Forum team, college staff, college faculty, program leaders, community stakeholders, student senate, MnScu officials and others.
- The team also met with the committees assigned to the three vital few projects/priorities
 - o Strategic Operation Committee – “Better Serving Stakeholders”
 - o Human Resources Committee – “Comprehensive HR Planning”
 - o Assessment Committee – “Assessment of Student Learning”

Throughout the entire visit, institution leaders, staff and faculty openly participated in the interviews and offered excellent insights into college operations and plans. Team members observed frequent examples of high commitment to institution values and programs on the part of all stakeholders. Documentation and performance related information were acceptable and are in compliance with Commission and AQIP expectations.

Review of specific accreditation issues identified by the institution's last Systems Appraisal

In 1997 the institution received a PEAQ report citing the need to improve processes supporting assessment of student learning outcomes. The concern was raised again in a 2001 evaluation from the Commission. Subsequent to the 2001 report, the institution joined AQIP and made assessment of learning one of its top three priority Action Projects.

The team gave specific time and attention to this issue because of the long-standing concerns reflected in Commission documents. Within the past 12-18 months, the institution has engaged in definite efforts to improve the process of assessing student learning. The Assessment Committee is now supported by a faculty member who has been given additional release time allowing for more focused support and leadership of the process. In addition, the institution is taking a team to the Commission Assessment Academy with the distinct goal of continuing development of assessment activities on campus. The Assessment Committee has identified several broad, institution-wide learning goals and is in the process of developing measures and processes to evaluate learning outcomes related to those standards.

The Team remains concerned that the institution has yet to develop specific measures and plans for assessing student learning 11 years after the first Commission report cited lack of assessment processes as an issue. Although recent efforts are showing some promise for future assessment activity, the institution has yet to demonstrate that it has established goals for student learning outcomes and that it is collecting data to evaluate the effectiveness of the institution's programs.

In the view of the team members, the institution needs to demonstrate significant progress in addressing the assessment of student learning before it comes up for Reaffirmation of Accreditation beginning September 2009. Although the 2007 Systems Appraisal team did not identify issues of non-compliance with **the** Criteria for Accreditation, it did identify lack of progress in assessment as a serious strategic challenge for the institution. The Quality Checkup team believes this issue is perilously close to being an accreditation issue, and is concerned that the 2009-10 Reaffirmation Panel may reach a similar conclusion. This risk ought to inspire the institution to act now to rectify the situation.

One means of documenting reasonable progress in assessment would be to send AQIP a voluntary report, on or before September 2009, describing the actions the institution has or is taking to develop and implement a systematic, multilevel, comprehensive assessment plan that utilizes data for learning improvement. Ideally, the institution should document the development of student learning outcomes at both the course and program level; a realistic timeline and data collection process; plans to "close the loop" that demonstrate that the data collected is being used to evaluate and adjust processes to improve outcomes; specific learning improvement goals for programs and departments; and a process for assisting faculty to develop action plans based on assessment that result in improved learning outcomes in future semesters and years.

Participation in the HLC's Academy for Assessment of Student Learning may help the institution to address these questions, and action plans developed through the Academy should be part of the institution's documentation of progress in this area, but it would be imprudent for the institution to believe that Academy participation, alone, will position it next year to make the case that it meets Higher Learning Commission Criterion 3 and the Commission's expectations on assessment of student learning. And it would be equally imprudent for the institution to wait until September 2009 to see whether what it can present to the Panel on Reaffirmation makes a compelling case for its assessment efforts, so we urge the institution to communicate its real progress on the issue to AQIP well before September 2009.

Review of the institution's approach to capitalizing on recommendations identified by its last Systems Appraisal in the *Strategic Issues Analysis*.

The team reviewed the opportunities for improvement identified in RCTC's Systems Appraisal as well as issues and opportunities raised during the Checkup visit. The team noted distinct areas of improvement:

- Student completion rates – the Learning Center is an excellent example of a faculty/staff driven initiative that is supporting a documented increase in student performance and retention. Additionally, the CARE program is a dynamic example of a creative approach to engagement with area high school students and improving their performance in college coursework.
- Concern with rate of retirement – in response to concerns about an increasing rate of retirement of staff and faculty the institution has initiated an HR project focused on reassessment of the number of employees who will retire, alignment of hiring criteria with RCTC mission/vision/goals and with evaluation of opportunities to improve retention of experienced staff and faculty.
- Communication – communication issues were identified by all levels of stakeholders. The leadership team is clearly aware of the issues and has demonstrated a commitment to improving various communications processes. The team noted that both faculty and staff members commented on the recent improvement in communications. Opportunities for improvement still exist, especially regarding bottom-up communication, but it is important to note that the

institution has shown distinct improvement subsequent to the portfolio review.

- Accountability and data informed decisions – the institution has implemented a wide range of data collection and reporting systems. Significant progress is being made with a new dashboard reporting system. As data accessibility increases it will be important for the institution to evolve processes that tie the data and decision-systems together.

Team members noted some areas of continuing opportunity for improvement;

- Assessment of student learning – (comments noted in the section above)
- Senior leadership stability – during the course of meetings and discussions the issue of turnover, long hiring times, and lengthy interim appointments in critical operating positions was brought up by staff, faculty and leadership members alike.
- Student satisfaction continues to decline – RCTC has identified this as an issue and is aware of the need to develop a deeper understanding of the driving factors in order to improve overall student satisfaction. However, in fairness to the institution, it should be noted that the team members were distinctly impressed with the positive nature of their meetings with students. Students evidenced a positive attitude and were unable, despite repeated probes, to identify specific issues of dissatisfaction with the institution.
- Broad-based action projects – team members noted that the institution demonstrates a very definitive commitment to the goals of continuous improvement. However, the team noted some concern over the extremely broad nature of the AQIP Action Projects and the long timeframes established for the projects. The broad nature of the projects may be contributing to challenges in completing the projects.

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP's expectations.

Review of organizational commitment to continuing systematic quality improvement

The institution demonstrates an active commitment to continuing improvement of programs and services. The institution is engaged in AQIP, Baldrige and a Minnesota-based quality initiative. Team members noted the potential for confusion and operational conflict between these varied programs. The number of initiatives and frequently conflicting nomenclature and acronyms has caused some confusion among various stakeholder groups. While there is no doubt of the institution's commitment to quality improvement, the team members felt that an opportunity exists to focus organizational efforts around fewer quality initiatives thus helping to solidify support among various groups.

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP's expectations.

USDE issues related to default rate (renewal of eligibility, program audits, or other USDE actions)

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP's expectations.

Compliance with Commission Policy IV.A.8, Public Notification of Comprehensive Evaluation Visit

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP's expectations.

Compliance with Commission policy 1.C.7, Credits, Program Length, and Tuition

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP's expectations.

Compliance with Commission policy IV.B.2, *Advertising and Recruitment Materials*

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP's expectations.

Compliance with Commission policy III.A.1, *Professional Accreditation*, and III.A.3, *Requirements of Organizations Holding Dual Institutional Accreditation*

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP's expectations.

Compliance with Commission policy IV.B.4, *Organizational Records of Student Complaints*

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP's expectations.

Other USDE compliance-related issues

None noted.

Other AQIP issues

The team offers the following notes:

- Excellent feedback throughout the session; open and honest discussion.
- Well organized visit.
- Students offered positive feedback, despite declining satisfaction numbers.
- The institution enjoys an excellent reputation in community.
- The Student Learning Center, CARE program and program for developmentally challenged students were outstanding examples of good work at the institution.
- The team noted challenges of working in an environment with multiple unions and conflicting contracts within the same union. The team understands that many

of these issues are not institution-driven nor managed. The State is responsible for managing this process and bears responsibility for balancing inequities in contract arrangements.

- Communication – bottom-up mechanisms and additional communication of rationale for decisions needed.
- Authority and responsibility issues – concerns were expressed by various stakeholder groups with the overriding of decisions and/or lack of enforcement of policies.