Board Policy:

Performance reports shall be prepared and presented to the Board for each of the ENDS. These ‘Monitoring Reports’ shall enable the Board to know the degree to which a reasonable interpretation of its ENDS and EXECUTIVE LIMITATIONS policies is being fulfilled. Consequently, the Board shall seek in the Monitoring Reports answers to two questions: (1) Has the College President made a reasonable interpretation of the Board’s policies; and (2) Do the data demonstrate accomplishment of that interpretation. Failing either constitutes a policy violation. In the Monitoring Report then, the Board should expect to see the College President’s interpretations along with justifications for the Board to find them reasonable. The Board must fairly, but rigorously, decide whether the College President’s case is convincing. Also in the report, the Board should expect to see data purported to demonstrate achievement of those interpretations. Again, the Board must fairly but rigorously decide whether the data credibly prove compliance.

Quality/Excellence Monitoring: Jackson College adheres to a model of continuous improvement and quality. The practice of integrating the power of accurate, reliable, valid and meaningful data into the planning, evaluation and budgeting processes and all other areas of the College is vital. Furthermore, the quality of such work must be verified. To that end, the following Key ENDS measures include:

- Accreditation Standing (i.e., Regional and Programmatic);
- HLC Action Project Progression;
- Compliance Report outcomes;
- Assurance Audit Reports;
- Application of promising evidence-based practices from the field, contextualized by the unique challenges and strengths of individual colleges;
- Evidence of practice reform (e.g., BMI, etc.);
- Normative data comparisons (e.g., Aspen, ATD, etc.);
- Use of institutional data in planning and decision making; and
- Other institutional recognitions;

Executive Summary

The journey of continuous quality improvement is a core element of the College’s culture and business model and, as such, is ongoing. Indeed, continuous quality improvement (CQI) is the responsibility of all of our employees. Considering external challenges and opportunities associated with CQI, we face issues related to increasing competition, the pace of change in our industry, potentially disengaged employees, ineffective practices, and possible change-fatigue. That said, there are many opportunities for us to excel including CQI training and related professional development, benchmarking, market research, new business model development, as well as college culture development.
The College remains in good accreditation standing with the Higher Learning Commission (HLC), its institutional accreditation. Additionally, we remain in good standing with secondary program accreditations and look forward to an onsite visit in June 2019 from the Commission on Accreditation for Respiratory Care (CoArc). Additionally, we are completing a progress report due to the Committee on Accreditation of Educational Programs for the EMS Professions (CoAEMSP) regarding the Emergency Medical Technician program. Following the recent decision of HLC to phase out the AQIP pathway, the College has been assigned to the Open Pathway with our next reaffirmation of accreditation occurring in 2027-28. A re-established Accreditation Committee began meeting in October 2018 with work under way for the College’s next Assurance Filing due in 2021-22. Finally, related to accreditation, the College submitted a requested Interim Report following the last onsite visit in February 2017 and is awaiting feedback.

We proudly introduced the new TCS2 report in November 2018, which provides progress updates on our 90/80/70 goals, as well as course completion and billing contact hours. This report is distributed monthly to the Board and employees. The College completed an application and was accepted into the HLC Assessment Academy, which provides a structured, mentor-facilitated program aimed at advancing and accelerating an institution’s efforts to assess student learning.

We successfully submitted all required compliance reports on time and with an increased focus on data validation this year. The Data Governance Committee has re-established a regular meeting and is focused on the quality of critical data, as well as the establishment and maintenance of a data dictionary and coding standards for compliance and operational reporting. The College engaged with ASR Analytics, who visited campus last month, to complete an assessment to determine the current state and future opportunities for improvement with respect to implementation of business intelligence (BI) practices at the College.

For the ensuing 12 months, we are looking forward to taking our journey with CQI to the next level. Specifically, we will be developing a quality improvement plan, which will be led by the Institutional Effectiveness Office; two Jackson College employees will undergo Peer Reviewer training with HLC; and the establishment of a work group to move ahead recommendations resulting from the ASR Analytics assessment will be undertaken.

Institutional Context

Jackson College is focused on continuous quality improvement (CQI). Our employees are actively engaged in a culture of innovation and are provided professional development opportunities which encourage continual improvement. Quality improvement is not just the responsibility of one department, but is needed across campus. Whether in Institutional Effectiveness when reporting internal or external data, in Student Services or Academics, we all play a role in quality and excellence. CQI is
one of the six key performance areas on the College’s Strategic Agenda, which clearly communicates to employees and the community that this is an institutional priority.

**External Context**

Jackson College is no different from other organizations who are on a continual quality improvement journey. Although we have the honor of being repeatedly benchmarked against, we also continually pursue new operational and learning opportunities. We seek out advice from other colleges, such as Odessa College and their 7-week semesters or customer service training from Disney. Below are some of the key challenges and opportunities identified:

**Challenges/Threats:**
- Increasingly competitive environment
- Escalating technological advancement
- Reduced cycle times
- New marketplace entrants
- Rising customer expectations
- Business model dynamics
- Lack of training in CQI
- Change-fatigue
- Potential employee disengagement

**Opportunities:**
- Professional development accessibility
- CQI tools
- Increased focus on innovative culture on campus
- Benchmarking other organizations
- Board-Owner linkage information
- Improved data analytics and business intelligence practices

**Institutional Performance Reporting**

**Accreditation Standing**

Jackson College remains in good standing with the Higher Learning Commission (HLC). At any point, one can view the College’s [Statement of Accreditation Status](#) on the website. In addition to the institution level accreditation, we maintain 16 [program level accreditations](#). In June 2019 there will be an onsite visit from the Commission of Accreditation for Respiratory Care (CoArc). We are also working on a progress report due to the Committee on Accreditation of Educational Programs for the EMS Professions (CoAEMSP) for the Emergency Medical Technical program. That program also has a self-study due in October 2019, on which we are also currently working. This year, our Medical Assisting program received a very positive accreditation report from
the Commission on Accreditation of Allied Health Education Programs, which granted the program continuing accreditation through 2028.

Open Pathway
In June 2018, HLC announced that they are phasing out the AQIP Pathway, the College’s current accreditation methodology, based upon the principles of the Malcolm Baldrige National Quality Award. On September 1, 2018, Jackson College was designated as accredited by the HLC under the Open Pathway methodology, a 10-year affirmation process. We were placed into this preferred Open Pathway methodology based upon our level of work. The Open Pathway is unique in that its improvement component, the Quality Initiative, affords institutions, like ours, the opportunity to pursue improvement projects that meet their current needs and aspirations...so there is a fair amount of similarity to our past practice. The next opportunity for pathway determination will be at our next reaffirmation of accreditation in 2027-28.

Accreditation Committee
An employee-based committee of 14 individuals was created and began meeting in October 2018. Each member of the committee went through a selective process to ensure they understood the aptitude of work needed and the level of involvement expected. The committee has begun working on preparing arguments for the Assurance Review that will be due in 2021-22.

HLC Interim Report
As a result of our onsite visit in February 2017, the College was asked to prepare an Interim Report on Criterion 4 (i.e., Academic Program Review), including the mapping of course prerequisites and learning outcomes across the curriculum, as well as the full implementation of assessment of student learning across the curriculum. Addressing the site team’s areas of concern, our report provided evidence that our program review process has restarted; program outcomes are in place; curriculum mapping and assessment are completed and accessible and improvement plans for non-secondarily accredited programs are developed. This report was completed and submitted on time. We are still awaiting response from the Commission on this report.

TCS2 Report
In collaboration, the Office of Information Technology and the Office of Institutional Effectiveness worked hard to develop the TCS2 Report (see Appendix B) which was released to the Board in November 2018. With TCS2 being the institutions top priority, we created a report that would hold the College accountable for achievement of our 90/80/70 goals. Each month this report is distributed to the Board, as well as the entire Jackson College community. There is complete transparency in relation to the goals of 90% fall to winter retention, 80% fall to fall retention and 70% completion rates. In addition to these measurements, this report also provides course success rates and billing contact hour progress. Report components were presented and discussed at Data Governance Committee meetings as well to ensure data definition alignment and to ensure an inclusive process was followed.
Assessment Academy
A central aspect of our commitment to student success is a critical focus on student learning. To support building a focus on student learning at Jackson College, and in light of HLC’s request for an interim report related to our program learning outcomes, the College applied for, and was accepted into, the HLC’s Assessment Academy. The Academy provides a structured, mentor-facilitated program aimed at advancing and accelerating an institution’s efforts to assess student learning. Our Academy Team has focused its work on strengthening our program learning outcomes. By design, this work will support and advance many of our student success initiatives, including Guided Pathways, 7-week terms, aligning degrees with industry-recognized credentials, and Competency-Based Education (CBE). A new and improved curriculum matrix tool has been developed by our Academy team and will be used for the 2019-2020 program review cycle. An overview of the Jackson College Assessment Academy work including timeline of goals, glossary, team members and resources can be found online.

Compliance Report Outcomes
Each year the College completes 47 external required compliance reports. All compliance reports have been submitted on time and with a high level of accuracy. One area of focus, over the last year, has been improvement of reporting efficiencies, with the goal of decreasing time spent on the process of creating reports gathering correct data and arriving at conclusions. Justin Gaeta, Coordinator of Institutional Effectiveness, has been documenting processes, establishing data definitions and business rules. Additionally, SPSS (software) has been established as the tool of choice for Institutional Effectiveness data work, which has led to significant time savings.

Data Governance Committee
With turnover and limited staffing, there was a lapse in IE meetings over the last year, however, the committee has now resumed their regular meetings. The purpose of the Data Governance Committee includes ensuring the quality of critical data, establishment and maintenance of a data dictionary and coding standards for compliance and operational reporting; and providing counsel to institutional ‘super users’ with appropriate use of data. In addition to the TCS2 report, additional agenda items this past year have been identification of student primary programs and primary pathway; and identifying staff for training to ensure student types are not overwrote incorrectly which can incorrectly impact billing charges.

ASR Analysis for Business Intelligence
The College recently engaged with ASR Analytics to undertaken an institutional assessment to determine the current state and future opportunities for improvement with respect to the implementation of business intelligence (BI) at the College. An ASR team spent two days on campus in February meeting with over 15 groups of employees to gather information for the assessment. The assessment model explored critical success factors in the areas of people, process and technology for the successful use of reporting and analytics. ASR will be on campus the end of April to present their findings and recommendations for improvement. We plan on establishing a working group to
advance BI once we receive these recommendations, as we want to ensure we do not lose traction on these opportunities for improvement.

Goals for the Next 12-Month Period

Develop a Quality Improvement Plan
With less staff and limited financial resources, now more than ever we must be looking at the organization through the lens of Lean Thinking. Institutional Effectiveness will be conducting research and developing a plan with the goal of streamlining processes, while improving quality.

HLC Peer Corps Training
As part of the Accreditation Committee work, having employees on staff who are trained as peer evaluators for the Higher Learning Commission will be extremely beneficial. This opportunity will broaden perspective and experience and bring new ideas back to Jackson College. In addition, this is also an opportunity for our employees to serve colleague schools while adding significant value in the process of assuring and improving quality in higher education. To become a peer reviewer, there is an application and training process. As of this, two employees, Sara Perkin and Dr. Stephen Young have been accepted into the next Peer Reviewer training program, which will be in the fall 2019. These peer reviewers will stand in addition to Dr. Phelan and Dr. Walraven, who are long-standing peer-reviewers for HLC. We will continue to encourage our employees to apply for this opportunity.

Establishment of Work Group for ASR Recommendation Implementation
After we receive recommendations from ASR Analytics, a work group will be formed to ensure the work continues. This group will be responsible for taking the recommendations and determining how they can become effectuated at the College. They will bring forward budget recommendations and pull together employees as needed to move this work forward.

Conclusion/Judgment

Improvements have been made over the last year, specifically related to accreditation planning and increasing efficiencies with compliance reporting. The College acknowledges that there is a Data Governance Committee in place and we are looking forward to improvements with data definitions and documentation of processes. We are also aware that there is still areas of weaknesses to address, hence the desire to engage with ASR Analytics for a BI assessment. With a stable Institutional Effectiveness Department and positive culture of the College, we are confident that we can continue in this journey on continuous quality improvement.
Appendices

Appendix A: External Content Resources

https://www.processexcellencenetwork.com/lean-six-sigma-business-performance/articles/five-barriers-to-continuous-improvement-vote-for-t
http://www.phf.org/phfpulse/Pages/Top_Problems_Encountered_By_QI_Teams.aspx
https://leankit.com/learn/kanban/6-continuous-improvement-tools-and-techniques/
https://www.lean.org/WhatsLean/

Appendix B: TCS2 Report

### Fall 2018 Cohort Retention Rates

<table>
<thead>
<tr>
<th>Headcount</th>
<th>Fall 2018 Cohort</th>
<th>Retained to Winter 2019 or Graduated</th>
<th>Retained to Fall 2019 or Graduated</th>
</tr>
</thead>
<tbody>
<tr>
<td>5,055</td>
<td>3,956</td>
<td>90.00%</td>
<td>80.00%</td>
</tr>
<tr>
<td>Retention Goal</td>
<td></td>
<td>78.26%</td>
<td></td>
</tr>
<tr>
<td>Percent Retained</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Variance between Retention Goal and Actual</td>
<td></td>
<td>-11.74%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cohort Graduates</th>
<th>Percent of Fall 2018 Cohort</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 2018</td>
<td>174</td>
</tr>
<tr>
<td>Winter 2019</td>
<td>0</td>
</tr>
<tr>
<td>Spring 2019</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>174</td>
</tr>
</tbody>
</table>

*The Fall 2018 Cohort excludes Guest Students and non-credit enrollments.
**Includes Cohort students graduating in Fall 2018.
***Includes Cohort students graduating in Fall 2018, Winter 2019 or Spring 2019.

### Fall 2017 Cohort Retention Rates

<table>
<thead>
<tr>
<th>Headcount</th>
<th>Fall 2017 Cohort</th>
<th>Retained to Winter 2018 or Graduated</th>
<th>Retained to Fall 2018 or Graduated***</th>
</tr>
</thead>
<tbody>
<tr>
<td>5,281</td>
<td>4,008</td>
<td>90.00%</td>
<td>80.00%</td>
</tr>
<tr>
<td>Retention Goal</td>
<td></td>
<td>75.89%</td>
<td>55.63%</td>
</tr>
<tr>
<td>Percent Retained</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Variance between Retention Goal and Actual</td>
<td></td>
<td>-14.11%</td>
<td>-24.37%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cohort Graduates</th>
<th>Percent of Fall 2017 Cohort</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 2017</td>
<td>170</td>
</tr>
<tr>
<td>Winter 2018</td>
<td>316</td>
</tr>
<tr>
<td>Spring 2018</td>
<td>144</td>
</tr>
<tr>
<td>Total</td>
<td>630</td>
</tr>
</tbody>
</table>

*The Fall 2017 Cohort excludes Guest Students and non-credit enrollments.
**Includes Cohort students graduating in Fall 2017.
***Includes Cohort students graduating in Fall 2017, Winter 2018 or Spring 2018.
TCS2 Report - Course Success
AY 19 (2018-19) = September, 2018 to August, 2019

Report Last Refreshed 3/7/19

College Level Course Success for 2018-2019

College Level Course Success by Term

Developmental Course Success for 2018-2019

Developmental Course Success by Term

- Pass includes grades of 2.0 and higher, or a Passing (P) grade.
- Fail includes grades of less than 2.0, or a Failing (F) grade.
- Withdrawal is a Grade of Withdraw (W).

<table>
<thead>
<tr>
<th>Semester</th>
<th>Headcount</th>
<th>Credit Hours</th>
<th>Billing Contact Hours (BCH)</th>
<th>% of Total BCH</th>
<th>Semester BCH Goal</th>
<th>% of Semester BCH Goal Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 2018</td>
<td>5,217</td>
<td>45,890.00</td>
<td>49,171.42</td>
<td>48.03%</td>
<td>53,168.00</td>
<td>92.48%</td>
</tr>
<tr>
<td>Winter 2019</td>
<td>5,038</td>
<td>43,030.50</td>
<td>46,111.22</td>
<td>45.05%</td>
<td>49,424.00</td>
<td>95.19%</td>
</tr>
<tr>
<td>Spring 2019</td>
<td>916</td>
<td>6,652.00</td>
<td>7,083.50</td>
<td>6.92%</td>
<td>16,540.01</td>
<td>42.83%</td>
</tr>
<tr>
<td>Total:</td>
<td>11,171</td>
<td>95,572.50</td>
<td>102,366.14</td>
<td>100.00%</td>
<td>118,150.01</td>
<td>86.64%</td>
</tr>
</tbody>
</table>

Billing Contact Hours by Course Location

1Courses with No Location or Other have been removed from the results.

2Jackson County location primarily includes sections at the Jackson College Elmont Center, clinical sites, Jackson Area Career Center and Jackson county high schools.