# Joliet Junior College

HLC ID 1103

AQIP: AQIP Pathway Systems Appraisal                    Visit Date: Not Set

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# 1 - Reflective Overview

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

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

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

**Instructions for Systems Appraisal Team**

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

## Evidence

A member of AQIP since 2000, Joliet Junior College is the first public community college in America, serving its community since 1901. That community is an ICCB district southwest of Chicago that includes seven counties with 700,000 community members. JJC is the only public college in the district, and it serves 30,000 credit and 15,000 non-credit students with 59 associate degree programs and 127 certificate programs with a focus on academic transfer, occupational education, ABE/GED, continuing education, and personal enrichment. These opportunities are provided by 1,400 full and part-time personnel and a full range of support services. The College took a proactive approach to the appraisal of its last portfolio, initiating seven Action Projects and identifying six challenges that provide it with opportunities for future growth and improvement.

Joliet has taken to heart a basic element of CQI practices – the PDCA cycle – by creating Annual Program Updates (APU) for each of its operating units that communicates up the administrative chain how those units are improving each year. In addition to the APU each year, those units provide ICCB with a Program Review every five years. These reporting cycles then provided evidence-based documentation of not the operation of the units, but data to support decision making within the units and the subsequent reporting units. This process also applies to faculty who, in addition to the APU, review five years of academic program and course data from which to make improvements.

**1 – Helping Students Learn**

The College views its processes for this critical Category as being Systematic in nature, with the majority of these processes being documented either in Board policy or in handbooks. JJC

recognizes some faculty fail to recognize the relationship of the institutional Strategic Plan to academic program planning; consequently increased emphasis is being placed on accountability and professional development.  Three specific priorities have been established for processes within APU, and a new Action Project is focusing on easing the transition from high school to college.  The College implemented an additional action project in response to feedback from the last systems appraisal. This second action project identified issues with assessment of general education outcomes.

**2 – Meeting Student and Other Key Stakeholder Needs**

No mention is made of the APU reporting process in this Category, which JJC views as having a Systematic level of maturity.  That process may well be in place, and could assist the College in the opportunities it details in this Category Overview:

- diversity and inclusion (even though inclusion is part of the College mission),
- addressing accountability requirements,
- implementation of a Title III grant,
- institution-wide collaboration processes,
- and graduation pathways.

Little is said of how student and stakeholder needs are identified, how they are prioritized, and how they are addressed. The College's 2013 System Appraisal identified concerns with student engagement and student enrollment. An action project was implemented to address these concerns.

**3 – Valuing Employees**

The College appears to have well established hiring processes and recognizes opportunities in performance management.  Consequently, it sees its processes and results for Valuing Employees as being at the Systematic level of maturity.  Action Projects at the College have addressed other opportunities in this area, and three priorities have been clarified for the future. They are:

- Assessing and improving recruitment and retention of diverse staff and faculty.
- Supporting and compensating staff and faculty.
- Improving systems used to evaluate employees.

**4 – Planning and Leading**

For an institution that appears to have a strong grasp of CQI fundamentals with its APU, little is noted in the Overviews for Categories 4, 5, and 6.  The College's new president is evidently making some strides in documenting processes, specifically policies and procedures for the Board of Trustees. Personnel acknowledge the receipt of handbooks as significant in the context of regular review of all college policies and procedures. There is also an indication the College is seeking to strengthen its position in the community.  JJC sees its Planning and Leading processes as being Systematic.

**5 – Knowledge Management and Resource Stewardship**

There is evidently an issue at JJC with accessing program data from its computer system, though Knowledge Management is viewed as being at a Systematic level of maturity due to how well the Knowledge Management system is run.  And yet, the College recognizes that, while it has an abundance of data, it has not utilized that data to create a standard method for measuring institutional performance.

**6 – Quality Overview**

For an institution that appears to have a strong grasp of CQI fundamentals with its APU, little is noted in the Overviews for Categories 4, 5, and 6.  JJC took a proactive approach to previous appraisal and visit feedback by initiating several Action Projects which created key new processes and structures within the institution:

- shared governance.
- data stewardship.
- strategic planning.
- program improvement.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 2 - Strategic Challenges Analysis

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

**Instructions for Systems Appraisal Team**

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

## Evidence

This portion of the appraisal is typically used to as a mirror to help the institution identify common themes that may be acting as barriers for continued growth and success. In this case, the review team wishes to draw the institution's attention to defining success as maintaining accreditation and retaining the option to choose accreditation pathways.

**Strategic Challenge - Prioritizing Accreditation Reaffirmation**

As presented in this portfolio, clear evidence supporting the accreditation core-components was more difficult to identify than necessary. There are 21 total core-components. This review team's assessment resulted in five core-components ranked as "Adequate - but could be improved" and one other as "Unclear." There were at least three additional core-components that were ultimately ranked as "Clear," but only after considerable deliberation to determine if "Adequate" was a more accurate assessment. In all cases, the limiting factor was a lack of clear evidence as presented by the institution. The review team offers a more detailed analysis of the evidence offered under "Accreditation Evidence Screening Summary."

Steps toward presenting clear evidence include coordinating an effective articulation of processes and systematic use of data to reflect the effective use of the Plan-Do-Check-Act cycle. An effective use of data can include the use of targets and measures for individual processes that map to targets and measures that support the institutional plan. While the institution shows many cases of Planning and Doing, it is less clear that the institution reliably Checks to inform its next Act. It is also not clear the institutional leadership understands how to provide the necessary context to reliably direct many different PDCA cycles toward an institutional goal. Demonstration of a system such as this would have addressed many of the review team's concerns.

As the College considers how to more effectively use data, it may be useful to consider two very different types of data that can be collected. Both are useful. Some data types will be useful to monitor compliance rates with a process while other data will be useful in monitoring how effectively

the process fulfills its purpose of supporting the College's mission and strategic plan. Compliance data demonstrate how pervasively a process is used and establishes that the effectiveness data can have institutional relevance. The effectiveness data determine if the process is actually successful if used regularly. Neither type of data was consistently used in the writing of this portfolio, which leaves questions in the reviewer's minds if data are actually being used for effective decision making.

**Strategic Challenge - Portfolio Organization and Completeness**

A consistent question during the review team's deliberations was if the AQIP pathway is a good fit for Joliet Junior College. This question was primarily raised due to how the portfolio was written. Given that the College is midway through its accreditation cycle, the appraisal team recognizes the institution has an opportunity to effectively present itself in the end-of-cycle systems portfolio. Please consider the guidance presented under "Quality of the Systems Portfolio" as a strategic concern when developing the end-of-cycle systems portfolio.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 3 - Accreditation Evidence Screening Summary

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

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

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

**Instructions for Systems Appraisal Team**

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

## Evidence

The College may be well served to review HLC documents regarding evidence for the criteria and core components. As an AQIP institution, the College uses its Systems Portfolio for identifying the foundation of how it meets the accreditation criteria. The degree to which the portfolio provides a cohesive and complete description of institutional practices influences the reviewers ease in finding evidence that the College meets the accreditation criteria and core components.

HLC's resource on providing evidence for the criteria identifies three types of evidence - clear, corroborating, and circumstantial. Clear evidence is always the goal. In general, this portfolio provides inconsistent circumstantial evidences and scattered corroborating evidence.

This appraisal's evaluation of evidence is intended to communicate where evidence was either missing, not of sufficient quality, or not clearly identified for the appraisal team. The most convincing

evidence is not found in any single data report, but rather in an integrated set of data reports that illustrates deliberateness, consideration and care of informed decision making. Such a system of reports was not presented in this portfolio, and this absence places the College at a significant disadvantage.

**Criteria 1: Mission**
Joliet Junior College demonstrates through its systems portfolio a clear commitment to its community and students through its mission, vision, and values statements. The mission, vision, and values statements provide the College a framework for strategic planning, a means of identifying when it is successful, and a check to assure that it maintains good standing within its service area and academic community.

**Criteria 2: Ethical and Responsible Conduct**
Joliet Junior College is governed by a Board of Trustees that assures the College conducts itself ethically and responsibly. This is accomplished by Board and Institutional by-laws, employee manuals, and is also incorporated into faculty work contracts. Students are expected to demonstrate ethical behavior. These standards are reinforced through syllabi and instruction.

**Criteria 3: Teaching and Learning: Quality, Resources and Support**
Joliet Junior College has processes in place to ensure the quality of its curriculum. However, as presented in the portfolio, clear evidence begins to wear thin in this area. The evidence provided in the portfolio could be described as corroborating or circumstantial. Clear evidence is explicit, precise, and direct. Corroborating evidence might might take the form of examples, but falls short of demonstrating the pervasiveness of processes within an institutional culture. Circumstantial evidence supports only through inference. The evidence gathered in the portfolio is barely strong enough to be adequate and could be stronger with a better presentation of institutional practice.

**Criteria 4: Teaching and Learning: Evaluation and Improvement**
Joliet Junior College has processes in place to assure that student learning outcomes are clearly identified and that their purpose and level of achievement are well defined. The College also has processes in place to support assessment of student learning regarding these outcomes. The College, however, has not provided clear evidence that these processes are actually followed and the information gathered from the assessment activity informs changes in curriculum and pedagogical approaches.

**Criteria 5: Resources, Planning and Institutional Effectiveness**
Joliet Junior College has processes in place to assure planning and allocation of resources. These processes have not been well defined and frequently fall short of direct evidence. Many of the processes provide circumstantial evidence that suggests appropriate practices. The processes are supplemented with examples that corroborate the described processes. Direct systematic evidence is frequently missing.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 4 - Quality of Systems Portfolio

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

**Instructions for Systems Appraisal Team**

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

## Evidence

In the spirit of assisting the College's improvement efforts, the review team offers the following observation. It is the review team's hope that these comments are received in the spirit of identifying what may be the institution's biggest barriers in meeting the standards associated with an end-of-cycle comprehensive evaluation.

The College is clearly engaging in sound activities that support its mission. This being recognized, it is also necessary to observe the overall quality of the portfolio is poor because it does not generally present these productive activities in an appropriate CQI context for AQIP. This appraisal is just one formative review that the College will undergo during this accreditation cycle. The appraisal team expresses concerns regarding the overall quality of the portfolio and its reflection of the College's ability to contextualize its activities in the AQIP / CQI framework.

As a document submitted to maintain accreditation, one purpose of writing the portfolio is to illustrate that the College internally recognizes the expectations of its self-selected accreditation process. The deliberate recognition of key processes is, in itself, an assurance that these processes may be deliberately fostered and improved. In this respect, this portfolio falls short as written and submitted.

**Clarity**

The portfolio portrays the College as failing to understand and implement the processes requested in several parts of the portfolio. This is most frequently noted in treatment of data summaries, comparisons and interpretations. Process areas of the portfolio were also skipped or glossed over by combining multiple processes. Institutions have the latitude to address multiple processes in a single response, but that does not relieve the College of crafting a complete response. In too many cases, the College's blanket responses fail to provide necessary detail. These poorly addressed portions of the portfolio left the reviewing team searching for relevant information on behalf of the College. In a few cases, the searches were fruitful. Most often they were not. With either outcome, the reviewing team was left with the overwhelming impression the College has little clarity regarding how its practices

match the the AQIP System Portfolio's expectations.

**Data**

As written, the portfolio portrays the College in an overwhelming struggle to implement processes. This struggle has made the systematic <u>use</u> of data secondary to the systematic <u>collection</u> of data. Without a meaningful use of the collected data, the collection process is unlikely to be valued or even maintained by those charged with process improvement.

Within the portfolio, data presentation should provides the reviewer with both a sense of how widely the process is implemented and how the process is tied to an institutional goal. In this portfolio, it was rare that either of these standards were met. Most of the data presented in the portfolio amounted to examples of data collected and did not convey either the pervasiveness of practices or how it measures process effectiveness.

Subcategories of the portfolio follow the same general template:

1. process description
2. selecting tools for tracking processes
3. summarize data
4. comparing data
5. interpreting data

This series of prompts provides a template for illustrating a complete assessment cycle on one broad facet of institutional operation. As such, there should be an identifiable narrative thread woven from one prompt to the next within a single subcategory. This holds particularly true for items 2-5. The selection of tools should be linked to the processes identified in the earlier prompts and the data summary should be drawn from the tools identified in item 2. Comparisons to internal/external goals should be made from the data provided in the summaries for item 3. It is frequently possible to summarize and show comparisons in the same illustration. Interpretations should be logically associated with the summaries and comparisons and illustrate how the institution gains insight to its operations.

The reviewers found that tools used to track did not always connect to the processes described; summaries did not reflect the tracking tools; comparisons and reflective interpretation were often absent.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 5 - AQIP Category Feedback

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

# I - Helping Students Learn

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

**Instructions for Systems Appraisal Team**

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

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

## Evidence

### CATEGORY 1: HELPING STUDENTS LEARN

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

### 1.1: COMMON LEARNING OUTCOMES

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

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

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

    Reacting

    The College has a clear history of working to identify common/general education student learning outcomes, including membership in the HLC Assessment of Student Learning Academy. There is no discussion in the portfolio relating common student learning outcomes to the institutional mission, its educational offerings, and its degree levels, which may indicate Joliet is at the beginning or reacting level of maturity in this area. There is little indication of implementation of effective practices. For these reasons the process is ranked as reacting.

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

    Systematic

    Joining the Assessment Academy in 2008, the College utilized a group of 45 faculty members to create an initial draft of Joliet general education outcomes. That group used the Illinois Articulation Initiative General Education Core Curriculum requirements and previous work done both at Joliet and other institutions to create the initial general education outcomes. Those six outcomes were vetted by the full-time faculty and staff in the spring of 2009. The work to achieve this commonly understood goal was coordinated across the institution, indicating a Systematic level of maturity.

    The College is making progress toward aligned. The College has demonstrated that its approach is generally understood within the College, is repeatable and documented, and has identified activities within the process that are explicit, measurable, and subject to improvement. The established learning outcomes are published in the CurricUNET system.

    As this process has matured, there is an indication of institutional silos eroding and coordination across the institution. While the described process includes appropriate stakeholders, it is less clear which campus offices and committees are responsible for continued review of the outcomes or the planned frequencies of these reviews. SLC would seem to be a natural fit for this role, but SLC's charge appears to limited to student learning assessment and does not appear to include revision of general education outcomes.

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

    Once the general education outcomes were established and accepted, the College's Student Learning Committee (SLC) assumed responsibility for creating the assessments of those outcomes. The SLC is also responsible for ensuring the same high quality of instruction across all modalities of course delivery. Rubrics serve a dual purpose of both articulating standards and acting as an assessment tool for the general education outcomes. Inter-rater reliability of the rubric was measured. For these reasons, this process is at a Systematic level of maturity.

The rubrics identify the competency, the target percentage who will meet a standard score, the assessment year and results, and the definitions of the scores. For instance, for the assessment of Written Communication in FY13, 78% met the target of 90% to achieve a score of 3 or 4 (out of 4) in Diction and Sentence Structures. In FY 2016, that number dropped to 72%. JCC continues to review its general education outcomes and assessment practices.

On multiple occasions, the College has used a process to review and revise the rubrics for assessment of student learning. The event that triggers revision of a rubric was not stated. In practice, it appears that rubrics are revised each time they are used to assess student learning. The standards for an "acceptable" rubric were not articulated.

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

    Systematic

    The faculty identify the general education outcomes associated with its course and the course-embedded opportunity to assess the outcome(s). The association is identified in the course syllabus and approved by the department chair and dean. The curriculum committee is notified of changes in a course's outcomes. For these reasons, the process is at a Systematic level of maturity.

    It is not stated how frequently faculty are expected to revisit these associations or the percent of college-level courses with an association to general education. These results were, however, hinted at, with references to the relative rates of participation regarding different general education courses, with the communication outcome being the most frequent association and cultural understanding outcome being the least frequent association.

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

    Reacting

    The College does not address this process, so it is identified at a Reacting level of maturity.

    The College should consider the importance of aligning with the Illinois Articulation Initiative General Education Core Curriculum requirements, which may be a means to articulate the relevance of general education with student, workplace and societal needs. Identifying the ways in which the College confirms that these guidelines are appropriate for its students could be noted.

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

    Reacting

    The College did not address the processes requested in this prompt, so it is assessed at a Reacting level of maturity. The College response was that general education outcomes are not assessed in co-curricular activities.

    The prompt did not request information regarding assessment of outcomes in a co-curricular setting, but rather where the College outcomes are deliberately used in a co-curricular setting

to reinforce student learning outside of the classroom. Examples may include activities such as the ones described below:

> Career and Employment Services may offer resume writing and interview skill development. This reinforces written and oral communication. Measures taken by the institution to help students transfer their communication skills from the classroom to these new situations may be documented here. How do Career and Employment Services staff use language used in composition courses and speech courses as a means to help students identify appropriate standards?

> An umbrella approach is used for all athletic teams that foster multi-cultural understanding between demographically diverse team members.

> Student groups, such as fiction writing, are tightly aligned with a general education outcome. Student workers may be expected to use information literacy or oral communications in their roles.

The individual activities do not constitute a process, but internally identifying the need to support student learning in a co-curricular setting and taking deliberate steps to address the need can build a process.

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

  Systematic

  A faculty task force identified the indicators and rubrics for each of the six GEOs, largely adapting them from the AACU's LEAP/VALUE rubrics. These indicators/ rubrics were communicated to the Joliet faculty through online surveys, which were deemed to be effective. This process is at a Systematic level of maturity because it is reproducible.

  The use of AACU's LEAP/VALUE rubrics and gathering faculty input during the design of the rubrics can both be considered as selecting tools, methods and instruments by identifying best practices and developing faculty buy-in for the meaningfulness of the assessment tool. The institution did not, however, identify that these guides were the driving principles behind this process. Stating goals or principles such as these may help the College identify the goals behind its processes and subsequently open avenues to determining if its processes were successful.

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

  Systematic

  The College's processes for assessing common learning outcomes include the use of rubrics for most the general education outcomes. The processes are aligned with selecting the tools, methods and instruments used to assess. GEOs are assessed on a three-year rolling schedule. Faculty are notified when their GEOs are to be assessed. Instructions are provided for administering, scoring and reporting data. In addition to rubric scores, faculty may also indicate common issues pertaining to a specific rubric indicator. For these reasons, this process is at a Systematic level of maturity.

  The College should be wary of bogging down direct assessment of student learning

by letting "the perfect become the enemy of the good." The rubrics have undergone multiple and time-consuming revisions and not yet established a track record of accomplishing the purpose of developing the rubrics - student assessment. The College may benefit from focusing on assessing student work and improving student learning rather than continually revising the rubrics. Once this cycle has been established, the introduction of a new or altered rubric may not be as disruptive to the assessment cycle.

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

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

  Systematic

  The College has identified systematic means of collecting and reporting their GEO assessment data.This process is ranked as minimally systematic because there is a means of collecting the primary data regarding student learning. Other measurements to monitor progress within the system will help to place this process firmly within a Systematic level of maturity.

  The reported information includes appropriate qualifiers such as target scores, results, sample size and response rate. Interpretation of trends was not readily accessible to indicate that the College itself is concerned with this type of data tracking. The data was not graphically presented to show trends over time where possible, and given the interruptions in the 3-year assessment cycle, trending data may not be available.

  While a primary interest is student performance, the processes outlined in this section also lend themselves to be assessed for effectiveness.

    If the College looks to the Illinois Articulation Initiative General Education Core Curriculum as a guide, comparing the expectations of AIGECC to JJC's general education outcomes may help identify skills uniquely valued by JJC as well as gaps.

    It may be useful to track the percentage of courses that have been associated with at least one GEO. This will provide a measure of faculty participation with the assessment process. GEOs that are not associated with a large percentage of courses may not truly be a learning outcome that is common to all. The College may need to decide if they wish to spend resources promoting this skill and use the percentage of associated courses as a metric of improvement or consider removing the skill from its list of GEOs.

    It may be useful to track the percentage of general education outcomes that are associated with a particular rubric.

    It may be useful to track how closely the College is able to keep to its 3-year assessment cycle and identify the barriers to meeting that schedule.

  All of these measures of process are simply a means of staying on track so that student performance can be determined.

- Comparison of results with internal targets and external benchmarks

    Systematic

    These results are at systematic level of maturity despite having no external comparisons available. The College has adopted rubrics based on the AAC&U LEAP VALUE system. The College has internal targets in place, yet there is a means to obtain comparisons with other institutions using this system of rubrics.

- Interpretation of results and insights gained

    Reacting

    The College has identified major issues that stand in the way of its ability to fully assess the GEOs. These include:

        Inclusion of more courses associated with GEOs.

        Finding a means of using the assessment data to improve student learning.

        Developing rubrics that can be used consistently from year-to-year.

    While these problems have been identified as growth areas for continued progress with general education assessment, the College does not describe the insight that has led them to believe that the proposed solutions address the impediments in this area. For this reason, this interpretation is at the Reacting level of maturity. The current plan is that the College has identified a group of five faculty who are charged with providing a number of recommendations that will help build a productive assessment infrastructure.

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

What appeared to be a solid, clearly established PDCA process for identifying and assessing GEOs at Joliet also appears to be in need of strong leadership to provide the necessary support and encouragement for Joliet faculty to participate. This support is necessary to provide the data necessary to deliver decision-makers with information on which to determine the ongoing viability of each of the GEOs. It is almost ten years since this process began, and yet appropriate assessments are still being determined, the cycle of these assessments is still unclear, and a special team of assessment leaders has been formed to assist the SLC in the administration of the GEOs.

The College started on the AQIP Pathway in 2000 and began researching general education assessment in 2006. The College entered the HLC Assessment Academy in 2008 and identified general education outcomes by Spring 2009. Starting in Spring 2009, rubrics were developed and vetted. Assessment of student learning started four years later.

This assessment activity has resulted in measures of student learning for each general education area and numerous rubric revisions. The rubrics associated with written and oral communication appear to be sufficiently vetted for continued use with hopes of producing trending data. The remaining rubrics were expected to be revised through fall 2018.

The three-year rolling plan for assessing general education outcomes that was established in 2013 is not expected to continue on schedule.

> *"The remaining GEOs will likely undergo revisions to their indicators, rubrics, and definitions, which will be conducted during spring semester 2018 and fall semester 2018. Until those changes are identified, the order of the remaining GEOs will remain undetermined in the short-term."*

There is no evidence indicating how the assessment information was used to improve student learning. The College acknowledges that this is a problem.

> *"The SLC is also concerned about communicating results and effecting improvements in order to 'close the loop' for each outcome. Finding time for faculty to review the general education data, figure out what it means, and implement improvements requires developing a new culture."*

The College does not offer changes or an alternative plan that may facilitate a more agile assessment approach.

The College's design for assessing general education outcomes appears sound. The College, however, struggles with consistent implementation and cannot move forward to even more challenging issues such as gathering insight regarding student learning and directing that insight to improvements in the student's learning experience.

The College has been an AQIP institution since 2000 and has been researching General Education assessment since 2006. The College's struggles in this area may speak more to systemic issues regarding a culture of assessment and working within a CQI framework than a weakness in the processes or a specific rubric.

## 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)

  Aligned

  This process is aligned with the processes used to determine program outcomes and ensure relevancy of program learning outcomes.

  Faculty develop Program Learning Outcomes (PLO). These are reviewed by the department, the department chair, and the appropriate dean. This is followed by an approval process with the JJC Curriculum Committee and then the Illinois Community College Board and the Illinois Board of Higher Education.

To align with degree levels of the institution, programs are reviewed once every 5 years for the Illinois Community College Board (ICCB). The Annual Program Updates (APUs) are aligned with the ICCB forms to ease the compilation of data.

To align with mission, academic programs identify Program Effectiveness Goals (PEGs) on an annual basis as part of their APU action plan. Examples of PEGs are student retention rates, employer satisfaction, and licensure pass rates. This information is aggregated across programs for a single subdivision by the appropriate dean. The Vice President of Academic Affairs aggregates information across academic subdivisions for the academic division. This information becomes part of the Institutional Effectiveness Review that is used by the President and President's Cabinet to establish and fund priorities. For these reasons, the evidence suggests an Aligned level of maturity.

- Determining program outcomes (4.B.4)

  Aligned

  The needs of the College's service area workforce largely determine the program outcomes. These needs are communicated through advisory groups and contact with business and industry, coupled with industry standards and program accreditation standards. This determination is understood across the institution, is repeatable and documented, putting the College in the Aligned level of maturity in this area.

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

  Systematic

  The description provided by the institution does not address program purposes, content, and level of achievement of the program outcomes. Even though it is clear JJC has content to its programs and that this content is mapped to program curriculum, the program outcomes are not systematically articulated to the reviewer. The College does not address how achievement levels are defined. It is noted the programs share data about the achievement of the Program Learning Outcomes, but those are also not shared.

  The PEGs and corresponding Expected Levels of Achievement (ELA) show information about programs in their entirety, but the program purposes, content, and level of achievement of the outcomes are not evident. For example, the Curriculum Map example for Vet Tech provides an example of program outcomes. While it is clear program content can be related to specific coursework where learning outcomes are introduced up to expected mastery, there is no indication of what constitutes mastery or the level of achievement of those outcomes. If a student is expected to master the administration of drugs to patients, which is introduced in five courses and reviewed in another three before taking VET 212 where it is to be mastered, showing the documentation of student achievement of that outcome would provide clarity to this issue.

  Without further clarification, it appears the College's programs are focusing on activities and responding to immediate needs in a Systematic level of maturity. It appears to an outsider the goals and level of achievement must be implicit to the program, but not readily available to the outsider.

- Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs

(3.B.4)

Systematic

Use of program advisory groups is the primary method JJC uses to ensure its program outcomes remain relevant and aligned with the needs of its stakeholders. This is done in a Systematic manner that is well understood, repeatable, and generally documented through minutes and course/program improvements.

The College may want to consider expanding its methods of ensuring the outcomes through alumni and employer surveys and data collection methods that allow it to empirically document the relevance and alignment of its academic programs.

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

  Reacting

  JJC career programs offer traditional co-curricular activities related to the student organizations connected to the programs. These activities can enhance the student learning accomplished in the classroom, but there is not description provided of any design or alignment of the student organization activities with classroom learning or academic outcomes. The lack of this description places this process at the Reacting level of maturity.

  Charting how co-curricular activities support student learning in the classroom can assist the career programs with not only understanding the relationships of these activities but also with being more directive/purposeful and creative in the design and alignment of the activities to classroom learning. This charting and clarifying the related outcomes can help the College transition to a Systematic level of maturity for this process.

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

  Systematic

  The College is beginning to develop a system of established programs reviews. This model appear to be within its third year of data collection and indicates the collection of data appears to be systematic. The APU data collection process is aligned with with the ICCB program review process in that the data reporting forms mirror each other.

  The information presented outlines how programs are reviewed, but does not clearly address student attainment of program learning outcomes or the tools used to evaluate student learning. There is reference to the graduate survey used to determine the extent former students feel they met the PLOs and that faculty work to embed the PLOs in the program coursework, but actual descriptions of how assessment tools are selected and how those tools provide achievement feedback is not provided. Additionally, it appears that the cycle of PLO assessment is tied to a 5-year program review cycle. This may be sufficient to evaluate a given PLO but is too lengthy to agilely respond to shifts in student learning and make appropriate corrections. This process appears to be at a Systematic level of maturity.

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

  Sysatematic

The institutional response for this process was combined with the previous process. Please see the previous process for the evaluation. This process appears to be at a Systematic level of maturity.

**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)

  Reacting

  The College indicates assessment as a feature of a number of supportive processes associated with the College's programs. The associated processes include program accreditation, curriculum mapping, enrollment, and articulation. The College suggests that curriculum maps exist to identify the points within the curriculum tracks where the PLOs are presumably mastered and can be assessed appropriately. The College internally reports assessment data within the APU document where PLOs are identified. There are 17 career programs at JJC that have programmatic accreditation, so it would appear that all 17 are assessing program goals in addition to the generalized approach to PLOs apparently taken by the College's transfer programs.

  Clear goals for these supportive processes were not stated. With the exception of one program's curriculum map, no evidence was presented regarding the overall effectiveness of these processes in supporting program improvement. The College does not provide information indicating deployment levels such as how many programs are actively participating in providing PLO assessment results as part of the APU report.

  The APU report for one program was provided. Based on this evidence, it is clear not all PLOs are mastered. In the example provided, it is clear the final two PLOs are only introduced. The PLOs do not appear to be reinforced or mastered in the program's coursework. With no other evidence as a basis for evaluating program assessment, these processes remain in the Reacting level of maturity.

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

  Reacting

  Summary results of program assessment are provided for only five occupational programs. The data presented regarding the Nursing program indicates a systematic level of maturity, but these standards do not appear to be pervasive as part of program assessment. For this reason, the data summary is ranked at a Reacting maturity level. The Nursing program's approach may serve as a model for other programs.

  The goals for the identified programs did not appear to have a basis in external comparisons. The data was not summarized. The College provided the following examples of assessment results: A single full PR report, a full subdivision APU report for student services, a full division report for academics. Data was presented within the PR report of the sample

programs' PLOs. No overall success rate of PLO attainment for all programs was provided.

- Comparison of results with internal targets and external benchmarks

  Reacting

  In select programs, such as nursing, the performance of students on regional licensing exams was presented in the context of national performance levels.

  This information regarding program assessment was not presented graphically or in a sufficiently organized manner to be easily analyzed for trends. Given the format of the data presentation for this area of the portfolio, it is difficult to conclude that the College analyzes trends. For these reasons this portion of the portfolio is ranked at a Reacting level of maturity.

- Interpretation of assessment results and insights gained

  Reacting

  The College reports a clear method of reporting data, but does not identify the means by which the meaning of the data is identified. This ranks this process as a Reactive level of maturity.

  The College's next steps for improvement rely on the success of recent administrative realignments that will allow greater oversight of assessment. The College has identified some programs require additional assistance in working with PEGs.

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

The College has a systematic way of reviewing how programs align with institutional mission by using the APU/IER reporting process. This system of reports incorporates information regarding student skill attainment.

The emphasis in this area of the portfolio is placed on advances that the College has made in its reporting structure and speaks little to how this information is being used to improve student learning. It appears the data remains within the programmatic silos. Sharing of programmatic data across the institution will assist the College in breaking down those silos as could the change in Academic Affairs leadership.

## 1.3: ACADEMIC PROGRAM DESIGN

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

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

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

  Systematic

The College administers CCSSE and several other student surveys to identify the needs of students.

This prompt explicitly addresses student stakeholder groups. The bulk of the information for this prompt addresses other types of stakeholders. For this reason, the process is ranked as at a minimal systematic level of maturity.

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

  Reacting

  The College uses market data and relationships with industry partners, the College Curriculum Committee, VPAA, ICCB and IBHE as meaningful methods to identify other stakeholder needs.

  Faculty use both program advisory committees and environmental scanning (occupational outlooks) to identify new and changing needs in their environment.

  Faculty are responsible not only for identifying stakeholder needs in their area of expertise but also for identifying new and emerging needs that might lay outside of their area of expertise.

  > *"Faculty have the primary responsibility for identifying new and changing needs of area employers and transfer students and then determining curriculum gaps and areas for improvement."*

  While the faculty are the content experts and interact with advisory teams and external stakeholders, there doesn't seem to be a systematic way for the institution to anticipate changes in industry needs that will lead to the identification of necessary changes. There is little described that suggests that the College anticipates needs of stakeholders. No mention was made of how faculty are organized to systematically identify new areas of growth in the community's workforce or training needs or how these needs fit into the overall institutional strategic plan. This suggests that faculty are left to respond to those stakeholders for their area of expertise. For these reasons, this process is ranked as Reacting in its level of maturity.

  While it is common practice for faculty to respond to changing needs of community employers, new opportunities are frequently identify as a collaboration between faculty and administration who regularly monitor the community through a variety of methods and weight feasibility in the context of institutional resources.

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

  Systematc

  Changes to programs are outlined in plans submitted as either APU reports or program review (PR) reports. This triggers a feasibility study of the request before submission for adoption through the JJC Curriculum Committee, VPAA, ICCB, and IBHE. The feasibility study connects this process to budget resources and market potential. For these reasons, this process is ranked as a Systematic maturity level.

Clearly identifying its list of stakeholders and their needs could assist the College in communicating the effectiveness of this approval / funding process and help to identify if all needs are being addressed.

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

    Systematic

    The APU report and curriculum committee serve as quality control measures, the standards that these processes use was not clarified. The College provides little information about how it selects tools and methods to assess the currency of its academic programs. Curriculum vetting and budgeting processes are used to identify and address needs. For these reasons, this process is identified at a systematic level of maturity.

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

    Reacting

    The College describes the process used to make changes to program curriculum and delivery methods. The College also notes that inactivation and withdrawal of programs undergo the same process. These processes have the potential to be aligned with other key process of the institution such as strategic planning and the institutional mission. These processes are operating in generally understood, repeatable and documented manners. For these reasons, this process is rated at a Systematic level of maturity.

    While this identifies that there is an institutional procedure for inactivating a program, the College does not explicitly identify criteria and thresholds within the body of the portfolio. The reviewers were left to assume that the information in the APU/PR report was the relevant information to this decision-making process, but no insight to the standards used to determine such a process was provided.

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

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

    Reacting

    The data presented by the College is a summary of curriculum changes that includes new programs, title and code changes to existing programs and withdrawn programs. The College provided no evidence that indicated why these actions reflect the needs of its identified stakeholders. A more direct connection between the process standards and the results will be necessary for this area of data summary to be ranked higher than a Reacting level of maturity.

- Comparison of results with internal targets and external benchmarks

Reacting

One program was closed and another was redesigned, however, no internal targets or external benchmarks were discussed other than a general statement regarding increased program demand and the need for greater efficiency. Even though the reporting of one year's worth of curricular changes is an indication of a Systematic level of maturity, the lack of additional years' data for comparative purposes combined with a lack of internal targets and external benchmarks shows the College is at a Reacting maturity level for its results in this area.

- Interpretation of results and insights gained

  Reacting

  The College recognizes an opportunity to develop processes in this area but offers no plan or timeline to address these issues. With no evidence of interpretation of the one year's worth of data on curricular changes, there are no insights provided to indicate any level beyond Reacting for the maturity level in these results.

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

While the College does appear to have a reporting system, it is not clear that it is tracking the information gathered by the reporting system to make systematic changes to its current processes. If the APU's and every five-year ICCB-program reviews are as rich with data as the sample provided for the Electrical/Electronic Automated Systems program demonstrates, JJC should have some beginning trend data for each program sufficient to make these significant curricular/programmatic decisions.  However, no aggregate summary of findings or reference to these data  were presented in relation to these program decisions.

## 1.4: ACADEMIC PROGRAM QUALITY

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

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

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

  Systematic

  The College identifies the process that they use to communicate the required preparation of students for courses. These communication methods include the College Catalog, online degree audit tools, and the use of master course syllabi.

  The College does not explain how the standards for the prerequisites are identified or agreed upon.  This process will need to be more thoroughly defined to provide an opportunity for this process to transition it beyond the Systematic maturity level.

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

  Systematic

  The College identifies that master syllabi are a common denominator to all sections of a course regardless of delivery method, instructor or dual-credit status. Significant changes to the syllabus are approved by the department chair and dean. The College does not identify how they evaluate the effectiveness of this process assures rigor across all modalities, locations, consortia and dual-credit programs.

  The College vets high-school instructors who instruct dual-credit courses through the same process used to vet adjunct instructors who are teaching on the College's main campus. The College does not identify that they review data to check that the skill levels achieved by dual-credit students are comparable to those achieved by traditional students.

  Online and Hybrid courses are vetted through a process that requires both the course and specific instructor be approved for online offering. Instructors undergo training for teaching in the online environment. The approval process includes the department chair, associated dean and the director of iCampus (online delivery). Instructional designers are available to ensure courses of online instructors meet design standards that address course information and accessibility to the class environment.

  These processes suggest a Systematic level of maturity.

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

  Systematic

  The College provides multiple avenues for students to earn college credit for prior learning and transfer credit. Credit for prior learning are governed by institutional policies which limit the awarding of credit to 30 hours and require that procedures for awarding credit be reviewed by the Academic Standards Committee. Currently recognized avenues include: CLEP, credentials, licenses and certifications, military service, and proficiency exams.

  Transfer credits are awarded dependent on grade and content and if the sponsoring institution is regionally accredited.

  The evidence and descriptions of these processes suggest a Systematic level of maturity.

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

  Systematic

  The College states that specialized accreditation is pursued "when available" and recognizes the transferability and employability benefits of such accreditation. There is no description provided on how it selects, implements, and maintains the 12 specialized accreditations it currently holds. This information, as provided in the portfolio, would appear to put the College at a Systematic level of maturity. The reviewers recognize that these accreditation processes are costly and complex undertakings. However, the College is encouraged to show how it selects, implements, and maintains these accreditations in its description rather

than simply listing the programs which have specialized accreditation.

In the spirit of allowing the institution the flexibility to pursue program accreditation, the College may wish to consider a process that allows them to opt out of accreditation when appropriate after a cost-benefit analysis.

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

  Sysematic

  The APU/PR system was identified as the means of collecting student outcome attainment. These reports note the number of enrollees and completers.

  The degree to which this process is used to improve student learning can be assessed without additional documentation that identifies how this information leads to insights regarding student learning, and subsequently, to curricular or programming changes. On the basis of information provided in the portfolio, it is difficult to understand what is actually assessed, what goals are established, what goals are attained, and what changes are to be made in the future.

  The raw data indicates what has occurred, and although the APU/PR process appears to be gaining momentum, it does not seem to have the necessary components to be a tool for improvement; rather, it seems to serve as a compliance document. For this reason, the evidence suggests a Systematic level of maturity.

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

  Reacting

  The College has a process that ensures course consistency regardless of location, length, or delivery method.  The College cites a rigorous vetting process for online and hybrid instruction. This vetting process applies to both courses and instructors. These processes are excellent but more appropriately describe how the College assures rigor across all modalities; these processes are not measurement tools.

  This prompt requests a description of the processes used to select tools and instruments of assessment. In contrast, the College's response described the activities used to maintain quality. Measurement tools may indeed be utilized throughout these processes to determine effectiveness, but they were not identified. What percentage of submitted courses had met design standards? What were the typical deficiencies? How is it evident instructors have successfully gained the skills necessary to facilitate online instruction? What are the typical stumbling blocks in achieving this goal? The response, as delivered, places it in the Reacting level of maturity.

**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)

The portfolio does not make a separate response to each of the sub-headings for this section.

Reacting

The College tracks student success rates in the form of assigned courses grades (% A, B or C). These rates are compared among face-to-face, hybrid, and online instruction modes. Online students under-perform relative to traditional students by 7-10%. Students show an improved opinion of the school over time. Three years of data were tracked and the populations studied were identified. Information regarding sample size was not provided. These numbers are not disaggregated by program. Limited data sets offer no interpretation or stated connection to improving program design. For these reasons, these processes are ranked at a Reacting maturity level.

- Comparison of results with internal targets and external benchmarks

    The portfolio does not make a separate response to each of the sub-headings for this section.

    Reacting

    The College does not compare its assigned graded distributions to those of other institutions. The College tracks its own 150% graduation rate and uses IPEDS to compare its performance against the performance of other institutions.These are very limited comparisons and associated with very little interpretation or connection to program design. For these reasons, the response reflects a Reacting maturity level.

- Interpretation of results and insights gained

    The portfolio does not make a separate response to each of the sub-headings for this section. Please see responses in the previous sections.

    Reacting

    For these reasons, the response reflects a Reacting maturity level.

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

JJC seems to have the tools in place to gather the data needed to identify program quality indicators and gaps where improvements could be made.  The acknowledgement of compliance challenges is indicative of a system still in implementation phase. It is imperative that all programs get to the level of developed targets for PLOs and PEGs, gather data, and begin analysis to yield insights.

The College addresses communication of student focus groups with faculty and chairs. Although it is always a good practice to learn and listen to the students, this does not appear to address the subject of academic quality in regards to rigor and assessment.

The College appears to have funding and strategic goals to provide educational pathways for students for completion. It is confusing how this information relates to the evaluation of the success of its graduates or how it articulates learning goals for its various certificates, diplomas, and degrees. It is also not clear how the College makes sure courses and programs are current and have required levels of rigor appropriate of the degrees awarded.

The College notes that changes leading to improvement of academic rigor will include data from student focus groups, chairs being held accountable for APU/PR report quality, and degree planning tools for students. Simply noting it is the responsibility of department chairs and faculty to make the improvements shows a Reacting level of maturity.

Documenting how the chairs and faculty have made improvements will assist the College in moving to the next level of maturity. Narrative evidence of changes to the APU/PR templates, professional development for faculty on assessing PLOs, and a strategic goal/Title III grant to assist JJC students with their goals are all indications of activities designed to improve academic programs. Documentation of process improvements will be a stronger indication of institutional maturity.

It is not clear that the College has identified the relevant data sources to make informed and systematic improvements in this area.

## 1.5: ACADEMIC INTEGRITY

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

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

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

   Systematic

   The College has policies regarding scholarly practice in its employee handbook, faculty contract and Academic Affairs Handbook. These address issues of integrity, professional development, and ethics for faculty members and administrators.

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

   Reactive

   The College uses course syllabi to reinforce expected behaviors. The syllabi include statements addressing the Academic Honor Code, Intellectual Property, Student Code of Conduct, Sexual Harassment and Student Support Services.  There does not appear to be additional proactive actions that prevent these harmful behavior from occurring. It is not clear how the Life Skill Lessons are being deliberately used for this purpose.  These processes are at a Reacting maturity level.

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

   Systematic

   The College Board of Trustees has a policy that addresses academic freedom and personnel rights with regard to product ownership. The College has recently implemented an IRB to

examine the ethics of faculty and student research projects. These processes are at a systematic maturity level.

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

    Reactive

    The College does not identify how it has selected its assessment tools for this area. This ranks these processes in the Reacting level of maturity.

    The College cites using Turnitin.com as an instrument to evaluate institutional support of academic integrity. However, the College does not provide data from this instrument. Rather, the College provides data showing trends in academic integrity violations. The process used to categorize these violations was not explained.

    The College's utilization of Turnitin.com might be a better fit for "Ensuring ethical learning and research practices of students." Institutional measures from Turnitin.com might be gained by tracking the number of faculty who require the use of this site or by evaluating the value that students find in using Turnitin.com. The College, however, did not identify that it uses Turnitin.com in this manner.

**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)

    The portfolio does not make a separate the response to each of the sub-headings for the results section.

    Systematic

    JJC systematically tracks violations of Academic Integrity through the Dean of Students. These violations are tracked by type with the most frequent violations being plagiarism and cheating. A student's submission that is accused of a violation is reviewed, and if found in violation, the student is required to attend a seminar on integrity. The repercussions for not attending were not identified.

    The summary and data tracking are barely Systematic in their level of maturity. Improvements could include a means of identifying rising trends of types of student violations and related measures taken by the school to change the direction of those trends.

- Comparison of results with internal targets and external benchmarks

    Reactive

    No comparative data was offered, which qualifies this portion of the portfolio as at the Reacting level of maturity.

- Interpretation of results and insights gained

    Reactive

    The College offered no interpretation or insight based on the data presented in this portion of the portfolio. This approach to the data is at a Reacting level of maturity.

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

    JJC has ethical and integrity policies in place for both students and college employees. Measurements of how well the institution lives these policies have not been identified. Improvement goals have not been identified. These are the hallmarks of moving from a reactive to a proactive institutional stance.

    The College recognizes the implementation of an IRB. The narrowness of the scope of these improvements reflects the Reacting level of maturity, at which the institution appears to be operating.

    The College does not recognize the other areas of improvement such as pro-active actions to ensure ethical student learning practices, and intentional activities to encourage/support faculty freedom of expression. There is no process for tool or method selection that would evaluate these practices.

**CATEGORY SUMMARY**

    The identification of the College's GEOs is Systematic. It is difficult for the institution to make conclusions and inferences because the assessment cycle has been is consistently interrupted rather than carried through to completion. The College may be well served to complete the assessment cycle multiple times prior to making changes in the process. This will allow for internal targets to established. For academic and occupational programs, the APU reporting system seems to be a sound method for gathering data. it is not clear how this information is aggregated for analysis and used. Stopping short of analysis leaves the overall assessment process at the Reactive maturity level.

    JJC will benefit from following a clear PDCA cycle with each of its processes in this all-important Category. By focusing on that clearly identified, shared, and reported cycle for each process, the entire institution will gain a greater understanding of how it is meeting its mission of Helping Students Learn.

    Establishing general education outcomes, designing rubrics for each outcome and collecting one set of data for each outcome has taken JJC seven years. JJC acknowledges that faculty compliance in completion of assessments is problematic. Therefore, it is questionable that the College embraces and places a high value on assessment of its general education outcomes. With a repeatable process now in place it may take some campus champions to assimilate assessment into the campus culture and make it a priority.

    The APU/PR process has great potential if all programs and departments earnestly participate annually and this information is used for establishing targets, making improvements based on the data analysis and used to inform the College's budgeting process. It is not clear how the APU/PR process will mature beyond a data collection

mechanism to include analysis, interpretation and offer insight for improving academic programs.

The College does not answer various prompts in this portion of the portfolio. Additionally, the institutional responses are not always relevant to the information being requested. It is not clear if this is due to not understanding the reporting format, careless documentation of institutional processes or because the expected processes simply do not exist.

The Academic Leadership may benefit by doing an inventory of the structure of Category 1 as requested by HLC. The goal would be to clarify how the different parts of Category 1 integrate to support student learning. This activity may clarify how to structure the institutional narrative in future portfolios. At the end of this process, the College may find that it has not recognized or documented practices that are already in place and accepted across the institution. The reviewers identified several situations where this may be the case and attempted to identify relatively common practices that are likely already implement but have been mentioned.

At the end of the day, the portfolio is evaluated as it is written. Favorable ratings are difficult to justify without the institution clearly identifying how its own processes fit together and clearly relate to data.

**CATEGORY STRATEGIC CONCERNS**

The College has many sound processes in place, but has not shown a consistent practice of collecting data, analyzing data and using the data to make improvements. This is most apparent where the College is expected to collect data on student learning.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# II - Meeting Student and Other Key Stakeholder Needs

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

**Instructions for Systems Appraisal Team**

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

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

## Evidence

**CATEGORY 2: MEETING STUDENT AND OTHER KEY STAKEHOLDER NEEDS**

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

2.1: CURRENT AND PROSPECTIVE STUDENT NEED

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

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

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

  Systematic

  The College demonstrates a systematic use of placement and assessment tests for new students with multiple support systems to identify underprepared and at-risk students and

their needs. These include placement tools in math and English to support for non-native English speakers. What is not clearly stated is the process for actually placing students in courses once they are identified. It is also not clear how the academic support needs are determined.

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

  Systematic

  The College offers an array of student services that are introduced to students in their New Student Orientation. These systematic services support academic success including a cross-functional advising model with all department chairs trained as academic advisors. But the College acknowledges it does not have a process for clearly assigning students to advisors. The College is encouraged to implement its advisement assignment system that is currently under construction.

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

  Systematic

  Joliet's full-time faculty are available to students through mandatory office hours in a systematic manner that is generally understood. In addition, the College Library has a full-time faculty member available to assist with advisement and inquiry. The Adjunct Faculty Center and other dedicated adjunct spaces in departments provides space for adjuncts to be available for student inquiry. For online and hybrid courses, the faculty have regular and substantive interaction requirements as required.

- 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)

  Systematic

  Joliet has in place a systematic Academic Intervention approach through which faculty can identify and report student needs and provide support. The College addresses learning support through the Tutoring and Learning Center focused on discipline-focused tutoring as well as best practice tutoring techniques. What remains unclear is how the College determines the learning needs of its students beyond placement scores.

  The College Library is designed to maximize student learning support in the Campus Center, but provides minimal services at its other locations due to funding.

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

  Systematic

  The College uses the following systematic processes to identify new student groups:

  First Year Experience is a mandatory orientation for full-time students. It is unfortunate student orientation is not also mandatory for the new part-time students as this population is typically greater in numbers than the full-time students, usually feels less engaged with the college environment and has a higher dropout rate than the full-time student.

The Strategic Enrollment Management (SEM) Plan allows students to identify their student needs during the application process. While student group specialists might be in place, the educational offerings and services provided students as they self-identify their needs is not clear.

- Meeting changing student needs

  Systematic

  The Student Development department produces monthly reports to communicate departmental initiatives and address changing student needs. It is unclear what processes are in place to respond to these findings (counseling, academic supports, commuter, social/behavioral, psychological, or other social/behavioral, psychological, or other student changing needs). This displays a systematic reporting process.

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

  Systematic

  The College offers a number of activities to support students (OSA lunches, Disability Services and Library). While support is offered, it is unclear how the College identifies needs for current and new subgroups. The College could strengthen this systematic level of maturity though coordination of needs identification and student support services that promote institutional goals.

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

  Systematic

  The College demonstrates non-academic support services through its Student Portal (one stop shop), Office of Student Activities' leadership programs, Main Street club/resource event, a Communication Center and effective financial literacy. In addition, Student Affairs works with all student groups and subgroups to educate students about the services available.

  It is unclear how it is determined these services are deployed to help students be successful. Having clearly stated targets, methods for collecting, reporting and analyzing data for improvement will assist the College in moving from systematic to a higher level of maturity.

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

  Systematic

  Hiring: Joliet has processes in place to establish employment qualifications for non-academic positions. Human Resources guides the hiring process and a probationary period applies to new employees. Annual evaluations are conducted and performance improvement plans are implemented for employees needing additional support.

  Training and support: Although Professional Development is offered in-house (two

professional development days), the College does not appear to highly value sending staff off campus for development that could general best practices sharing and an influx of new ideas.

The College appears to not have a process to ensure its non-academic supports services staff are qualified, trained, and supported. Consequently, the College remains at a very minimal systematic level of maturity for training and support.

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

  Systematic

  The Student Portal, College website, and JJC Communications Center provide a systematic level of communicating the availability of its non-academic support services. Coordination and implementation of effective practices could strengthen the College's level of maturity.

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

  Reacting

  JJC references a monthly report that the Student Development Department uses to prepare its annual APU, and the Portfolio states there is a process for selecting tools, methods and instruments to assess student needs based on a variety of factors. The process appears delegated to individual departments and not centralized under any formalized process. The description does not make it clear if the results of those tools are shared outside the division, used to break down the silos between academics and student services, or have goals that are generally understood across the College. Since there appear to be few details provided as to a systematic way to capture student needs, it appears the College is at a reacting level of maturity.

- Assessing the degree to which student needs are met

  Reacting

  The only reference made to data collecting methods were with focus groups and the evaluation of leadership sessions, and it is unclear if these events occurred with students. In addition, the assessment of these processes was not clear as the College did not indicate the degree to which student needs are being met. Even with the improvements, there is no indication of an ongoing assessment for meeting student needs, thus indicating a reacting level of maturity.

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

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

  Reacting

  It is very difficult to follow how the results presented relate to the processes discussed. The

narrative available relates to changes and improvements which should appear in the improvements section. For example, alternative placement and orientation options are improvements, not results. It appears the Academic Success Tracker has completed a process cycle and initial results could have been reported, but were not included. This indicates a lack of understanding of the continuous improvement and Portfolio processes, therefore indicating a Reacting level of maturity.

- Comparison of results with internal targets and external benchmarks

   Reacting

   Again, the College Systems Portfolio does not effectively offer data in this section. For example, a SENSE survey is referenced as being done in 2016. However an interpretation of only two of the indicators were described and not compared with internal or external benchmarks. Several other initiatives were presented, but no data or analysis discussed. Some brief data were presented for a developmental education pilot, but there were no internal targets identified. In other examples, only student participation numbers were reported. Throughout the narrative reporting in the Results and Comparison section(s), there are few results and no comparisons of internal targets and external benchmarks. It appears JJC is still in the Reacting level of maturity.

- Interpretation of results and insights gained

   Reacting

   The College Systems Portfolio does not effectively offer data in this section, as no organized interpretation of results was presented.The College is at the Reacting level of maturity.

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

   The College has listed activities, however significant, that may be outcomes of other activities or situations, but are not part of a CQI cycle of Processes, Results and Improvements. It is difficult to see the link between these activities and the College's strategic goals and the strategic plan. Reporting appears to be very granular and reflects only what is happening on the department level, not identifying institutional trends.

   Although the College appears to want to focus on improving student interaction and success, there does not appear to be an overall plan with identified measures, internal targets and process results. It is important for JJC to know if new initiatives are making a difference for students. In this environment of limited resources, it is essential to know what initiatives to keep and grow and what initiatives are not hitting the mark of student success and need to be reworked or eliminated.

   The College will be able to make strides in its maturity level when it makes the connection between developing its activities into processes which generate data that provide results which can serve as the basis for improvements.

2.2: RETENTION, PERSISTENCE AND COMPLETION

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

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

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

  Systematic

  JJC has an Office of Institutional Research and Effectiveness, and this office collects and submits student retention, persistence, and completion data through IPEDS and NSC reporting structures. It also collects data through the Illinois Community College Board (ICCB) and participates in the Community College Survey of Student Engagement (CCSSE).

  The College produces an annual data report that is used in the departmental APU/PR process and another general fact book for institutional purposes. This reflects a Systematic level of maturity.

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

  Systematic

  JJC's Student Development Department developed a three-year Student Enrollment Management Plan (SEM) in 2014. The SEM focused on increasing the success of developmental learners, assisting first generation and underrepresented students with financial literacy awareness, and transitioning with success students to the College and the workplace. Enrollment targets, along with 2017 targets for persistence, retention, and completion, were included, but there was no indication of how those targets were determined (via data history, trend analysis and/or comparable data sets).

  JJC's SEM Plan is a document that denotes a systematic approach since it is repeatable and contains documented processes, but it does not describe how targets for student retention, persistence, and completion are determined or will be determined in the future.

- Analyzing information on student retention, persistence and completion

  Systematic

  The College identifies a number of data sets that offer insight to student retention, persistence and completion.

  Some targets provided were not part of the SEM document, indicating they were recently determined, and until a history is developed, they will be difficult to analyze. In fact, the College does not identify how any of the data sets were analyzed to identify goals and standards.

  Analysis does indicate barriers identified for student persistence and retention. No plan was discussed as to what next steps are regarding this information, indicating a systematic level of maturity.

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

  Reacting

  The fact that there were no targets for retention, persistence, and completion previously available and the College continues to provide narrative that does not address the topic shows JJC is at the reacting level of maturity.

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

  Systematic

  The College's Academic Success Tracker software system, Ellucian Colleague Student Data System, Strategic Enrollment Management (SEM) Plan, CCSSE Surveys and the Student Action Project are tools used to collect retention, persistence and completion data. Information from these selected tools is generally understood and repeatable through documented processes. Though these tools are valuable for gathering and collecting data, it is unclear how and what methods JJC is using to assess the data. This indicates a systematic level of data collection.

**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)

  Systematic

  JJC presented matriculation, persistence and completion results/summaries from its Strategic Enrollment Management (SEM) Plan. The report is a valuable tool, repeated annually and easy to understand. The data report could be enhanced with a description of how it is used across the institution to tear down silos and promote college-wide understanding. Other activities the College reported brought context to the plan but were presented in an informal manner.

  The College could elevate to a higher maturity level if it reported and summarized results from other tools such as the College's Academic Success Track, Ellucian Colleague Student Data System, and CCSSE Surveys.

- Comparison of results with internal targets and external benchmarks

  Systematic

  Results were compared to internal targets and identified goals. The Strategic Enrollment Management (SEM) Plan report included external state benchmarks for retention, persistence, and completion. The College could benefit from checking for other sources for external benchmarking.

- Interpretation of results and insights gained

  Systematic

  The College implemented a student focus group action project to understand student perceptions about the College, its programs and faculty. Insights were gained, from actions such as the CCSSE, the student focus groups and the Academic Intervention System. The College would also benefit by using the numerical data about persistence, retention, and attainment to support the qualitative activities. This indicates a systematic level of maturity.

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

  JJC has many of the components needed to move to a higher level of maturity in this category and has an impressive list of activities it plans to implement (next generation of the Strategic Enrollment Management Plan entitled Momentum 2020 and a new ERP system with more robust communication with students). However, the process through results format is somewhat disjointed. For example, the CCSSE is mentioned in the process portion of the portfolio but is lost when determining targets and analyzing information and results.

  To support these activities, the College would benefit by having clearly delineated descriptions that show a Process, then Results from that Process, followed by Improvements based on the results. This type of system would allow the College to move beyond its current high reacting/low systematic level of maturity.

2.3: KEY STAKEHOLDER NEEDS

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

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

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

  Systematic

  The College identifies key stakeholders in the areas of business partners through Career and Technical Education Advisory Committees, high school partners and other colleges and universities. Although several stakeholder groups are identified, it was not clear why and how those groups are identified as being significant to the success of the College. The College is encouraged to thoughtfully and with purpose, clearly choose its key stakeholders by understanding the factors that make them key stakeholders and set up parameters for analysis of those relationships.

- Determining new stakeholders to target for services or partnership

  Systematic

  New JJC stakeholders are determined through the awareness that local and state partnerships benefit the institution. New student and stakeholder groups are identified through demographic and economic motoring, adhering to student services requests, and advisory

committee input.The relationships can break down operating silos allowing departments to work together to maximize partnership benefits. This beginning level of systematic maturity and can be strengthened by creating generally understood processes that are repeatable and measurable.

- Meeting the changing needs of key stakeholders

  Systematic

  The College is encouraged to understand the distinction between determining stakeholder needs and meeting the changing needs of key stakeholders, which is what is asked here but not addressed directly. For that reason, the College indicates the use of the same set of tools to monitor changing needs of stakeholders as to determine stakeholder needs.

  The list includes strategic planning, scholarship applications, charitable giving, participation in advisory committees, transfer rates, surveys to high school counselors, admissions office surveys, and college fair surveys.

  It would benefit the College to clearly identify, select, and implement empirical measurement methodologies to measure meeting key stakeholder needs.

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

  Systematic

  The College is encouraged to understand the distinction between determining stakeholder needs, meeting the changing needs of key stakeholders and assessing key stakeholder needs.

  Evaluations of services and surveys of high school counselors are listed as means by which the institution assesses some stakeholder needs. It would also benefit the College to clearly identify, select, and implement empirical measurement methodologies to assess key stakeholder needs.

- Assessing the degree to which key stakeholder needs are met

  Reacting

  The College does not address the issue raised, which is assessing the degree to which key stakeholder needs are met. Instead, the discussion centers on building and maintaining relationships with key stakeholders, which was the topic in a previous section of the portfolio.

  Due to lack of specificity regarding this section, it is difficult to determine the degree to which the needs have been met. The Strategic Plan has some environmental scan data which might have provided some insight, but the results of the scan were not included. This indicates a reacting level of maturity.

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

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

  Reacting

  The College did not respond to the inquiry requesting summary results for dealing with its key stakeholders. JJC did not provide data addressing the processes described in the preceding area of the portfolio.

  There are no results of any measures established in the process section for external stakeholders. This confusion indicates a reacting level of maturity.

- Comparison of results with internal targets and external benchmarks

  Reacting

  The College didn't provide results and/or comparisons, making it unclear if internal targets or external benchmarks exist. This indicates a reacting level of maturity.

- Interpretation of results and insights gained

  Reacting

  There were three external stakeholders surveys mentioned but no results, analysis, or insights provided. No interpretation of results or insights gained was noted, reflecting a reacting level of maturity.

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

  Much of the JJC evidence for key stakeholder needs are initiatives and seemingly one-time efforts to undertake a plan. The results of such actions, however, are not evident. What has resulted from or been improved from the outreach efforts by the College president? What is evident as process improvements from the Ambassadors Program? Answers to these questions could provide valuable information for stakeholder policy.

  The SPC and OIRE can play key roles in assisting the College in understanding stakeholder needs and how College initiatives are perceived. But that understanding can only be effective if the College has a clear view of its identified key stakeholders and not just stakeholders in general. Steps in that process could be:

  The College needs to identify those stakeholders who are truly key to the operation of the College (students, taxpayers, and political figures).

  1. Clearly identify those stakeholders' needs.

  2. Determine the resources needed to address those needs and how they will be addressed.

  3. Determine who has the responsibility to address those needs.

  4. Collect appropriate data on meeting those needs, analyze it, report it as Results.

  5. Then identify Improvements to be made based on those Results.

6. Now you have a repeatable cycle for continuous improvement.

It was difficult to find an alignment of processes, results, assessment, and improvement in this section of the portfolio, indicating a reacting level of maturity.

2.4: COMPLAINT PROCESSES

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

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

- Collecting complaint information from students

  Systematic

  The College has a systematic approach to responding to student complaints. These processes include multiple points for students to express their concerns. Individual departments are expected to respond to student concerns. Behavioral concerns are addressed by two committees – Behavioral Intervention Team and Threat Assessment Team. The College's Office of Student Rights and Responsibilities is responsible for final follow-up to be sure all *non-academic* complaints are resolved.

  Student *academic* complaints are processed through the academic structure, beginning with the faculty member through Dean. Unresolved complaints are heard by the Academic Standards Committee, composed of faculty members.

  The student may submit their complaint to any employee and it is that employee's responsibility to get the complaint to the appropriate venue.

- Collecting complaint information from other key stakeholders

  Systematic

  Complaint information can be received through the call center, Contact Us link, and the College Facebook page. The College's call center and its website Contact Us link, allow stakeholder to provide complaint information that is systematically collected and routed to what is deemed that appropriate office. The College's Contact Us link allows for a seamless process to collect complaint information. Google Analytics tracks the functional use of the Contact Us link.

  The Freedom of Information Act Officer's role is collecting complaint information from social media platforms. This systematic level of maturity can be enhanced through a more coordinated process of collecting complaint data and documenting the appropriate resolution.

- Learning from complaint information and determining actions

  Reacting

It appears that student complaints are resolved across the institution with no apparent coordination or centralized collection of data. Little information is provided on how JJC personnel learn from complaint information. If the College had a centralized student complaint process, its collection of complaint data would identify prevailing complaint areas and trends, which could be reviewed and addressed institutionally.

- Communicating actions to students and other key stakeholders

  Systematic

  The College informs students through multiple vehicles concerning registered complaints from respective College employees.Since the process for communicating actions related to student complaints appears to be generally understood, is repeatable, and subject to improvement, it is at the systematic level of maturity. However, the College is encouraged to review that process to ensure that all parties involved receive information through closure, and both parties have the opportunity to appeal; currently it appears only the plaintiff can appeal. Also, the process does not appear to address stakeholders that are not students.

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

  Systematic

  JJC through the OSRR uses the Maxient reporting system to track and evaluate complaints. As a result, policies, procedures, programming development, intervention strategies, and team training are designed for the next academic year. Use of that software to track student complaints in a centralized manner across the College could strengthen this College's Systematic level of maturity in this area.

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

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

  Reacting

  JJC does not appear to have a clear understanding of what constitutes summary results as no results about actual complaint data were provided. Instead, in this section information about policy revisions and Maxient training was provided. Policies and procedures and training are not Results; those are actions or activities. Without empirical evidence of its Processes, the College has no Results to report to get beyond the reacting level of maturity.

- Comparison of results with internal targets and external benchmarks

  Reacting

  JJC did not provide any comparison results with internal and external benchmarks indicating a reacting level of maturity.

- Interpretation of results and insights gained

  Reacting

  JJC did not provide evidence to indicate an interpretation of results or insights gained indicating a reacting level of maturity.

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

A policy and procedure are in place regard all areas of student conduct inclusive of a complaint reporting processes. That same level of process does not seem to be in place for academic complaints. The College may benefit by codifying this process, especially if OSRR is responsible for tracking all complaints.

The College is providing additional resources related to Title IX and Clery Act support through the Office of Student Rights and Responsibilities.

*Training:* The College is actively training its staff to address student and stakeholder complaints. The processes could be better documented in the portfolio, but the basic structures are in place. A number of activities have occurred that offer professional development for staff and faculty but more external opportunities could enhance staff development.

The College views additional training and partnerships as Improvements to its ability to collect data on student complaints. Those are Reactions, however valuable to the College. They are part of how the College responds to the need for dealing with substantial issues, but there is no direct correlation to a process for reporting of student complaints.

The Maxient data was not reported and did not seem to be used to determine trends and analysis.

With so much of the processes being new or updated in 2017, the level of maturity would be at a beginning systematic level.

## 2.5: BUILDING COLLABORATIONS AND PARTNERSHIPS

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

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

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

  Reacting

  JJC identified many partners, but does not clearly explain what processes are used for selection. JJC's partners for collaboration are its key stakeholders, but the College selects its partners the same way it identifies its key stakeholders – with multiple methods that have no apparent coordination. Consequently, exactly who are the College's selected partners may

vary depending on who is reporting them. This indicates a reacting level of maturity.

- Building and maintaining relationships with partners

Reacting

The College states that it "builds and maintains relationships with partners across seven counties," but the processes for selecting these candidates and building these relationships were not described. A broad description of what seem like ad-hoc consortia with other community colleges for the purposes of grant work was identified, but no specific business or industry partnerships were identified. Without that clarity and without the clear depiction of an actual process rather than a collection of activities, the College is at the reacting level of maturity.

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

Systematic

The College measures the effectiveness of its relationships by enrollment, retention, number of companies served and number of grants /programs generated.

Also, the College is a member of South Metropolitan Higher Education Consortium (SMHEC- an area higher education consortium, composed of JJC, other community colleges and four-year institutions). Engagement with this consortium allows the College to collect and benchmark comparative data to improve programming and services. Since the measures listed appear to be generally understood, are repeatable, and documented, the College is at the beginning level of a systematic approach to selecting its tools to assess the effectiveness of its partnerships.

- Evaluating the degree to which collaborations and partnerships are effective

Systematic

The College evaluates its relationships quarterly through the APU/PR reporting structure which feeds into the strategic plan. Information about partnership events and relationships are documented APU/PR reports. JJC gauges its increase in articulation agreements, increasing relationships with key stakeholder groups, and higher numbers of collaborations as means to evaluate effectiveness with strategic partners. However, targets and measures did not appear to be identified.

As noted previously, the College has a variety of activities that are valuable to its operations and which indicate a degree of collaborative effectiveness. But there is no indication of coordination of these activities into a process which evaluates the effectiveness of the College's partnerships. Clearly delineated partners, targets of achievement with those partners, collection and analyses of data, reported results, and improvements made to collaborative efforts based on those results will assist the College in moving to a higher level of maturity.

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

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

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

  Reacting

  The College identifies internships and articulation/transfer agreements along with "some" data collected for the strategic plan, but the Systems Portfolio fails to adequately report summary results.

  For example, following the CI approach, the College would clearly identify its partners, identify targets for those partners, collect data related to the partnerships, and report the results of that data here. There is no tracking of the process by which the College builds its relationship with its alumni and reports the results of those efforts.

  Other examples: The data cited in the portfolio included donations from businesses and organizations and the number of internships generated with no context provided. It is unclear if these numbers represent one campus or the entire system. There was no trending data and no reporting of collaboration counts. This indicates a reacting level of maturity.

- Comparison of results with internal targets and external benchmarks

  Reacting

  Examples of partnerships and collaboration are identified, but comparison of results with internal and external benchmarks is not listed. JJC is exhibited a reacting level of maturity.

- Interpretation of results and insights gained

  Reacting

  With no real results, there is no interpretation or insights available, which is indicative of a reacting level of maturity.

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

   The College has identified critical stakeholders to fulfill its mission – students, employers and other educational institutions. Based on the presentation in this portfolio, it is not clear that the College has clearly defined the role of each of these stakeholders in the institution's strategic plan for mission fulfillment. Without a clear definition, it continues to be difficult for the institution to identify meaningful performance measures for themselves or likely for its stakeholders.

   There is no presented intentional plan with targets to accomplish, measures to identify or results. What is presented in this section is just a listing of activities in which they engage. Also, indicating a community survey will be done without any description of what that survey is intended to accomplish is a reflection of the College's apparent Reacting level of maturity.

   There appears to be a beginning level of understanding the value of coordination. Such coordination helps avoid unnecessary activity and provides more focus for the creation of

processes designed to build and improve the College's relationships with its clearly identified partners. From the narrative in this section of the portfolio, it is not evident the College has an understanding of the continuous improvement approach.

## CATEGORY SUMMARY

JJC's self-analysis indicated a systematic level of maturity. Processes are in place and the College undertakes several initiatives for improvement, yet it is not evident these initiatives nor their actions are developed from any structured, intentional reflection of results and means for improvements. JJC is collecting data and executing a wide variety of activities with no apparent coordination. In this section, JJC delivers the initiatives in a list of accomplishments rather than by means of processes, results, and improvements.

JJC is doing some strong work with its students, prospective students and other stakeholders in the community. However, most of this work is presented as reactionary instead of part of a plan with targets and measures.

Having a clear understanding of how its wide variety of activities will assist the College in developing its partnerships could enable JJC to construct clear processes that appropriately collect the desired data with targets that can be analyzed and reported as results for decision-making purposes. Otherwise, it is simply another activity.

## CATEGORY STRATEGIC CONCERNS

From the description provided, the College does not have a clear understanding of the Plan-Do-Check-Act process that is fundamental to an institution committed to continuous quality improvement. A misunderstanding of pertinent terms/concepts (assessment tools vs reports, for example) is also apparent.

A pattern is developing that will need addressed. The College seems to have some strong processes, but these are not organized with measures or targets in place. Subsequently, results end up being a list that does not relate to the processes presented. This does not reflect a strong understanding or implementation of the AQIP and CQI process.

# Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# III - Valuing Employees

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

**Instructions for Systems Appraisal Team**

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

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

## Evidence

**CATEGORY 3: VALUING EMPLOYEES**

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

3.1: HIRING

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

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

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

  Aligned

  The JJC processes for recruiting, hiring, and orienting new personnel are explicit, repeatable, and periodically evaluated for improvement.  All personnel apply using an online applicant tracking system.

  All job descriptions and postings identify the required qualifications, skills and values for

that position. Minimum requirements meet the ICCB and HLC guidelines as well as the Illinois Dual Credit Quality Act. All candidates apply using PeopleAdmin which allows for effective tracking of applicants. A formal screening matrix, interview process and hiring process demonstrate alignment. Further, JJC notes orienting and conditions for tenure during new faculty seminar. The PeopleAdmin software can also provide the ability to ask qualifying screening questions.

Search committees are populated with diverse individuals who are knowledgeable of the position demands. Committee members are trained on JJC policy and procedures for conducting searches.

Orientation is conducted for new employees, full-time faculty participate in New Faculty Seminar and adjuncts have access to online orientation. New employees are afforded a 6-hour orientation that addresses institutional operations, strategic goals, polices, procedures and safety concerns.

These processes are implemented across the institution in an Aligned manner.

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

    Aligned

    JJC has Aligned the process for developing and meeting academic credentialing standards for faculty regardless of instructional modality. Faculty position descriptions are developed by faculty members, department chairs and deans. These are approved by the Vice President of Academic Affairs. In consultation with the ICCB, HLC accreditation guidelines and Illinois Dual Credit Quality Act, the credentialing process is outlined in the academic handbook. Some units with external accrediting standards may exceed that minimum level of credentialing. Credential review is completed by faculty and housed by HR. Discipline specific requirements are also part of the description document and posting. These are reviewed and updated periodically. All faculty teaching in these areas must meet the same qualifications.

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

    Reacting

    JJC does not answer sufficiently this question. The response for this section references the two succession policies. This seems to indicate that a vacancy would need to be present to fill a faculty position. The issue of sufficient numbers of faculty should there be program growth was not addressed. JJC does make mention of its position success plan and a Council that plans for the future needs of personnel, but how JJC actually ensures it has the necessary faculty to conduct its operations, both academic and non-academic, is not addressed. There is no mention made of environmental scanning, job markets, emerging programs, new industry, and other factors that relate to ensuring JJC has the faculty necessary to adequately address the educational needs of its service area. Consequently, it appears JJC is at a Reacting level of development in this area.

    Moving forward, with the two succession plans, JJC does recognize an opportunity to

advance diversity and inclusion goals.

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

  Reacting

  At JJC, staff positions are prioritized within the President's Cabinet using data available through the APU/PR report structure.  Department's must justify position requests based on data in their APU and link the position to program outcomes/goals.

  JJC ties the position approval process to its budget; however, there is no information indicating an approach to ensure sufficient numbers of staff to provide student support services.

- Tracking outcomes/measures utilizing appropriate tools

  Reacting

  The Human Resources Department developed metrics by which to track recruitment effectiveness, satisfaction, salaries, benefits, employee turnover and employee retention.  Elements of the PACE employee survey also inform JJC of employee satisfaction.

  While JJC has resources and processes that address an issue, JJC has chosen not to include them in its response. The HR Hiring Metric Report is exactly what is needed here, and PeopleAdmin apparently provides this data, though it is not mentioned here.  No mention is made of tools to measure outcomes of JJC's employee orientation process.  Clearly showing the tools JJC uses to analyze its recruitment, hiring, and orientation processes are vital to moving to an advanced level of maturity.

**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)

  Systematic

  In 2017, JJC offered a Personal Assessment of the College Environment Survey (PACE) to 1235 employees. Data was presented in the Systems Portfolio. These data were compared to the national NILIE norms and peers in large two-year colleges. The results from this project allowed JJC to identify areas for improvement.  The survey results indicated JJC had a consultative system with the overall score of 3.6 on a 4 point scale. JJC also collects periodic climate survey data in targeted functional areas.  However, these summary results, even common themes identified, were not shared.  Further, the results reported do not apply to JJC's processes for recruitment, hiring, and orientation.  Rather, they are for employee satisfaction. To improve its level of maturity, JJC needs to report results for its recruitment, hiring, and orientation processes.  JJC is encouraged to examine its Hiring Data Report for results of its processes for recruitment and hiring.

  From the Climate surveys administered to smaller employee groups, no data regarding

lessons-learned is presented. JJC can improve its level of maturity by offering data summaries and improvements made from employee exit interviews.

- Comparison of results with internal targets and external benchmarks

  Systematic

  Only data for the 2016 and 2017 surveys were included. Older surveys could have provided a longitudinal look at these data points and trend analysis. No internal targets were established based on the feedback from survey results prior to 2017. JJC did benchmark its results in relation to the national NILIE norms and peers for similarly sized institutions. The results from this project allowed the College to identify areas for improvement.

- Interpretation of results and insights gained

  Systematic

  The PACE survey offered JJC three areas of targeted improvement: assessing and improving recruitment and retention of diverse staff and faculty, supporting and compensating staff and faculty, and improving systems used to evaluate employees.

  JJC does not explain causative factors for these scores or improvement strategies going forward.

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

JJC has a comprehensive hiring process where position credentials, skills and values are established and a software system that track applicants to the institution. The issue of ensuring sufficient numbers of faculty to carry out classroom and non-classroom programs and activities was not addressed. While it is not clear that employee satisfaction belongs in this section, it is refreshing to see a process that includes data gathering and results about that data presented even though no internal targets had been established.

Even though JJC has targeted priorities for this area, it is encouraged to return to the basics of the Plan-Do-Check-Act cycle. For each priority, JJC could benefit from identifying its process, setting internal targets and external benchmarks, identifying and collecting data, analyzing that data, reporting the results, and planning improvements based on those results.

As presented in the systems portfolio, it is not clear JJC has matured to a point of systematically making this data available or using it in a meaningful way.

## 3.2: EVALUATION AND RECOGNITION

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

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

- Designing performance evaluation systems for all employees

Systematic

JJC continues to enhance the employee evaluation process. There is training offered for performance management online and face-to-face. The president's leadership academy is a unique offering for JJC employees. However, JJC does not appear to have a performance evaluation system that covers all employees. It is working with its seven collective bargaining units to bring consistency to the process. While there is a performance management system in place as well as training sessions for supervisors and managers, not all employees are evaluated using this system. Alignment of forms and processes is a work in progress.

The use of a third party vendor, Halogen Performance Management System, allows for electronic processing of performance evaluation.

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

   Systematic

   A leadership and communication foundational structure is new to JJC in its Shared Governance Model finalized in 2017. The PACE survey of employees was completed in 2016 and 2017. Through shared governance, JJC has numerous forms of two-way communication. This process of two-way communication influences decision-making, input, ideas, and the flow of information. From the systems portfolio, it was not apparent the communication structure was aligned, but rather a series of activities.

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

   Systematic

   JJC allows the employee evaluation process to tie individual goals to the five current strategic planning goals. However, it is unclear from the language used if the performance evaluation tool specifically includes that opportunity or if participants can choose to take advantage of that opportunity. Such an alignment is a key component to a proactive evaluation system that enables personnel to make connections between institutional goals and their daily work.

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

   Systematic

   JJC is in the process of developing a performance management policy that will hopefully be comprehensive across all employees at the institution. At this time, information regarding the evaluation/performance reviews are within the different bargaining agreements. JJC has board policies that provide the framework for employee responsibilities. Policies and procedures are on a four-year review cycle

   Faculty have a three-year tenure process with post-tenure reviews. Adjunct faculty are reviewed.

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

   Systematic

   JJC has a written compensation policy currently under review with the Board of Trustees. JJC also participates in survey data to assist with analyzing its market/position employee competitiveness. As this compensation policy is currently under review, JJC is at the Systematic level of maturity as it develops a generally understood process that will be prone to making its activities explicit, measurable, and subject to improvement. A same approach appears to be in place for employee recognition related to the JJC's core values. This process provides a mechanism for employee recognition that ties back to the JJC's core values.

- Promoting employee satisfaction and engagement

   Systematic

   With recent changes in leadership, JJC has been intentional about providing a positive work environment inclusive of a focus on diversity. JJC offers a competitive benefits and compensation package to its employees. Data from the PACE and NILIE surveys disclose employee perceptions and satisfaction levels. Those activities are generally understood and often documented as institutional silos are eroding. Coordination of these activities or formalization that includes the collection of data can help JJC determine the effectiveness of the activities in promoting employee satisfaction and engagement.

- Tracking outcomes/measures utilizing appropriate tools

   Reacting

   Simply indicating employee discussions at a Professional Development Day is an indication of a Reacting level of maturity for tracking outcomes/measures using appropriate tools. No appropriate tools are mentioned here even though JJC uses the PACE survey and the Core Values Recognition Program. There is no indication of a repeatable process but rather a one-time experience.

   JJC fails to demonstrate a process for tracking outcomes 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)

   Systematic

   The systems portfolio addresses all areas under results with one section. They are not broken out for clarity.

   A summary of the 2016 and 2017 PACE results was discussed; however, no longitudinal

data from previous PACE surveys were included.  These results do not appear to be robust enough to provide JJC with the information required to evaluate the areas addressed in this section.  Without this analysis JJC is at a beginning level of Systematic.

JJC is encouraged to expand its reporting of PACE results.

- Comparison of results with internal targets and external benchmarks

    Systematic

    The systems portfolio demonstrates that PACE and NILIE results were compared to national norms.  Further, Halogen Systems Administrator training for HR management was achieved in 2017.  JJC does not indicate it has set internal targets and is encouraged to do so.

- Interpretation of results and insights gained

    Reacting

    JJC notes in the Systems Portfolio there is room for improvement when comparing data points against the PACE and NILIE norms.  This acknowledgement, however, does not indicate an interpretation of results or of any insights gained.

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

JJC recognizes the need for a tool to assess personnel professional development/training needs and the value of administering the PACE survey every two years.  As such, JJC plans to administer the PACE survey again in 2019.

JJC identified several key processes that need to be codified with the establishment of written policies and procedures.  A performance management process that has written guidelines for all employees will go a long way to providing a baseline of data and establishing a repeatable process that will move this area of JJC toward alignment. With several years of PACE results, it is planned JJC will establish targets and measures from which to understand progress in those areas needing improvement.

JJC acknowledges it needs to deliver training that aligns with professional needs; better problem solving techniques, clearer administrative processes and positive motivation of employee performance.  However, there is no indication how these wide ranging concerns were actually determined or how they will be addressed.

3.3: DEVELOPMENT

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

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

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

Systematic

JJC uses a system for employee development that is an extension of an AQIP action project. The Professional Development Advisory Team (PDAT) coordinates professional development for the entire institution.  As such, professional development opportunities are offered twice per year for both the Fall and Spring in-service days.  Other training sessions are offered throughout the year as needed.  Further, leadership development is a voluntary program established to develop leaders with no promise of promotion. Specific areas address training needs as they are identified.

This is an indication of a Systematic approach to providing and supporting regular professional development for all employees.

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

  Systematic

  The New Faculty Seminar at JJC is a process to ensure new faculty receive relevant information as it pertains to being a valued stakeholder in the campus community.  A series of seminars are also available for adjunct faculty.  Funds are available for tuition reimbursement and workshop/conference attendance.  Moreover, faculty are afforded a 1-2 semester sabbatical every six years and have tuition and professional dues reimbursement.

  Professional development opportunities are available in a Systematic manner for faculty to remain current in their disciplines and teaching styles.  JJC could benefit from being more proactive to ensure all faculty take advantage of these opportunities.  Having a more clearly delineated process for ensuring currency will assist JJC in the next level of maturity.

  From the Results section, it is clear JJC has taken a proactive step in conducting an internal audit of the Faculty Credential Process.  While a description of that audit should have been included here, that audit strengthens JJC's Systematic level of maturity.

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

  Systematic

  The need for professional development is identified during each staff employee's annual performance review.  The aggregate of these needs are reflected in the departments' annual APU for budgeting purposes.

  Training needs are defined and supported on a department by department basis.  This is a decentralized process for JJC as individual departments determine and implement their own particular needs.

- Aligning employee professional development activities with institutional objectives

  Systematic

  As outlined in JJC's Systems Portfolio, the administration supports PDAT.  Even though PDAT does align the in-service day offerings with institutional objectives; additional

specific examples of PD alignment with institutional objectives is not defined in the Systems Portfolio.

- Tracking outcomes/measures utilizing appropriate tools

  Systematic

  JJC collects feedback during Opening Week and anonymous surveys are conducted online with appropriate actions taken. Exit interviews also present an opportunity to measure and track employee development. As these are useful tools, they appear to present a rather fragmented view of the process, not allowing for a holistic tracking approach.

  These data collected provide the start of a Systematic approach to tracking outcomes and measures. It would seem the PACE survey, APU/PR process, and measures designed by PDAT could add to the level of maturity for tracking PD outcomes at JJC.

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

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

  Systematic

  In 2014 and 2015, JJC conducted an audit of the faculty credential process. This audit is a positive addition to the information related to faculty development; it should have been introduced as a process that would have enhanced JJC's level of maturity. Not including it indicates a lack of understanding of the composition of process items. This is good information that should have been included earlier as an indication of ensuring faculty are current in their disciplines and pedagogy.

  The review of faculty credentialing indicated some corrective action needs to occur, as 20% of the packets audited needed rework. This indicates a process that may need more resources, ownership, accuracy and attention to compliance.This is actually a very good summary for this process. There is (unfortunately) no other information that indicates a summary of other activities addressed in this section.

- Comparison of results with internal targets and external benchmarks

  Reacting

  The audit examined four areas, but failed to benchmark internal and external entities.

- Interpretation of results and insights gained

  Reacting

  The process prompted JJC to conduct a similar audit for non-faculty employees.

  There has been an interpretation of the results of the faculty credentialing audit and

corrective action put into place. This is a very good example, but JJC does not indicate any other processes as per the other sections of the category.

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

> JJC would like to adopt a system for non-faculty members that mirrors the credential review process.  The institution does not indicate how, when or with what resources this will be occurring.  Once implemented, this will be a strong step in advancing its Systematic level of maturity.

> Processes are in place to facilitate personnel development. A College Professional Development Team focused on the PD offered at JJC has the opportunity to collect survey data and set targets for future employee PD offerings.

**CATEGORY SUMMARY**

Processes are in place for hiring of new personnel and assuring appropriate education, skills and values.  The process for assuring sufficient number of qualified faculty to carry out classroom programs and activities was not adequately addressed aside from succession planning.  JJC has baseline results for the PACE survey and has the opportunity to establish improvements, measures and targets to impact employee satisfaction moving forward. The level of maturity was not consistent throughout this category.  It ranged from beginning systematic in the first two sections to reacting in the last section, where the results were part of the processes presentation.  Further, in the results section only faculty credentialing was addressed.  This leads the review team to believe there is no tracking, evaluation or improvement actions concerning the other sections. In the Improvement sections, JJC fails to adequately recognize the expectations of this section, citing only that the institution would like to develop a similar process (to credential review) to the non-faculty employees. This indicates a lack of understanding or willingness to initiate a comprehensive CQI format for the institution.

In Results sections, JJC's Systems Portfolio addresses all areas under Results with one section.  They are not broken out for clarity.  Responses to the prompts must address the actions, processes, results, and improvements going forward.

**CATEGORY STRATEGIC CONCERNS**

The primary strategic concern, the systematic use of data, is addressed under the overall strategic concerns for the institution.


# Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# IV - Planning and Leading

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

**Instructions for Systems Appraisal Team**

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

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

## Evidence

### CATEGORY 4: PLANNING AND LEADING

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

 4.1: MISSION AND VISION

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

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

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

    Systematic

    The College uses its systematic strategic planning process, coordinated by the SPC, to address the institutional mission, vision, and values.  The College's Board of Trustees and key stakeholders, both internal and external, are involved in the strategic planning process. Using an outside consultant to lead the process, a timeline is established for SPC to complete its review and share communications. This level of maturity could be enhanced with a clearer depiction of how the College actually develops it mission statement.

- Ensuring that institutional actions reflect a commitment to its values

  Systematic

  A review of the College's core values is part of its strategic planning process, and that process is repeatable and communicated across the institution, indicating a systematic level of maturity. Though one core value was modified, there is no description of how JJC actually ensures its institutional actions reflect a commitment to its values.

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

  Aligned

  The College demonstrates an aligned level of maturity when communicating its mission, vision, and values through several mediums, across the institution, and to its various stakeholders.

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

  Systematic

  Using its APU, in its fourth iteration, and PIC processes at a systematic level of maturity, JJC is able to ensure that its academic programs and services are consistent with its mission. Improvements to this process are reported in the IEF as an indicator JJC is aware of and utilizing the PDCA cycle in this instance.

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

  Systematic

  JJC uses its budgeting process to systematically allocate resources to advance its mission and vision, including forms through the Financial Services office that are tracked to provide funding to new activities in accordance with the College's core values.

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

  Systematic

  Using its strategic planning process, which has been determined to be at a systematic level of maturity, metrics are established for each strategic goal. There are designated owners of these metrics who are responsible for generating quarterly reports that reveal the data collected to be analyzed for the accomplishment of the goal. The current systematic level of development could be enhanced with clearly established internal targets and external benchmarks for each goal and a depiction of how the metrics are actually chosen/determined.

**4R1** What are the results for developing, communicating and reviewing the institution's mission, vision and values? The results presented should be for the processes identified in 4P1. All data

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

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

  Systematic

  Though the College's mission, vision, and values are shared in its various media in a manner that is repeatable and documented, this is an indication of the early stages of a systematic level of maturity. This early stage can be developed further with the use of empirical methods of documenting summary results.

- Comparison of results with internal targets and external benchmarks

  Reacting

  As no comparative information was presented, the College is at the reacting level of maturity for this item.

- Interpretation of results and insights gained

  Reacting

  Since no interpretations or insights were provided, it appears the College remains at the reacting level of development.

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

> JJC's mission, vision, and core values appear to be part of its strategic planning process, but the College does not follow up with any real data, therefore no results can be reported, and consequently no comparisons or interpretations. Based on the discussion earlier in the portfolio regarding the College's APU process, which could be considered a best practice, there is a real gap between its application in a 4P1 process and the absence of any results being reported based on that process. Mention of institutional reports (IER, APU) and the College's budgeting process would appear to provide empirical data related to its mission, vision, and values, or they should not be included in the description of the process.

4.2: STRATEGIC PLANNING

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

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

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

Systematic

Through the use of an external consultant and SPC coordination, the College systematically engaged its internal and external stakeholders in its strategic planning process. This process could be strengthened with a discussion of how it is embedded in the culture and is ongoing.

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

  Systematic

  The College's strategic planning and budgeting processes provide it with a systematic manner of aligning its daily operations with its mission, vision, and core values.

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

  Systematic

  JJC's strategic planning process provided the opportunity for participation across the institution which facilitated an understanding of how departmental operations could fit for optimum effectiveness and efficiency, creating a systematic level of maturity.

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

  Systematic

  As the strategic planning process continues to develop its systematic approach to capitalizing on its opportunities/strengths and offsetting its weaknesses/threats, the College is using a SWOT analysis tool, foresees impending and ongoing state budgetary issues, and is undergoing leadership changes. With that track record, the College may want to consider formalizing a process for accounting for those external threats over which it has little control.

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

  Systematic

  Use of the APU process as an opportunity for the College to understand how each department/program is operating allows it to maximize those resources it already has and to plan for future needs. While the APU provides a systematic approach, there is concern the APU cannot address all situations. It is not even clear the APU data is analyzed rather than just being reported.

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

  Systematic

  Metrics for each strategic goal are identified as part of the JJC strategic planning process in a systematic manner. However, once again, it does not appear the College has set either

internal targets or external benchmarks which are an integral part of the PDCA cycle.

**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)

  Systematic

  Empirical data is provided in a systematic manner for some of the College's strategic goals; narration is used for those goals with processes that do not generate data.  This example suggests how the College can improve its processes as they are developed – if data cannot be generated from the identified process, that process needs to be re-evaluated for its effectiveness.

- Comparison of results with internal targets and external benchmarks

  Systematic

  Some data from previous years are available to provide some internal comparisons, but there are no clear external benchmarks, indicating the beginning of a systematic level of maturity. Providing empirical data for all goals that indicate internal targets and external benchmarks will help the College in its level of maturity.

- Interpretation of results and insights gained

  Reacting

  As in previous sections, the College did not take the opportunity to provide any interpretations or insights, revealing its reacting level of maturity.

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

  The College's Strategic Planning process appears to have the beginning structure to assist JJC with its planning into the future.  The five strategic goals are clear and the JJC mission, vision, and values are included in the process.  Having more clear connections between the APU process (which appears to be utilized throughout this portfolio and could well be the best practice process for the College), the Institutional Effectiveness Report (which should be the driver for institutional improvement), and the Strategic Plan (which should provide the structure for continuous improvement into the future) will help the College with its approaches to processes and improvements, and therefore a higher level of maturity.

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)

    Systematic

    JJC has a traditional shared governance model that flows from the state level with the Illinois Community College Act to the College Board of Trustees with elected representatives from the College's seven-county service district to the JJC President, who reports directly to the Board and leads the daily operations of the College. This model is systematically implemented at JJC to support its leadership and shared governance.

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

    Systematic

    Using the Illinois Community College Act as its base, the College Board of Trustees has implemented policies to systematically establish shared governance and oversight of institutional operations. These policies define the roles and hierarchical structure for oversight, management, and decision making at the College.

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

    Systematic

    The leadership structure that is clearly in place at JJC provides a systematic approach to the Board of Trustees having oversight of the College while the College President and leadership team have the delegated responsibility to manage the daily operations of the College with assistance from the faculty in academic matters.

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

    Systematic

    While there is ample evidence of an aligned approach to ensuring open communication at the College with a clear Shared Governance Structure, meetings across the institution to share information, and a bi-weekly newsletter, the College has already identified the need for Internal Communication as a strategic goal. This identification indicates the College is working to correct an issue regarding College communication. Once the Internal Communication Issue is corrected, the aligned approach can perhaps be achieved. For now, the College is at the systematic level of maturity.

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

    Systematic

    JJC has implemented a systematic level of communicating across its institutional units –

starting with the President's Cabinet -- to instill a collaborative method of maintaining its academic standards.

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

   Reacting

   While it is possible to link the College's systematic level of communication across the institution to providing effective leadership to all institutional stakeholders, JJC has elected to leave that link to the reader; it does not specifically address how it provides effective leadership to and for its stakeholders. Providing a clear link between communication and leadership could help the College move beyond its current reacting level of maturity for this prompt.

- Developing leaders at all levels within the institution

   Systematic

   It is clear the College provides leadership training opportunities – President's Academy for Leaders, Chamber of Commerce Leadership School, sabbaticals -- for its personnel in the beginnings of a systematic level of maturity. What is not as clear is how these opportunities are actually taken advantage of by College personnel and a track record of how the opportunities result in actually developing leaders. Tracking results of these activities and developing a clear process for leadership development could help JJC understand its efforts in this area and take steps to move to a higher level of maturity.

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

   Systematic

   Board policies outline a Code of Conduct and address Conflicts of Interest in a repeatable, systematic manner to help ensure College personnel act in accordance to the College mission and vision. While repeatable, this approach could be strengthened with an actual process that is measurable and subject to improvement.

- Tracking outcomes/measures utilizing appropriate tools

   Systematic

   Use of the PACE survey has provided the College with a systematic level of maturity and is applicable for tracking its approach to leadership

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

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

   Systematic

The College's use of the PACE survey provides it with the beginning level of systematic maturity with repeatable data for institutional structure, supervisory relationships, teamwork, and student focus. Additional measures of leadership and a clear process for providing meaningful results for improvement could help JJC mature to a higher level.

- Comparison of results with internal targets and external benchmarks

    Systematic

    The PACE survey provides the College with systematic external benchmarks, but the College shows no indication of following suit by establishing internal targets. Doing so would help the College move to a higher level of maturity.

- Interpretation of results and insights gained

    Reacting

    As has been the case throughout this portfolio, the College fails to provide any insights gained from its use of the PACE survey results regarding leadership. Having results and not using them for improvement reveals a reacting level of maturity.

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

From its descriptions, JJC makes it difficult to follow a flow in its approach to leadership. While it establishes clear roles for its Board and leadership chain, has leadership development activities available for interested personnel, and a faculty committee structure, it approaches leadership by describing communication channels. While there is certainly a connection between leadership and communication, one cannot be used to describe the other. The College is aware of its communication issues and has made it a priority with a College Strategic Goal. Identifying clear processes for its leadership approach that include data, measures, targets, results, and improvements based on those results can provide JJC with a strong base for its leadership into the future.

4.4: INTEGRITY

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

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

- Developing and communicating standards

    Systematic

    JJC has a systematic process outlined in Board policies to review every policy and procedure at least once every four years. Changes are proposed through the existing leadership

structure through its Policy and Procedure manual. Discussion of the role of shared governance in this process could help to further develop the College's systematic level of maturity.

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

  Systematic

  All new JJC employees have a systematic onboarding process that provides training and modeling of ethical and legal behaviors expected by the College. Faculty have an additional one year orientation with a mentor.

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

  Systematic

  The College's approach to this prompt is to focus on its selection and training of personnel in ethical practices and its policies for dealing with those who do not act with integrity and ethics. Coupled with the Board's bid policies, the College has a systematic approach to operating with integrity. Describing actual processes – more like the bid process -- rather than personnel policies could show a higher level of maturity.

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

  Systematic

  JJC uses traditional means of communication – website, web pages, catalog, newsletters, program sheets, cost sheets, recruitment materials, myJJC portal, counselors – to demonstrate a systematic approach to making information available to its constituents.

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

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

  Systematic

  JJC exhibits the beginnings of a systematic approach with data related to processes in this section – policy review, whistleblower, employee manual, and communication devices. The College also includes an unqualified opinion on its financial audit and a Certificate of Achievement in Financial Reporting – documents related to operational practices. While this is important information related to ethical practice, the audit is not mentioned in the process section (4P4) and does not actually constitute a result of a planning and leading process. Results from the College's Strategic Plan would be an ideal fit here.

- Comparison of results with internal targets and external benchmarks

Reacting

JJC does not delineate comparative data in its narrative approach to relaying summary results of data to support evidence of integrity in College operations that appears to be reactive. Comparisons are generally based on year-to-year data sets and targets.  In addition, there is minimal mention of external benchmarks (one reference to an industry standard). Creating tables that clearly show the data collected for a described process, its internal targets and external benchmarks, and targets for subsequent years could help the College mature in this area.

- Interpretation of results and insights gained

  Reacting

  In the narrative approach to all the Results prompts, the College fails to provide any interpretations or insights, showing itself to be at the reactive level of maturity.

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

The College has the beginnings of what could be a strong approach to ensuring the integrity of the institution and its personnel.  Once JJC solidifies that approach with clear processes that identify the data to be collected, internal targets and external benchmarks for that data, analysis of that data, results of the analysis, and clear improvements coming from those results, the College will be able to document a higher level of maturity.

## CATEGORY SUMMARY

The College has undergone recent leadership changes that may account for some of the apparent disjointed writing of not only this Category but the entire portfolio.  With leadership change comes change in approaches to institutional goals.  Board, and therefore institutional, policies are under review for improvement.  Sustainability of improvements to these policies will be a key to the maturity of the College. Communication is a clear goal at JJC and steps have been/are being made to address that goal.  But communication does not address leadership; it is only a part.  JJC is encouraged to identify the other aspects of leadership that are priorities for it as an institution and then devise processes to address those other aspects.   Making its Strategic Planning process more a part of this section could also provide more structure to the College's responses to the prompts.

## CATEGORY STRATEGIC CONCERNS

While process statements indicate data is being collected, little data is reported in the Results sections of Category 4, with little to no information provided about comparisons, insights/ interpretations of the Results.  Of course, if little is reported in the Summary of Results, it is difficult to make insightful comments.  This demonstrates a strategic issue in the apparent lack of understanding by the College – or maybe the writer of the portfolio, but the portfolio is a reflection of the College – of the components of a CI process and how the portfolio is to be written to address the process and data collection, targets, analysis, results, and improvements based on those results.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# V - Knowledge Management and Resource Stewardship

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

**Instructions for Systems Appraisal Team**

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

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

## Evidence

### CATEGORY 5: KNOWLEDGE MANAGEMENT AND RESOURCE STEWARDSHIP

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

5.1: KNOWLEDGE MANAGEMENT

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

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

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

  Reacting

  Data is selected, organized, and shared by the College's office of Institutional Research and Effectiveness (OIRE) using primarily the Ellucian Colleague ERP system.  The OIRE gathers National Survey comparable data and satisfies requests from external government agencies.  This institution's data collection process is at a systematic level of maturity; however, the aspects required of this prompt such as organizing, analyzing and sharing data

appear to be reactive.

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

    Reacting

    As an institution it is unclear how the College determines data, information and performance results that units and departments need to plan and manage. This process is decentralized as individual programs are primarily responsible for identifying what data they need. Without an overarching plan of what, why and how, this appears to be a very reacting process.

- 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

    Reacting

    The College has identified its own difficulties with data management and taken productive steps to address them. A 2013 Action Project to improve data stewardship was a result of feedback from the last Systems Appraisal, and Improve Data Accessibility and Integrity is a goal in the current Strategic Plan. While these positive steps may result in repeatable and explicit processes, this foundational work appears to still be in a developmental stage.

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

    Systematic

    Security is handled by the Information Technology Division. This involves the physical storage and accessibility of institutional data. Through established policies, the Information Security Office maintains the College computing systems, investigates system intrusions and communicates security awareness to JJC employees. ORIE complies with report/data requests in a timely manner.

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

    Systematic

    JJC uses a data reporting and analytics tool as part of its ERP (DROA with Colleague). Canvas provides measures for course integration in its platform; additional software tools are used for scheduling, early alerts, employee performance and facilities management.

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

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

Reacting

There is no explanation of summary results, measurements, goals or targets. The College provides screen-shots of its data management portal indicating an apparent lack of understanding of what is being asked for in the results section.

- Comparison of results with internal targets and external benchmarks

Reacting

JJC does not provide a comparison of targets or benchmarks, indicating a reacting level of maturity.

- Interpretation of results and insights gained

Reacting

No interpretation of results are provided

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

Even though the College has been addressing its data management system since its Action Project in 2013 and has made Improved Data Accessibility and Integrity a goal in its 2016-2019 Strategic Plan, there is work to be done to accomplish a systematic system. The College has indicated various tools that are used across the College to gather data and some procedures and processes have been established. However, there is no overall plan for how to use data for unit/department or institutional performance and improvement.

5.2: RESOURCE MANAGEMENT

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

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

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

Systematic

Even though it appears the College is using an FCA that is ten years old, it also has a Capital Improvement and Master Plan for its physical resources that provide a systematic approach to maintaining and improving the College facilities. The College's budgeting process provides a three-year financial plan that utilizes a three-year technology plan for maintaining JJC's technological infrastructure.

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

  Aligned

  The College has a current strategic plan. The College goals that were identified align with the College's mission and the College produces a quarterly Strategic Plan Progress Report that communicates the progress achieved for each goal.

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

  Reacting

  As part of the College's budgeting method, annual budgetary requests are submitted to and approved by the President's Cabinet. Each program's/department's annual APU is to identify resources needed but it is not clear how this process directly informs the annual budget. It is also not clear in what way JCC reviews positions or reviews budget lines to ensure educational purposes are not adversely affected. This process has the potential to be a repeatable and measurable process, yet the portfolio explanation does not provide these systematic links. As such, the response is reacting.

- Tracking outcomes/measures utilizing appropriate tools

  Reacting

  The tracking appears to be fragmented and a series of activities that are not integrated. Data and reports are generated and presented to upper management and the College Board at periodic intervals. The APU process is how department initiatives are identified, with the department requesting any needed resources through this process. Goals are established at the individual department/program level which support the institutional goals. However, it is unclear how this occurs, how it is monitored, prioritized and who makes various decisions.

**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)

  Reacting

  Other than a narrative on its financial stability and reporting, the College provides little summary results of its measures. Measures from tools previously noted could be reported here.

- Comparison of results with internal targets and external benchmarks

  Reacting

  No comparison information is provided.

- Interpretation results and insights gained

    Reacting

    No interpretations or insights are provided.

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

The College has processes in place to substantiate its resource management and operations. However, without measures and targets established the College has positioned itself in a reacting level maturity. The College acknowledges a very challenging operational environment regarding the lack of State funding. It would seem that it is more important than ever to have a plan and measurable processes in place to combat this negative situation.

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

    Systematic

    The College has a systematic process for monetary and budget flows. The annual budget is developed through a variety of perspectives, from direct to indirect costs to auxiliary programs. The College's yearly budget is considered in the context of a three-year financial plan and the College Strategic Plan.

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

    Systematic

    Monitoring of budgets and financials are completed on a monthly basis. Budget adjustments are required for any changes through an approval process.

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

    Systematic

    The College has a dedicated Chief Information Security Officer who provide leadership in the awareness, development and support of information security. Institutional policies are relied on to provide  guidance related to responsible use of technology. The system is password protected.

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

    Aligned

The College has a systematic plan for maintenance of the physical infrastructure that begins with the Capital Improvement Plan (CIP) supported by the Master Plan and Capital Renewal and Deferred Maintenance Plan. Projects are prioritized with a budgetary summary and submitted to the President's Cabinet and Board of Trustees for review and approval.

- Managing risks to ensure operational stability, including emergency preparedness

  Aligned

  JJC has an aligned level of maturity in its three-pronged approach to managing risk that ensures operational stability.  The Environmental, Health and Safety Department is charged with creating minimal risk in the midst of emergencies.  The Campus Police Department works to ensure a stable environment and the Behavioral Intervention Team supports students needing behavioral guidance. The College's Emergency Response Plan provides guidance for these groups and all employees at the College.

- Tracking outcomes/measures utilizing appropriate tools

  Reacting

  The narrative does not indicate how the College tracks outcomes/measures for this section.  One would expect a trend analysis with information relating to the Capital Improvement Plan, safety results, and perhaps data from a Clery Report.

**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)

  Systematic

  The College has maintained fiscal responsibility in a time of difficulty and loss of a major revenue stream for the State.  The narrative summary of the College's financial health does provide measures that are repeatable and measurable. Therefore, JJC appears to have a systematic level of maturity for this component. The addition of tables, trends and other analysis would strengthen the summary.

- Comparison of results with internal targets and external benchmarks

  Reacting

  JJC does not provide comparison results of internal targets or external benchmarks.   Based on what is provided for Summary Results, the College should have internal comparisons from previous years, should have established targets, and could compare its results to other Illinois institutions of higher education.

- Interpretation of results and insights gained

  Reacting

There were no interpretations of results and insights gained reported.

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

The College is to be commended for maintaining its financial stability in this difficult environment. However, financial processes were the only results presented in this sub-category and these were void of target and comparison data. JJC describes the processes that support its infrastructure but none were presented in the results section.

## CATEGORY SUMMARY

The portfolio overall presents a general overview of the status of the College regarding knowledge management, resource management and operational effectiveness. Plans and/or action projects are presented for data stewardship, capital improvement, master plan and a three-year financial plan, yet little data or evidence is presented to support the processes. For instance, while the "Results" commentary supports the institution's budget strength, the portfolio does not respond to HLC's prompts. Data is not provided to show results of the College's implemented processes.

## CATEGORY STRATEGIC CONCERNS

The primary strategic concern, the systematic use of data, is addressed under the overall strategic concerns for the institution.

# Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# VI - Quality Overview

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

**Instructions for Systems Appraisal Team**

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

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

# Evidence

## CATEGORY 6: QUALITY OVERVIEW

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

6.1: QUALITY IMPROVEMENT INITIATIVES

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

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

- Selecting, deploying and evaluating quality improvement initiatives

  Systematic

  JJC reports that a new process is evolving at the College that addresses how it selects, deploys, and evaluates quality improvement initiatives. Leadership will identify College Priorities (CPs, which will also be AQIP Action Projects) based on information collected through the APU/PR, strategic planning, Financial and Master Plans, unit initiatives and the

IER. CP teams will then be deployed to address and evaluate progress made on the completion of the CPs.  Since this process is new, it does not have a track record, but it does reflect a positive approach in a Systematic level of maturity as this process should help break down any remaining silos within the College, clarify JJC improvement efforts, and establish coordination and implementation of effective practices across all units of the institution.

To be clear, the APU/PR process appears to be a best practice process that is based on the CI PDCA cycle.  However, that cycle does not currently appear to be implemented across the College.  It appears the College, in preparation for this appraisal, has taken appropriate steps to get better organized.  Throughout this portfolio, statements are made that make it clear the College does not have a firm grasp on the CQI/AQIP approach to institutional operations.  Even in this section, the College notes that it may send a CP Team to a Strategy Forum.  Strategy Forums are designed for institutional teamwork and a single Action Project may be an outcome of the teamwork; sending a single CP Team may position the institution to miss a significant benefit of the strategy forum - having an institutional discussion regarding quality improvement.

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

    Reacting

    After delineating a new approach to align its processes for addressing quality improvement initiatives, the portfolio stops short and simply lists steps the institution has taken to address the strategic challenges identified in the previous portfolio appraisal. The College does not show clearly how the various components of the AQIP process are aligned.  Again, this is an indication the College does not have a firm grasp on its approach to being a CQI institution.

    The new approach described under the "Selecting, deploying, and evaluating" prompt above is an ideal way to align the Systems portfolio, APs, CQR/CE, and Strategy Forums. As in several other areas of the portfolio, the College does not continue its initial narrative. This raises questions about how deliberately the process was connected to the the AQIP infrastructure. The institution limits itself  to reactive by listing actions it has pursued.

**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.

    Reactive

    It is difficult to to address any empirical results of an institution's quality improvement initiatives. That said, the Results section should reflect an understanding of the linear nature of Process, Results, and Improvement reporting. If the initiatives are too new to record results, this should be stated. JJC follows the pattern it has established throughout this portfolio by listing additional activities rather than Results. This merits a Reacting level of understanding.

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

The College has much work to accomplish before entering the final steps of its current accreditation cycle. While the College identifies its own shortcomings in implementing initiatives and action projects, the College leadership does not systematically identify the need or a plan to embrace the broader self-reflective processes necessary to grow as an institution under the AQIP system.

JJC may indeed want to take to heart a comment in its last Institutional Effectiveness Report that refers to the extensive number of initiatives and projects occurring at the College. Limiting the number of initiatives may allow the College leadership to do more broadly based planning work that will provide a cohesive context for future initiatives that the College elects to pursue.

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

  Reacting

  Establishing the APU/PR process is a best practice for the College and provides a means for embedding the PDCA concept across the institution.

  PIC appears to be a way to further develop the College's infrastructure, though it is not clear how PIC has impacted that infrastructure or its role in providing resources to support that infrastructure. Since it is just introduced in this final Category, it may be a new component in how the College is addressing its CI approach. These processes are ranked at a reacting level given lack of clarity.

  The College acknowledges in the 2017 Institutional Effectiveness Report that the data stewardship and number of staff in that area of the College are not adequate to produce the information needed to evolve this culture.

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

  Reacting

  JJC identifies its new shared governance structure as a mechanism that provides a foundation and model for the consistent application of CQI principles. Shared governance, though a good objective, is only one factor in ensuring continuous quality improvement. There is no mention or evidence of how CQI principles are promoted across the College, within operations or as part of the culture. For this reason, the process is ranked at a reacting level of maturity.

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

Reacting

While it is difficult to confirm actual practice based on this written report, there are sufficient informational gaps and inconsistencies to suggest that JJC is far from systematically learning its CQI initiatives. To be clear, the College does not suffer from a lack of CQI initiatives. There is, however, no clear discussion of systematic learning in this portion of the portfolio and very few examples presented in other areas of the portfolio.

The reviewers note that the threads of a sound infrastructure are described throughout the portfolio. These threads were not, however, pulled together here to demonstrate a cohesive fabric. This leaves the institution ranked as reactive.

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

Systematic

It is now clear new College leadership is playing and will play its appropriate and crucial role in JJC's CQI endeavors.  That leadership is just getting established, but appears to be leading in at least a Systematic level of maturity.  Adherence to basic CQI principles can be a guide to the next level of maturity.

The institution's response here is perhaps the most clarifying, honest, and revealing statement in the entire portfolio. If the portfolio content was consistently presented from this perspective, JJC's difficulties with CQI and their growth may have garnered more credibility. While it is clear throughout the portfolio the College is struggling with its organizational CQI work, a more accurate depiction of that struggle at all levels in the portfolio can assist the College in making its next steps in its quality journey and make it easier for the reviewers to provide appropriate feedback.

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

Reacting

While there really are not any Results to report, it is clear the College has the basis to Systematically re-engineer its current operations to bolster its culture of quality. The lack of results ranks this as reactive.

It is important that the College has encouraged two individuals to become peer reviewers. This will help the College to present the story in a more conclusive and clear manner. They can also help College leadership define a broader CQI infrastructure that is sorely needed for continued improvement.

**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?

The College acknowledge its quality journey is a work in progress.

Returning to CQI basics to ensure there is understanding and acceptance of CQI principles throughout the institution, examining current practices with those fresh eyes described earlier, and establishing clear processes that all follow the PDCA cycle will greatly enhance the College's CQI journey and its ability to relate that journey in its next portfolio.

**CATEGORY SUMMARY**

The College understands the fundamental PDCA cycle, yet the institution struggles with the basic tenets of the AQIP pathway that provides the mechanisms to effectively navigate toward broader goals than will be encompassed in a single PDCA cycle. This includes efficiently supporting a CQI culture, presenting efforts in the context of the portfolio, establishing assessment processes for general education outcomes, and appropriately pairing processes with results.

The College shows potential with their recent work in their APU/PR system, as it has great potential but a ways to go to build a data reporting system that focuses attention on both performance and institutional priorities.

**CATEGORY STRATEGIC CONCERNS**

A narrow definition of CQI focuses only on the PDCA cycle for initiatives. Knowledge of this cycle is evident throughout this portfolio. As the College has experienced, this cycle can easily lead to dead-ends, frustration, and thinly spread efforts when college leadership does not deliberately exercise a broader understanding of CQI management principles that should support the PDCA cycle. This broader infrastructure could include institutional KPIs and defined goals that are tied to the mission, budget, strategic plan and the interlocking framework of the AQIP portfolio. This operational framework needs to be provided through continuous communication by the institution's senior leadership. While the annually generated APU reports appear to be a best practice for aligning these efforts, the College may be well-served to ask what steps are necessary to systematically mine these reports for information. No doubt, the reports can already be used to justify a pre-determined decision, but it is not clear how will those reports will help leadership identify an unknown situation so that it can be preemptively addressed.

As the institution grows in its broader understanding of how to provide leadership in a CQI culture, solutions to other concerns will likely be identified. These other issues could include identifying appropriate pairings between data, processes and KPI's; how to summarize and display data trends, and how appropriately address the AQIP portfolio prompts with institutional practices.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 1 - Mission

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

# 1.A - Core Component 1.A

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

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

## Rating

Clear

## Evidence

The College uses its strategic planning process to address its institutional mission, vision, and values.  This method of developing its mission statement appears to be suited to the JJC culture. The College's Board of Trustees and key stakeholders, both internal and external, are involved in the strategic planning process, and therefore,the development of the College's mission statement.  Using an outside consultant to lead the process, a timeline is established time for SPC to complete its review and share communications internally and externally.

Using its ubiquitous APU process, in its fourth iteration, and PIC processes, JJC is able to ensure that its academic programs and services, as well as its enrollment profile, are consistent with its mission.  Improvements to this process are reported in the IEF as an indicator JJC is aware of and utilizing the PDCA cycle in this instance.

JJC uses its budgeting process to allocate resources to advance its mission and vision, including forms through the Financial Services office that are tracked to provide funding to new activities in accordance with the College's core values.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 1.B - Core Component 1.B

The mission is articulated publicly.

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

## Rating

Clear

## Evidence

In addition to its Strategic Plan, the College communicates its mission, vision, and values through traditional mediums -- catalog, website, publications, -- across the institution and to its various stakeholders.

Reviewed as part of the Strategic Planning process by internal and external stakeholders, the College mission statement has currency that reflects JJC's commitment to accessibility, inclusion, innovation, student learning, and community service.

The College serves a designated district in Illinois and has developed programs to serve its constituents within that region. In addition, JJC welcomes all students seeking higher education opportunities who can benefit from the Colleges programs and services.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 1.C - Core Component 1.C

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

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

## Rating

Clear

## Evidence

The institution identifies cultural enrichment as part of its mission and inclusion as an institutional value. This is carried through to the institution's general education learning outcomes where students are expected to demonstrate and understanding of cultural issues.

The institution tracks its students demographics and compares these data to the demographics of its service area. JJC's service area is 17% Hispanic while its student body is 27% Hispanic.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 1.D - Core Component 1.D

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

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

## Rating

Clear

## Evidence

A review of the College's core values is part of its strategic planning process, which is communicated across the institution to share not only the core values with internal stakeholders, but also to inform them of any modifications.  These internal stakeholders have been informed through the onboarding and in-service processes to perform their duties in accordance with the institutional core values in order to meet the College's public obligation.

JJC uses its budgeting process to allocate resources to advance its mission and vision, including forms through the Financial Services office that are tracked to provide funding to new activities in accordance with the College's core values.

Using its strategic planning process, metrics are established for each strategic goal.  There are designated owners of these metrics who are responsible for generating quarterly reports that reveal the data collected to be analyzed for the accomplishment of the goal.

The College engages its identified external stakeholders through its strategic planning process and meets the needs of those stakeholders as College resources allow.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 2 - Integrity: Ethical and Responsible Conduct

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

# 2.A - Core Component 2.A

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

## Rating

Clear

## Evidence

JJC has a Board policy to review every institutional policy and procedure at least once every four years to ensure their currency and integrity. Changes are proposed through the existing leadership structure through its Policy and Procedure manual. Board policies outline a Code of Conduct and address Conflicts of Interest to help ensure College personnel act in accordance to the College mission and vision. All new JJC employees go through an onboarding process that provides training and modeling of ethical and legal behaviors expected by the College. This training is designed to ensure JJC operates its various academic and service functions with integrity. Faculty have an additional one year orientation with a mentor.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 2.B - Core Component 2.B

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

## Rating

Clear

## Evidence

As an ethical practice, JJC uses traditional means of communication – website, web pages, catalog, newsletters, program sheets, cost sheets, recruitment materials, myJJC portal, counselors – to make information available to its constituents.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 2.C - Core Component 2.C

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

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

## Rating

Clear

## Evidence

JJC has a traditional shared governance model that flows from the state level with the Illinois Community College Act to the College Board of Trustees with elected representatives from the College's seven county service district to the JJC President who reports directly to the Board and leads the daily operations of the College that reflect institutional priorities to preserve and enhance the College.

Using the Illinois Community College Act as its base, the College Board of Trustees has implemented policies to establish shared governance and oversight of institutional operations, considering any reasonable constituent interests while preserving its independence from influence from those constituent interests. These policies define the roles and hierarchical structure for oversight, management, and decision making at the College.

The leadership structure clearly in place at JJC provides the Board of Trustees having oversight of the College while the College President and leadership team have the delegated responsibility to manage the daily operations of the College with assistance from the faculty in academic matters.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 2.D - Core Component 2.D

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

## Rating

Clear

## Evidence

JJC's Board of Trustees Policy 7.6.2 addresses academic freedom. This policy is upheld by descriptions of integrity standards and practices in the employee handbook, faculty contract and Academic Affairs Handbook and the Internal Review Board Manual.

Integrity is fostered in students through course syllabi that state expectations, the institution's Academic Honor Code, and Student Code of Conduct. The institution provides instruction to students who are found in violation of these standards and the same instruction is offered to students as a Life Skills course.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 2.E - Core Component 2.E

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

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

## Rating

Clear

## Evidence

The institution has a comprehensive set of policies to address various facets of ethics that will be encountered in and academic and workplace setting.The institution provides effective oversight and support services to ensure the integrity of research and scholarly practice conducted by its faculty, staff, and students. Ethical research practices are confirmed by the IRB.The Board of Trustee Policies outline the College Personnel Rights and Responsibilities regarding intellectual property use.

Students are informed of ethical learning practices through their course syllabi which include statements regarding the Academic Honor Code, Intellectual Property, the Student Code of Conduct, Sexual Harassment and the use of technology. Student academic violations are tracked. Students who are found in academic violation attend Life Skills seminars that address the ethical concerns of the violations. These seminars are made available to all students.

The institution has and enforces policies on academic honesty and integrity. The institution defines ethical practices for employees and integrity through its employee handbook, faculty contract, Academic Affair Handbook.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

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

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

# 3.A - Core Component 3.A

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

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

## Rating

Clear

## Evidence

The College identifies program learning outcomes that are reviewed and approved by the college's curriculum processes. These outcomes are in alignment with expectations set forth by the Illinois Articulation Initiative General Education Core Curriculum and approved by the Illinois Community College Board. The college seeks input from area employers and transfer institutions in the form of advisory boards and faculty networking with area employers. The college maintains professional program accreditation where it accreditation is offered. It currently offers 17 accredited programs.

The College's Course Catalog includes course prerequisites and degree prerequisites for transfer degrees, and Career and Technical Education programs. The College has identified program learning outcomes that are reviewed and approved by the college's curriculum processes.

The institution uses common course syllabi to assure that consistency across all models of delivery and all locations. The syllabi are approved by department chairs and deans to assure consistency.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 3.B - Core Component 3.B

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

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

## Rating

Clear

## Evidence

The College has identified appropriate general education learning outcomes for the degree levels of the institution. The College has identified evaluation rubrics that define appropriate standards as defined by AAC&U's LEAP/VALUE rubrics.

The College has identified a appropriate set of general education outcomes that identify skills needed by all students.

All JJC courses identify student learning outcomes for the course. All JJC programs identify student program learning outcomes which are mapped to the defined curriculum for the program. JJC's general education outlines the skills necessary for students to gather, analyze and communicate information, engage in creative work and adapt to a changing environment. These skills include oral and written communication, understanding the physical world, apply correct mathematical methods, using technology, understanding cultural issues, thinking critically and analytically.

The General Education program include a student learning outcome that addresses understanding cultural issues.

While research is not an expectation at the College, the college does afford opportunities for students to contribute to scholarship through the Honors Program and projects.

## Interim Monitoring (if applicable)

# 3.C - Core Component 3.C

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

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

## Rating

Adequate

## Evidence

JCC's staff are appropriately qualified, trained, and supported in professional development. If necessary, employee performance improvement plans are created. JJC faculty are required to be available to students through office hours.

In light of declining and unreliable state support, it is difficult to maintain customary quality of programs and student services. JJC may seek to benchmark its practices against institutions that operate under similar conditions to document that its practices are in-line with its institutional peer group.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 3.D - Core Component 3.D

The institution provides support for student learning and effective teaching.

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

## Rating

Clear

## Evidence

JCC provides academic advising, placement testing and ELL services. JCC requires mandatory student orientation for full-time students. There is no evidence this mandatory support system is provided for all students, including part-time.

JJC addresses the academic needs of its students through academic placement, learning support and developmental instruction.

JJC provides technological infrastructure and libraries to students.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 3.E - Core Component 3.E

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

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

## Rating

Clear

## Evidence

The College's mission is:

> *Joliet Junior College is an innovative and accessible institution, dedicated to student learning, community prosperity, cultural enrichment, and inclusion. JJC delivers quality lifelong learning opportunities empowering diverse students and the community through academic excellence, workforce training, and comprehensive support services.*

The institution demonstrates that is dedicated to student learning through the curriculum that it offers. The College's curriculum is appropriately focused on developing skills leading to employment and transfer to 4-year colleges.

The College offers course work through its main campus, two satellite campuses, three education centers and 30 high schools. Programming is offered on-line and in a face-to-face setting.

The College's general education program addressed cultural enrichment and inclusion.

There is no indication that the institution fulfills its claims regarding co-curricular activities.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 4 - Teaching and Learning: Evaluation and Improvement

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

# 4.A - Core Component 4.A

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

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

## Rating

Clear

## Evidence

The institution conducts regular 5-year reviews for occupational programs. On an annual basis, the institution collects similar data as for the 5-year reviews to track programs over time.

The institution does evaluate life experience credit and other forms of prior learning through its registration office.

The institution used the Illinois Articulation Initiative to evaluate statewide transfer for college credit from other institutions. Where this is not possible, department faculty identify the transfer merit of prior learning experience.

The institutions determines its own prerequisites using placement testing scores and content of courses. These prerequisites are evaluated and approved along with course content through the College's Curriculum Committee. Dual credit courses and programs for high schools use the same syllabi as traditional course. Syllabi are approved by department heads and deans. Instructors are held to the same hiring standards as faculty teaching traditional sections.

The institution maintains specialized accreditation for 17 programs.

The institution evaluates the success of its graduates through graduate surveys and employer surveys.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 4.B - Core Component 4.B

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

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

## Rating

Adequate

## Evidence

The institution has stated goals for student learning in the form of general education learning outcomes, program learning outcomes and course learning outcomes.

The institution has processes in place to assess the achievement of student learning outcomes. These processes use rubrics and for general education are based on AAC&U models for general education assessment. The institution also has processes in place to collect this data.

The institution does not provide compelling evidence that program assessment is widely practiced or that co-curricular assessment is practiced. No process was described that illustrates how knowledge gained through assessment is used to better student learning.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 4.C - Core Component 4.C

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

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

## Rating

Adequate

## Evidence

JJC has a Strategic Enrollment Management Plan and is beginning the next iteration of it. The College uses the plan to allow students to self-identify needs and programs.

JJC collects and analyzes retention, persistence, and completion of programs. The College does not show it effectively analyzes the data and uses it for improvement.

JJC Office of Institutional Research and Effectiveness uses IPEDs data in selecting and monitoring data points. However, the systems portfolio demonstrates room for improvement in JJC's ability to effectively analyze the data for improvement.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 5 - Resources, Planning, and Institutional Effectiveness

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

# 5.A - Core Component 5.A

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

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

## Rating

Adequate

## Evidence

The College received an unqualified opinion on its Comprehensive Annual Financial Report for the last five years. They were also awarded the Certificate of Achievement of Excellence in Financial Reporting by the Government Finance Officers Association.

For the fiscal year 2018 planning cycle, the State of Illinois did not have a budget and therefore, no State funding. The College made up for this 10% deficit by increasing student tuition by $19.00 per credit hour.

Each department/program identifies needed resources through the annual APU process. However, it is not clear how these resource requests are prioritized and submitted to the President's Cabinet for review and approval.

Strategic Goals are established through an established Strategic Planning process for three year cycles. The Goals support the College Mission and are realistic.

There is an established process in place to identify the qualifications needed for each person hired at the college. The hiring process adheres to the position description, qualifications and skills identified. Onboarding and training are provided for all staff.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 5.B - Core Component 5.B

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

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

## Rating

Clear

## Evidence

With full Board participation, the College's strategic planning and budgeting processes provide necessary oversight for its financial and academic policies and practices and align its daily operations with its mission, vision, and core values. In addition to its regular and special meetings, this participation provides the governing board with knowledge of institutional operations.

JJC has a traditional shared governance model that flows from the state level with the Illinois Community College Act to the College Board of Trustees with elected representatives from the College's seven county service district to the JJC President who reports directly to the Board and leads the daily operations of the College.

Along with its shared governance model, through its institutional leadership and committee structures, the College engages its internal and stakeholders in a collaborative effort to establish and review academic and support service practices.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 5.C - Core Component 5.C

The institution engages in systematic and integrated planning.

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

## Rating

Adequate

## Evidence

The College's strategic planning and budgeting processes provide it with the necessary resources to align its daily operations with its mission, vision, and core values. Use of the APU process as an opportunity for the College to understand how each department/program is operating allows it to maximize those resources it already has and to plan for future needs.

While the APU provides the College with a clear approach for understanding the needs of each academic area, there is concern the APU does not and cannot address all functions across the institution. In addition, while methods are in place to address student learning assessment, evaluation of operations, planning, and budgeting, JJC does not appear to have linkages between those methods.

Through the use of an external consultant and SPC coordination, the College engages its internal and external stakeholders in its strategic planning process.

JJC has a CIP and Master Plan for its physical resources to maintain and improve the College's facilities. In a similar manner, the College's budgeting process provides a three-year financial plan that utilizes a three-year technology plan for maintaining JJC's technological infrastructure. These plans are accomplished considering emerging factors and possible future fluctuations in economic support, something at which Illinois institutions have become necessarily adept.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# 5.D - Core Component 5.D

The institution works systematically to improve its performance.

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

## Rating

Unclear

## Evidence

The institution uses the APU process to gather data from across the institution to monitor effectiveness and track improvement initiatives in its academic operations. The College leadership uses the APU reports to develop a College Effectiveness Report. While the APU process is an exemplary example of how JJC can function, it has not and perhaps cannot be used across the institution in all its operations and there is no evidence provided that JJC has such a process or processes to encompass the totality of the institution.

The College acknowledges that it is leveraging new leadership to improve its ability to learn from operational experience in a CQI context. The necessary infrastructure for this learning was not evident in the portfolio. This could include the use of KPIs, pre-established goals that are identified through comparative measures, and well-defined processes that are associated with appropriately paired data. Where the College has moved toward establishing this infrastructure, it is not clear that is used across the institution.

It is important to note the institution has identified a strategic plan, and that it is aligned with the institutional mission. While the plan itself represents a systematic approach to achieving mission, it does not necessarily represent a systematic approach to performance improvement that might be coordinated through the institutional research office. Performance improvement relies on a network of data that provides insight regarding where improvements may be effective. Quote from Category 5, Improvements for Subcategory 1:

> JJC reviews a great deal of data but has not established a standard or consistent data set for measuring institutional academic performance. The College recognizes this as an opportunity for improvement and intends to establish a set of Key Performance Indicators.

While the institution identified that data analysis is a targeted area for improvement, the institution does not demonstrate insight regarding barriers on this issue, commit to time-frames, or identify resources that have been devoted to addressing this concern.

## Interim Monitoring (if applicable)

*No Interim Monitoring Recommended.*

# Review Dashboard

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

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

# Review Summary

## Focused Visit(s)

**Due Date**
10/1/2018

**Visit Focus**
**Introduction**

During a mid-cycle systems appraisal for Joliet Junior College, the review team identified a number of concerns that could affect the ability of Joliet Junior College to effectively address the necessary standards for accreditation. To assist Joliet Junior College's in meeting the expectations associated with an end-of-cycle accreditation review, the review team recommends a mid-cycle CQR to monitor progress made toward developing evidence supporting the following core-components.

For each Core Component listed here, the common thread of concern pertains to data management. In some cases, the concern more specifically addresses the process of presenting data that is likely already available to the College. In other cases, the concern specifically addresses the process of using the information gleaned from data. In all cases, the institution's position will likely be strengthened by defining centralized processes that assure systematic analysis and review of data.

**Core Component 3.C: The institution has the faculty and staff needed for effective, high-quality programs and student services.**

### Related Evidence Screening Statements

JCC's staff are appropriately qualified, trained, and supported in professional development.  If necessary, employee performance improvement plans are created.  JJC faculty are required to be available to students through office hours.

In light of declining and unreliable state support, it is difficult to maintain customary quality of programs and student services. JJC may seek to benchmark its practices against institutions that operate under similar conditions to document that its practices are in-line with its institutional peer group.

### Concerns

Joliet Junior College does not identify systems that help it monitor the numbers of faculty and staff that are needed for services. This information may be available from state systems or other consortia which will provide benchmarking comparisons to peer institutions. In addition to comparisons available through the State of Illinois, similar information may also be available through the National Community College Benchmarking Project. At least one member of the review team noted that Joliet Junior College is also a participating institution in NCCBP.

**Mid-Cycle CQR Expectations**

Please provide the data sets used by senior leadership to determine if the College has sufficient numbers of faculty and staff to be effective.

Describe the committee structures that generate and review the data sets. Provide evidence that the data sets were used to prioritize these needs amid other concerns that are part of the strategic plan.

**Core-Component 4.B: The institution demonstrates a commitment to educational achievement and improvement through ongoing assessment of student learning.**

**Related Evidence Screening Statements**

The institution has stated goals for student learning in the form of general education learning outcomes, program learning outcomes and course learning outcomes.

The institution has processes in place to assess the achievement of student learning outcomes. These processes use rubrics and for general education are based on AAC&U models for general education assessment. The institution also has processes in place to collect this data.

The institution does not provide compelling evidence that program assessment is widely practiced or that co-curricular assessment is practiced. No process was described that illustrates how knowledge gained through assessment is used to better student learning.

**Concerns**

Joliet Junior College does not provide evidence that direct assessment of student learning is practiced widely and that the assessment results are effectively used to improve learning. The evidence presented for the direct assessment of student learning in occupational programs was circumstantial at best. The evidence provided for general education assessment was corroborative, but far behind the 3-year assessment cycle that the institution committed to.

**Mid-Cycle CQR Expectations**

Provide a comprehensive description of program participation in direct assessment of student learning, success rates and actions take to improve student learning.

It is the review team's understanding that programs are reviewed on a 5-year cycle. It is the team's assumption that all of the program learning outcomes will be directly assessed by faculty within each 5-year cycle. The review team in this case does not distinguish between occupational and transfer programs and defines "program" as any course of study that qualifies a student to receive federal financial assistance.

For this requirement, do not include assessment activities that are based on student self-assessment or employer assessment of student ability. While these methods have value in determining if stakeholder needs are met, the specific data that is required for this CQR should specifically address direct measurements of student learning defined by the use of tools selected/designed, administered, evaluated and reflected on by Joliet Junior College Faculty.

Program Participation in Gathering Data

- Identify all the percentage of the programs that have formally identified program learning outcomes.
- Using the criteria provided to define direct assessment of student learning, identify the percentage of outcomes for each program that have been assessed during two over-lapping 5-year windows. The first window will provide a base-line and serve as a comparison for data produced from the second window.

    The first window runs from Fall 2013 through Winter 2018.
    The second window runs from Fall 2014 through Winter 2019.

- Similar data should be provided for the general education outcome assessment, but this data should be based on a 3-year cycle.

Determination that Students Meet Expectations

- Again, using the criteria provided to define direct assessment of student learning, provide a data summary that allows the reviewers to read a table and make statements such as: "For the Residential Construction Program, 95% of the program learning outcomes were successfully achieved by 90% or more of the students." In this example, the value of 90% may be changed to match the standard identified by Joliet Junior College Faculty.

- Similar data should be provided for direct assessment of the general education outcomes.

    Assessment Practices Improve Student Learning
- Provide systematically gathered evidence drawn from the APU report and ICCB Program Reviews that illustrate how insights gained from the assessment lead to actions that positively impact student learning.

- Again, provide parallel information for general education assessment.

The  following core-components were identified as concerns for the same reason and so have been grouped together. The over-all concern is best identified by Core-Component 5.D.

The "Related Evidence Screen Statements" have been omitted because multiple core-components are being addressed, but are available in other areas of this appraisal.

**Core-Component 4.C: The institution demonstrates a commitment to educational improvement through ongoing attention to retention, persistence, and completion rates in its degree and certificate programs.**

**Core-Component 5.A: The institution's resource base supports its current educational programs and its plans for maintaining and strengthening their quality in the future.**

**Core-Component 5.C: The institution engages in systematic and integrated planning.**

**Core-Component 5.D: The institution works systematically to improve its performance.**

**Concerns**

Joliet Junior College identifies how data is collected but stops short of identifying how data is analyzed and used. Analysis and use of data is central to each of these core-components.

**Recommendations**

Juliet Junior College should clarify how its broader data collection process systematically informs institutional decision making.

Juliet Junior College should clarify how data collected through the APU system is systematically analyzed to inform institutional decision making. In many institutions, this analysis is supported, at least in part, by Institutional Research or an equivalent office. (5.C and 5.D)

The reviewers note that Joliet Junior College reports data through IPEDS. How is the information provided to IPEDS and additional information, systematically reviewed and used to address educational improvement (4.C and 5.A).

## Conclusion

Joliet Junior College is actively pursuing quality initiatives to support all five accreditation criteria. The College has defined processes for institutional planning, resource allocation, personnel and curriculum. The College also has a practice for <u>collecting</u> data regarding its operations. The College, however, struggles with consistently completing assessment practices in nearly all categories and has not yet begun to demonstrate how information gathered from these practices is used for improvement. To assist the College in preparing for it's comprehensive evaluation, the appraisal team recommends a mid-cycle CQR as outlined under the Focused Visit of the Assurance System.

## Overall Recommendations

**Criteria For Accreditation**
Unclear

**Sanctions Recommendation**
Not Set

**Pathways Recommendation**
Not Set