HIGHER LEARNING COMMISSION

AQIP PATHWAY SYSTEMS PORTFOLIO

A Resource for Creating a Systems Portfolio

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Section 1: Systems Portfolio Overview

Providing Context

The Systems Portfolio is the primary document by which institutions on the AQIP Pathway demonstrate they are meeting the Criteria for Accreditation. Through the Systems Portfolio, institutions also document their approach to performance excellence and provide evidence of continuous improvement.

The Systems Portfolio serves a number of purposes. It is:

- A means by which the institution will receive feedback on organizational strengths and opportunities from a team of quality improvement experts and educators.

- A common reference point that lets everyone in the institution share an understanding of how the institution is organized, what its key processes entail, what kind of performance those processes produce and how the institution subsequently improves.

- An opportunity for self-reflection on institutional key processes, results and continuous improvement activities.

- A planning tool that helps the institution shape its future agenda and concentrate everyone's attention on those areas that should be the focus for improvement.

- A documentation of evidence, over time, that the AQIP Pathway is working to the institution's advantage and that continued participation in the pathway makes sense.

- A public information and relations tool that allows an institution's stakeholders to understand clearly and persuasively what the institution is accomplishing with its resources.

The primary audience for the Systems Portfolio is the Higher Learning Commission. Other audiences include the governing board, faculty, staff and students of the institution.

Other audiences, which might include prospective students, parents, employers, funding bodies, state coordinating or regulatory boards, prospective faculty and staff, donors, or other accrediting agencies, may require additional explanation of terms or concepts that are specific to higher education, continuous improvement or the AQIP Pathway.

The Systems Portfolio is structured around the six AQIP Pathway Categories, with specific questions asking the institution to describe processes, results and improvements for each of its systems (these questions are provided in Section 2). The finished Systems Portfolio contains an institutional overview and category responses. Each category response should include a category introduction, along with the responses to each of the Process (P), Results (R) and Improvement (I) items with embedded evidence that the institution meets the Criteria for Accreditation.

Institutional Overview

The Institutional Overview provides readers a reasonable context for understanding the institution's detailed descriptions of its processes, results and improvement strategies.

The Institutional Overview should be a maximum of two pages and should briefly describe:

- The institution's mission, values and/or strategic vision.

- The numbers and types of students, faculty and staff.

- The level and scope of academic offerings.

- Its campuses and additional instructional locations.

- Its distance delivery programs.

- Other key campus programs and resources.

It should also briefly describe the institution's quality improvement experiences and reflect on its key challenges, accomplishments, failures and future opportunities. The institution is expected to remark on the last two to four years (particularly since the institution's entry into the AQIP Pathway or its last Systems Appraisal, Comprehensive Quality Review or Reaffirmation) and cite examples (including Action Projects) of improvement initiatives the institution has implemented to help further develop its quality program.

Category Responses

Category Responses provide detailed answers to the Process (P), Results (R) and Improvement (I) items contained within the AQIP Pathway Categories. Evidence that the institution is meeting HLC's Criteria for Accreditation should be embedded in the Category Responses.

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Table 1: Stages in Systems Maturity: Processes			
REACTING	**SYSTEMATIC**	**ALIGNED**	**INTEGRATED**
The institution focuses on activities and initiatives that respond to immediate needs or problems rather than anticipating future requirements, capacities or changes. Goals are implicit and poorly defined. Informal procedures and habits account for all but the most formal aspects of institutional operations.	The institution is beginning to operate via generally understood, repeatable and often documented processes and is prone to make the goal of most activities explicit, measurable and subject to improvement. Institutional silos are eroding and signs of coordination and the implementation of effective practices across units are evident. Institutional goals are generally understood.	The institution operates according to processes that are explicit, repeatable and periodically evaluated for improvement. Processes address key goals and strategies, and lessons learned are shared among institutional units. Coordination and communication among units are emphasized so stakeholders relate what they do to institutional goals and strategies.	Operations are characterized by explicit, predictable processes that are repeatable and regularly evaluated for optimum effectiveness. Efficiencies across units are achieved through analysis, transparency, innovation and sharing. Processes and measures track progress on key strategic and operational goals. Outsiders request permission to visit and study why the institution is successful.

Table 2: Stages in Systems Maturity: Results			
REACTING	**SYSTEMATIC**	**ALIGNED**	**INTEGRATED**
Activities, initiatives and operational processes may not generate data or the data are not collected, aggregated or analyzed. Institutional goals lack measures, metrics and/or benchmarks for evaluating progress. The monitoring of quality of operational practices and procedures may be based on assumptions about quality. Data collected may not be segmented or distributed effectively to inform decision making.	Data and information are collected and archived for use, available to evaluate progress, and are analyzed at various levels. The results are shared and begin to erode institutional silos and foster improvement initiatives across institutional units. Tracking of performance on institutional goals has begun in a manner that yields trend data and lends itself to comparative measures in some areas.	Measures, metrics and benchmarks are understood and used by all relevant stakeholders. Good performance levels are reported with beneficial trends sustained over time in many areas of importance. Results are segmented and distributed to all responsible institutional units in a manner that supports effective decision making, planning and collaboration on improvement initiatives. Measures and metrics are designed to enable the aggregation and analysis of results at an institutional level.	Data and information are analyzed and used to optimize operations on an ongoing basis. Performance levels are monitored using appropriate benchmarks. Trend data has been accrued and analyzed for most areas of performance. Results are shared, aggregated, segmented and analyzed in a manner that supports transparency, efficiency, collaboration and progress on organizational goals. Measures and metrics for strategic and operational goals yield results that are used in decision making and resource allocations.

The stages in maturity have been adapted from "Baldrige Excellence Framework: A Systems Approach to Improving Your Organization's Performance (Education)."

Category Introductions

A one-page Category Introduction provides Category-specific context to guide readers' understanding of the P, R and I responses. It also details the institution's priorities for improvement in the Category, such as planned Action Projects. The Category Introduction will enable peer reviewers to provide feedback where it is most valuable—the areas in which the institution currently focuses its attention.

The Category Introduction also discusses the institution's sense of the maturity of its processes, results and improvement. Tables 1 and 2 are provided to help institutions determine the maturity of their processes and results. Both tables identify "Reacting" as least mature, with "Integrated" being the most mature. An institution should only identify its processes or results as being a certain level of maturity if it meets all the standards within that maturity level. The Category Introduction also identifies where in the category the institution is focusing its attention. The institution can use information gained from its past appraisals to propel itself to the next maturity stage.

Second and subsequent versions of an institution's Systems Portfolio should clearly demonstrate

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commitment to continuous improvement and maturation of institutional processes and results.

In discussing the maturity of its processes and results, the institution should be guided by the levels depicted and terminology used in Tables 1 and 2.

The Category Sections

Responses to P, R and I Items

In each Category, address each of the Process (P), Results (R) and Improvement (I) items. All Category items should be referenced by item number. Skipping Category items may lead an institution to leave out data and evidence demonstrating it meets the Criteria for Accreditation.

For items that reference the Criteria for Accreditation, provide evidence to demonstrate that the institution meets the indicated Component and each Sub-component. All included evidence should be referenced by the Sub-component number.

Items not addressed in depth and thus recognized as future opportunities for improvement may be answered briefly and honestly, as shown in the following example statements:

> "We have limited measures of the effectiveness of support services at this time."

> "Our institution has not yet developed processes for leadership succession."

> "We began gathering student retention and persistence data two years ago, but have not yet organized and analyzed the data so that it can inform our actions."

Remember: Institutions must address every Process (P), Results (R) and Improvement (I) item.

Category 1, Helping Students Learn, should occupy 20 to 30 percent of all Systems Portfolios. Within the sections devoted to the remaining Categories, institutions may focus on what is most important to them and allocate pages accordingly.

Institutions with experience on the AQIP Pathway are expected to become increasingly skilled at telling their stories effectively — describing processes succinctly, presenting significant results clearly and explaining systems for operations and improvement vividly.

Processes (P)

"Processes" are the methods by which faculty and staff complete their work—both academic and administrative. Process questions ask institutions to explain how work is accomplished. Process (P) items ask for documentation of the who, when, where, how and why for key institutional processes. Where appropriate, the terminology and levels indicated in Tables 1 and 2 on page 3 should be used to guide the institution's descriptions of its processes.

In the descriptions, institutions should be sure to address the processes instead of the activities or steps that are part of the process. A process is the series of decisive steps that an institution takes to achieve an end. An institution's process might include work flow issues, how resources are assigned and/or decisions made in order to achieve a specific result. It may be useful to think of process as a series of activities conducted in order to have a particular impact.

For example, in 1.1: Common Learning Outcomes on page 7, the description of the process for "aligning common outcomes" should not only indicate what the common learning outcomes are, but should explain how they are aligned with the mission, educational offerings and degree levels of the institution. It should also describe the process the institution uses to actually align the outcomes or ensure alignment of the outcomes to the mission, educational offerings and degree levels of the institution.

Results (R)

A result is the impact (that which is different) once the process has taken place; in simple terms, the process is the cause and the result is the effect. The institution should provide data and direct measures showing the impact of all the processes identified in the same subcategory. All results should include a brief explanation of how often the data are collected, who is involved in collecting the data, baseline metrics in order to demonstrate that something has indeed changed, and how the results are shared.

When responding to Results (R) items, use (and number) tables, graphs and charts whenever possible. Present the performance level, trend data and, when possible, benchmark comparisons to similar institutions. When referencing tables, graphs and/or charts, provide a brief narrative, explanation and analysis of the data. Let the levels depicted and terminology used in Tables 1 and 2 on page 3 guide the description of the institution's results.

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Institutions writing their first Systems Portfolio may find their activities, initiatives and operational processes of cycles do not generate data, or data are not collected, aggregated or analyzed. If this is the case, the information available should still be presented.

Improvement (I)

For these items, an institution should describe the process improvements that have been implemented or will be implemented in the next 1–3 years. Responses should illustrate a clear pattern of how the institution is improving its processes (and therefore its results) based on the data and information presented in the R items.

Continuous improvement is a challenging goal that requires most institutions to first design and measure key processes. It is only when performance results are known and can be analyzed over time that continuous improvement becomes possible.

Therefore, most institutions will find that responses to I items in the first Systems Portfolio may be reports of improvements based on Action Projects and other strategic initiatives. However, subsequent Systems Portfolios should describe improvements based on analyses of data and information.

Using the Systems Portfolio to Document Evidence Regarding the Criteria for Accreditation

To maintain accreditation, an institution must demonstrate that it continues to meet HLC's Criteria for Accreditation. The Systems Portfolio provides an opportunity to have the evidence screened prior to the formal reaffirmation review. If the Systems Appraisal identifies gaps in an institution's documentation that it meets accreditation requirements, the institution will have opportunity for improvement prior to Reaffirmation of Accreditation.

Specific Category items are aligned to the Criteria and Core Components. The presentation that the institution makes for each Core Component can be woven through its answer(s) but must address all of the Core Components. Within its responses to the specified P items, an institution must clearly and concisely prove that it meets a Core Component.

Provide Convincing Evidence

An nstitution must provide evidence in the System Portfolio demonstrating that it meets the Criteria for Accreditation. To provide evidence of assessment of student learning, for example, the Systems Portfolio needs to explain what is assessed, the assessment measures, frequency of assessment, how the assessment is deployed across the institution, the results the measures have yielded, and how the assessment data are used to improve and communicate effectiveness. Such detail will create an evaluative Systems Portfolio as opposed to one limited to lengthy but largely unhelpful descriptions.

The peer review team will evaluate if an institution meets the Criteria for Accreditation based on the Systems Portfolio evidence. See Following Systems Portfolio Submission on page 6 for an explanation of how the evidence is evaluated.

Writing the Systems Portfolio

The team writing the Systems Portfolio may be small (two to three writers) or large (a writing team for each Category). Either approach can be effective, depending on institutional size, culture and AQIP Pathway experience. Consider engaging the campus community as a means of reinforcing the culture of continuous improvement and improving the quality of information in the Systems Portfolio.

Creating the Systems Portfolio is a task that may be taken one Category at a time. Consider the following tips when writing the Systems Portfolio:

- Ensure colleagues understand the notion of process and system maturity. Don't assume that making progress automatically equates with maturity. If needed, research the topic and consider using Tables 1 and 2 on page 3 as didactic tools.

- Designate an editor to ensure the Category responses are conveyed in a unified voice. A skilled editor will also ensure that the Systems Portfolio is responsive to the Process (P), Results (R) and Improvement (I) items; contains appropriate references to the item numbers and Criteria for Accreditation; and is free of unnecessary jargon and acronyms.

- Assume the peer review team will read only what is in the Systems Portfolio itself.

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- To make certain reasonable evidence has been provided to prove each Core Component is met, review—collectively—the responses to the questions related to each Core Component.

- Reference other Category descriptions when responding to Category items to illustrate how processes are aligned and linked at the institutional level.

- Designate the evidence for Core Components by number and letter using a parenthetical reference at the end of every relevant paragraph.

Systems Portfolio Document Requirements

Note: Institutions submitting a Systems Portfolio during the 2016–2017 academic year should follow the requirements below to create their portfolio. Institutions that have Systems Portfolios due after that point will create them using HLC's online Assurance System. HLC will begin transitioning institutions into the Assurance System in fall 2016.

- The Systems Portfolio should be between 115 and 125 pages, including an Institutional Overview, with no pictures or excessive white space. A Systems Portfolio that exceeds 125 pages will not be evaluated.

- Fonts should be easy to read (Times or Arial) and sized at a minimum of 11 points.

- Footers should include page numbers; headers should include the organization's name and current date (month and year).

- All tables and graphics should be labeled, numbered and easy to read with the data clearly marked. Text should refer to tables by their labels and/or numbers.

- Use a single voice—"we," "the College" or "the University"; avoid using passive voice.

- Be brief, succinct and direct.

- Check spelling and grammar.

Submitting the Systems Portfolio

1. Systems Portfolios are due on either June 1 or November 1. Reminders will be sent at least a month before the due date. Failure to submit the Systems Portfolio on time will delay the start of the review process, cause the Feedback Report to be late, and trigger a re-examination of the institution's participation on the AQIP Pathway. Contact the institution's HLC staff liaison immediately if difficulties arise.

2. If the Systems Portfolio is web-based, a 125-page (maximum) PDF version as well as a link to the online version must be provided.

3. Upload a PDF of the Systems Portfolio to the Dropbox folder HLC will share with the institution.

Following Systems Portfolio Submission

HLC Staff

HLC staff reviews the submission to ensure it is complete and does not exceed the page limit. The documents are then provided to the peer review team.

Peer Reviewers

The assigned peer review team receives the documents and begins the review process, called the Systems Appraisal. The team reviews each Category for Systems Maturity and for evidence the institution meets the Criteria for Accreditation.

Timeline

The review process takes approximately 12 to 15 weeks. The Accreditation Liaison Officer receives the peer review team's System Appraisal that documents the findings on the Categories and provides feedback on the evidence meeting the Criteria for Accreditation. No HLC action is taken.

Feedback

Each Core Component will be rated by the peer review team as being "Strong, clear and well-presented," "Adequate but could be improved" or "Unclear or incomplete."

Later, during the Comprehensive Quality Review for Reaffirmation of Accreditation, each Core Component will be evaluated as "Met," "Met with concerns" or "Not met." If at that time a Core Component is judged to be either "Met with concerns" or "Not met," that Criterion will be judged likewise and HLC follow-up will be recommended.

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Section 2: Systems Portfolio Structure and Questions

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)
- Determining common outcomes (3.B.2, 4.B.4)
- Articulating the purposes, content and level of achievement of the outcomes (3.B.2, 4.B.1)
- Incorporating into the curriculum opportunities for all students to achieve the outcomes (3.B.3, 3.B.5)
- Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs (3.B.4)
- Designing, aligning and delivering cocurricular activities to support learning (3.E.1, 4.B.2)
- Selecting the tools, methods and instruments used to assess attainment of common learning outcomes (4.B.2)
- Assessing common learning outcomes (4.B.1, 4.B.2, 4.B.4)

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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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)
- Determining program outcomes (4.B.4)
- Articulating the purposes, content and level of achievement of the outcomes (4.B.1)
- Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs (3.B.4)
- Designing, aligning and delivering cocurricular activities to support learning (3.E.1, 4.B.2)
- Selecting the tools, methods and instruments used to assess attainment of program learning outcomes (4.B.2)
- Assessing program learning outcomes (4.B.1, 4.B.2, 4.B.4)

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)
- Summary results of assessments (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of assessment results and insights gained

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

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)
- Identifying other key stakeholder groups and determining their needs (1.C.1, 1.C.2)
- Developing and improving responsive programming to meet all stakeholders' needs (1.C.1, 1.C.2)
- Selecting the tools, methods and instruments used to assess the currency and effectiveness of academic programs
- Reviewing the viability of courses and programs and changing or discontinuing when necessary (4.A.1)

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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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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)
- Evaluating and ensuring program rigor for all modalities, locations, consortia and dual-credit programs (3.A.1, 3.A.3, 4.A.4)
- Awarding prior learning and transfer credits (4.A.2, 4.A.3)
- Selecting, implementing and maintaining specialized accreditation(s) (4.A.5)
- Assessing the level of outcomes attainment by graduates at all levels (3.A.2, 4.A.6)
- Selecting the tools, methods and instruments used to assess program rigor across all modalities

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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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)
- Ensuring ethical learning and research practices of students (2.E.2, 2.E.3)
- Ensuring ethical teaching and research practices of faculty (2.E.2, 2.E.3)
- Selecting the tools, methods and instruments used to evaluate the effectiveness and comprehensiveness of supporting 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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

1I5   Based on 1R5, what process improvements have been implemented or will be implemented in the next one to three years?

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 academic and 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)
- Deploying academic support services to help students select and successfully complete courses and programs (3.D.2)
- Ensuring faculty are available for student inquiry (3.C.5)
- 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)

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- Determining new student groups to target for educational offerings and services
- Meeting changing student needs
- Identifying and supporting student subgroups with distinctive needs (e.g., seniors, commuters, distance learners, military veterans) (3.D.1)
- Deploying non-academic support services to help students be successful (3.D.2)
- Ensuring staff members who provide non-academic student support services are qualified, trained and supported (3.C.6)
- Communicating the availability of non-academic support services (3.D.2)
- Selecting the tools, methods and instruments to assess student needs
- Assessing the degree to which student needs are met

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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)
- Determining targets for student retention, persistence and completion (4.C.1, 4.C.4)
- Analyzing information on student retention, persistence and completion
- Meeting targets for retention, persistence and completion (4.C.1)
- Selecting the tools, methods and instruments to assess retention, persistence and completion (4.C.4)

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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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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)
- Determining new stakeholders to target for services or partnership
- Meeting the changing needs of key stakeholders
- Selecting the tools, methods and instruments to assess key stakeholder needs
- Assessing the degree to which key stakeholder needs are met

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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
- Collecting complaint information from other key stakeholders

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- Learning from complaint information and determining actions
- Communicating actions to students and other key stakeholders
- Selecting the 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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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)
- Building and maintaining relationships with partners
- Selecting the tools, methods and instruments to assess partnership effectiveness
- Evaluating the degree to which collaborations and partnerships are effective

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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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)
- Developing and meeting academic credentialing standards for faculty, including those in dual credit, contractual and consortia programs (3.C.1, 3.C.2)
- Ensuring the institution has sufficient numbers of faculty to carry out both classroom and non-classroom programs and activities (3.C.1)
- Ensuring the acquisition of sufficient numbers of staff to provide student support services
- Tracking outcomes/measures utilizing appropriate tools

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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
- Soliciting input from and communicating expectations to faculty, staff and administrators
- Aligning the evaluation system with institutional objectives for both instructional and non-instructional programs and services

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- Utilizing established institutional policies and procedures to regularly evaluate all faculty, staff and administrators (3.C.3)
- Establishing employee recognition, compensation and benefit systems to promote retention and high performance
- Promoting employee satisfaction and engagement
- Tracking outcomes/measures utilizing appropriate tools

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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)
- Ensuring that instructors are current in instructional content in their disciplines and pedagogical processes (3.C.4)
- 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)
- Aligning employee professional development activities with institutional objectives
- Tracking outcomes/measures utilizing appropriate tools

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)
- Comparison of results with internal targets and external benchmarks
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3I3 Based on 3R3, what process improvements have been implemented or will be implemented in the next one to three years?

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)
- Ensuring that institutional actions reflect a commitment to its values
- Communicating the mission, vision and values (1.B.1, 1.B.2, 1.B.3)
- Ensuring that academic programs and services are consistent with the institution's mission (1.A.2)
- Allocating resources to advance the institution's mission and vision, while upholding the institution's values (1.D.1, 1.A.3)
- Tracking outcomes/measures utilizing appropriate tools (e.g. brand studies, focus groups, community forums/studies and employee satisfaction surveys)

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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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)
- Aligning operations with the institution's mission, vision and values (5.C.2)
- Aligning efforts across departments, divisions and colleges for optimum effectiveness and efficiency (5.B.3)
- Capitalizing on opportunities and institutional strengths and countering the impact of institutional weaknesses and potential threats (5.C.4, 5.C.5)
- Creating and implementing strategies and action plans that maximize current resources and meet future needs (5.C.1, 5.C.4)
- Tracking outcomes/measures utilizing appropriate tools (e.g. achievement of goals and/or satisfaction with process)

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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)
- Establishing oversight responsibilities and policies of the governing board (2.C.3, 5.B.1, 5.B.2)
- Maintaining board oversight, while delegating management responsibilities to administrators and academic matters to faculty (2.C.4)

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- Ensuring open communication between and among all colleges, divisions and departments
- Collaborating across all units to ensure the maintenance of high academic standards (5.B.3)
- Providing effective leadership to all institutional stakeholders (2.C.1, 2.C.2)
- Developing leaders at all levels within the institution
- Ensuring the institution's ability to act in accordance with its mission and vision (2.C.3)
- Tracking outcomes/measures utilizing appropriate tools

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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
- Training employees and modeling for ethical and legal behavior across all levels of the institution
- 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.)
- Making information about programs, requirements, faculty and staff, costs to students, control, and accreditation relationships readily and clearly available to all constituents (2.B.)

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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
- Determining data, information and performance results that units and departments need to plan and manage effectively
- 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
- Ensuring the timeliness, accuracy, reliability and security of the institution's knowledge management system(s) and related processes
- Tracking outcomes/measures utilizing appropriate tools (including software platforms and/or contracted services)

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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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)
- Setting goals aligned with the institutional mission, resources, opportunities and emerging needs (5.A.3)
- Allocating and assigning resources to achieve organizational goals, while ensuring that educational purposes are not adversely affected (5.A.2)
- Tracking outcomes/measures utilizing appropriate tools

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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of 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?

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
- Monitoring financial position and adjusting budgets (5.A.5)
- Maintaining a technological infrastructure that is reliable, secure and user-friendly
- Maintaining a physical infrastructure that is reliable, secure and user-friendly
- Managing risks to ensure operational stability, including emergency preparedness
- Tracking outcomes/measures utilizing appropriate tools

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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)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

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

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

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.

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

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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
- Ensuring continuous quality improvement is making an evident and widely understood impact on institutional culture and operations (5.D.1)
- Ensuring the institution learns from its experiences with CQI initiatives (5.D.2)
- Reviewing, reaffirming and understanding the role and vitality of the AQIP Pathway within the institution

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.

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

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APPENDIX: CROSSWALK BETWEEN AQIP PATHWAY CATEGORIES AND CORE COMPONENTS OF THE CRITERIA

AQIP Pathway Categories: hlcommission.org/pathways/aqip-categories.html

Criteria for Accreditation: policy.hlcommission.org/criteria

Organized by AQIP Pathway Category	
IN CATEGORY...	**PROVIDE EVIDENCE FOR CORE COMPONENT(S)...**
1: Helping Students Learning	
1.1: Common Learning Outcomes	3.B., 3.E. and 4.B.
1.2: Program Learning Outcomes	3.B., 3.E. and 4.B.
1.3: Academic Program Design	1.C. and 4.A.
1.4: Academic Program Quality	3.A. and 4.A.
1.5: Academic Integrity	2.D. and 2.E.
2: Meeting Student and Other Key Stakeholder Needs	
2.1: Current and Prospective Student Need	3.C. and 3.D.
2.2 : Retention, Persistence and Completion	4.C .
2.3: Key Stakeholder Needs	NA
2.4: Complaint Process	NA
2.5: Building Collaborations and Partnerships	NA
3: Valuing Employees	
3.1: Hiring	3.C.
3.2: Evaluation and Recognition	3.C.
3.3: Development	3.C. and 5.A.
4: Planning and Leading	
4.1: Mission and Vision	1.A., 1.B., and 1.D.
4.2: Strategic Planning	5.B. and 5.C.
4.3: Leadership	2.C. and 5.B.
4.4: Integrity	2.A. and 2.B.
5: Knowledge Management and Resource Stewardship	
5.1: Knowledge Management	NA
5.2: Resource Management	5.A.
5.3: Operational Effectiveness	5.A.
6: Quality Overview	
6.1: Quality Improvement Initiatives	NA
6.2: Culture of Quality	5.D.

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Organized by Core Component

PROVIDE EVIDENCE FOR CORE COMPONENT...	IN CATEGORY(IES)...
Criterion 1. Mission	
1.A.	4.1: Mission and Vision
1.B.	4.1: Mission and Vision
1.C.	1.3: Academic Program Design
1.D.	4.1: Mission and Vision
Criterion 2. Integrity: Ethical and Responsible Conduct	
2.A.	4.4: Integrity
2.B.	4.4: Integrity
2.C.	4.3: Leadership
2.D.	1.5: Academic Integrity
2.E.	1.5: Academic Integrity
Criterion 3. Teaching and Learning: Quality, Resources and Support	
3.A.	1.4: Academic Program Quality
3.B.	1.1: Common Learning Outcomes 1.2: Program Learning Outcomes
3.C.	2.1: Current and Prospective Student Need 3.1: Hiring 3.2: Evaluation and Recognition 3.3: Development
3.D.	2.1: Current and Prospective Student Need
3.E.	1.1: Common Learning Outcomes 1.2: Program Learning Outcomes
Criterion 4. Teaching and Learning: Evaluation and Improvement	
4.A.	1.3: Academic Program Design 1.4: Academic Program Quality
4.B.	1.1: Common Learning Outcomes 1.2: Program Learning Outcomes
4.C.	2.2 : Retention, Persistence and Completion
Criterion 5. Resources, Planning and Institutional Effectiveness	
5.A.	3.3: Development 5.2: Resource Management 5.3: Operational Effectiveness
5.B.	4.2: Strategic Planning 4.3: Leadership
5.C.	4.2: Strategic Planning
5.D.	6.2: Culture of Quality

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