2012 ILLINOIS PERFORMANCE EXCELLENCE AWARD

FEEDBACK REPORT

COLLEGE OF DUPAGE

DECEMBER 10, 2012

ILLINOIS PERFORMANCE EXCELLENCE AWARD
FEEDBACK REPORT
For
COLLEGE OF DUPAGE

INTRODUCTION

The Illinois Performance Excellence Award team of examiners has evaluated your organization's application for assessment and recognition. This Feedback Report contains background information on the evaluation and scoring process used, and the findings of the Examiner Team that reviewed your organization's application. The report includes an Executive Summary of overall findings, as well as detailed comments for each Item of your organization's strengths and opportunities for improvement relative to the Criteria for Performance Excellence.

APPLICATION REVIEW AND EVALUATION PROCESS

The process used by the Illinois Performance Excellence Award examiner team to review your Illinois Performance Excellence application involves up to three stages. Figure 1 on the next page outlines each of these stages, and identifies further reviews by our Panel of Judges.
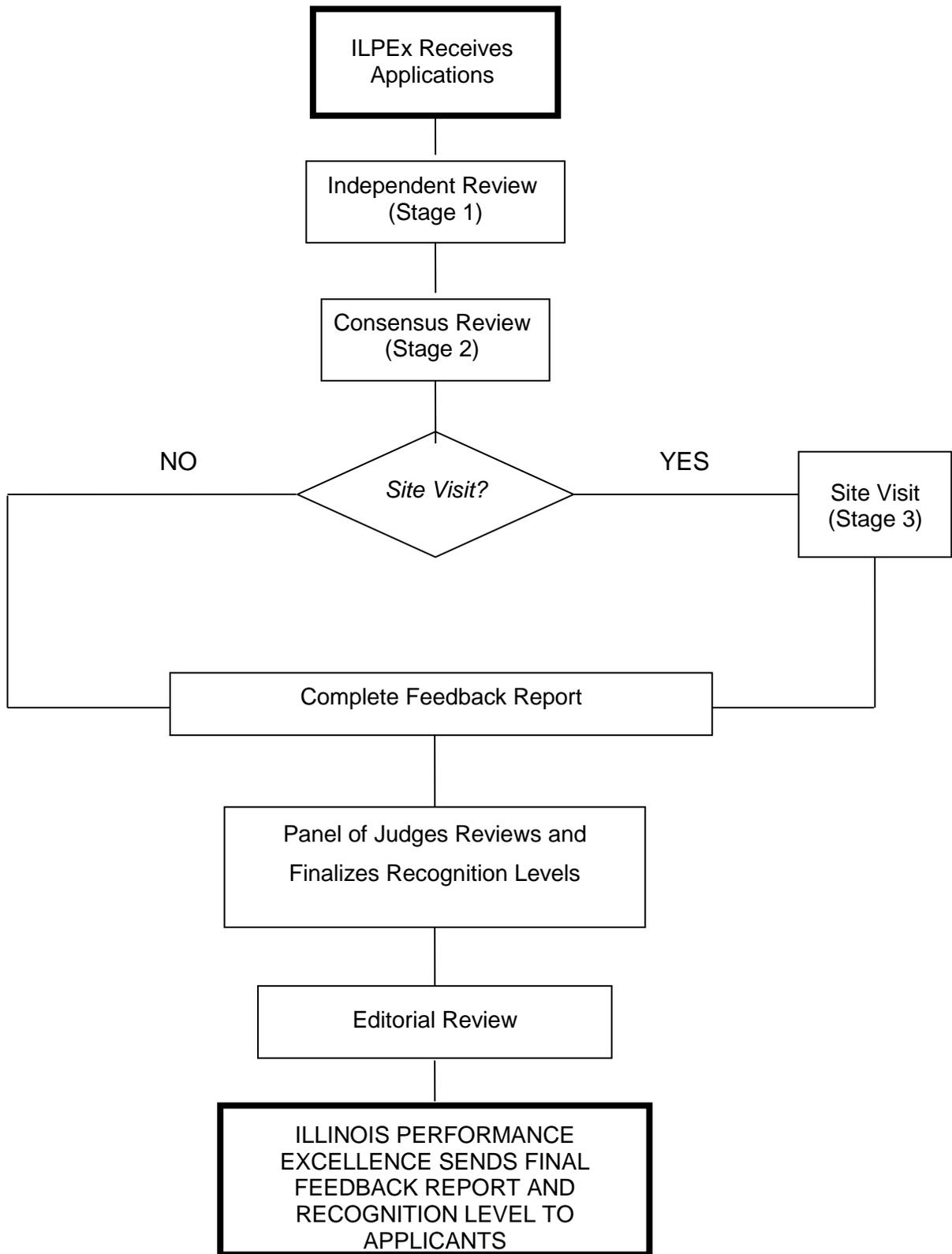
The process begins with an *independent review (Stage 1)* of your application. At the outset of this stage, members of the Illinois Performance Excellence Award team of examiners are assigned to one of the applications under review. Examiner teams are comprised of a Senior Examiner to serve as team leader, and other examiners. Examiner assignments are made to ensure no conflict of interest and the best use of examiner expertise and experience. In stage 1, each member of the assigned examiner team completes an independent evaluation of your application using the scoring system developed for the Baldrige Performance Excellence Program as adopted for the Illinois Performance Excellence Award program.

Each application then goes through a *consensus review (Stage 2)*. At this stage, your Examiner team consolidates the feedback from the stage 1 reviews, and participates in a meeting to review the application and reach agreement on key findings. This included developing consensus on the feedback comments explaining your organization's strengths and opportunities for improvement, on the score for Items within each Category, and on the score for the overall application. The Team Leader with the assistance of the Team's Judge, directs the consensus review to clarify and resolve any differences resulting from the independent review and to ensure that comments reflected are the best possible analysis and thinking of the Examiner team as a whole.

The third stage of the process is the *site visit review*. For all applicants, the Panel of Judges review the consensus feedback and make a determination as to whether or not these applicants would be offered a site visit. For those applicants who are offered and accept a site visit, the Examiner team prepares for and conducts a site visit to clarify and verify

information provided in the application, including the extent of deployment and integration of management systems. The site visit team also verifies the extent to which management systems throughout the organization have been systematically evaluated and improved. Upon completion of the site visit review, the Examiner team revises the Feedback Report to achieve consensus based upon the updated findings.

EVALUATION PROCESS – Figure 1

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│  Independent Review │
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│  Consensus Review   │
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│  FEEDBACK REPORT AND                      │
│  RECOGNITION LEVEL TO                     │
│  APPLICANTS                               │
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All Feedback Reports prepared by the examiner teams are reviewed by the Panel of Judges to ensure consistent calibration in scoring and application of the Criteria across the teams. The Judges hold a meeting to review all applicant Feedback Reports in order to determine the appropriate level of recognition based on the profile of strengths and opportunities for improvement contained in the Feedback Report.

Feedback Reports are reviewed and edited to ensure completeness and clarity by the Award office and selected Senior Examiners. The Feedback Reports are then provided to the applicants for use in future improvement planning.

ON-SITE FEEDBACK REPORT REVIEW

An on-site review of this feedback report may be conducted at the applicant's request. The purpose of this meeting would be to explain questions an applicant might have with their Feedback Report. This activity is based on the premise that a conversation about the organization's Feedback Report with the Lead examiner and Judge assigned to your application may enhance the applicant's understanding of the feedback and the opportunities for improvement contained in the report.

ILLINOIS PERFORMANCE EXCELLENCE AWARD RECOGNITION LEVELS

The Illinois Performance Excellence Award program provides a system for recognizing organizations at three levels that are representative of progress and growth toward performance excellence. Award levels reflect the increasing maturity of a performance management system as defined by the Illinois Performance Excellence Award Criteria for Performance Excellence.

The Illinois Performance Excellence Bronze Award for Commitment to Excellence – The organization demonstrates systematic approaches that respond to the basic requirements of the Criteria. A general improvement orientation is evident. Among the key approaches required to demonstrate a commitment to excellence are Senior Leaders' actions to guide and sustain the organization, and the use of systematic approaches to improve key work processes. Results are reported for several areas that are important to accomplishment of the organization's mission. Because deployment is a minimal factor in determining this award, site visits are generally not required.

The Illinois Performance Excellence Silver Award for Progress toward Excellence – The organization demonstrates effective, systematic well-deployed approaches that respond to the overall requirements of most Criteria Items and are aligned with organizational needs. Key approaches are beginning to be systematically evaluated and improved. Results are reported for many areas of importance and demonstrate improvement trends and/or good performance for some areas that are important to accomplishment of the organization's mission. Site visits are required.

The Illinois Performance Excellence Gold Award for Achievement of Excellence –The organization demonstrates effective, systematic well-deployed approaches that respond to the multiple requirements of most Criteria Items and are integrated to meet organizational needs. A fact-based, systematic evaluation and improvement process is in place to improve the efficiency and effectiveness of key approaches. Results are reported for most areas of importance, with beneficial trends in areas that are important to accomplishment of the organization's mission, and performance relative to comparisons that demonstrates the organization is an industry leader in some key results areas. The organization can be considered a role model. Site visits are required.

SCORING SYSTEM

The scoring of responses to Criteria Items and Illinois Performance Excellence Award applicant feedback are based on two evaluation dimensions: (1) process and (2) results. Criteria users need to furnish information relating to these dimensions. Specific factors for these dimensions are described below.

Process refers to the methods your organization uses and improves to address the Item requirements in Categories 1-6. The four factors used to evaluate process are approach, deployment, learning and integration (ADLI).

"Approach" (A) refers to:
- the methods used to accomplish the process
- the appropriateness of the methods to the Item requirements and the organization's operating environment
- the effectiveness of your use of the methods
- the degree to which the approach is repeatable and based on reliable data and information (i.e., systematic)

"Deployment" (D) refers to the *extent* to which:
- your approach is applied in addressing Item requirements relevant and important to your organization
- your approach is applied consistently
- your approach is used (executed) by all appropriate work units

"Learning" (L) refers to:
- refining your approach through cycles of evaluation and improvement
- encouraging breakthrough change to your approach through innovation
- sharing refinements and innovations with other relevant work units and processes in your organization

"Integration" (I) refers to the *extent* to which:
- your approach is aligned with organizational needs identified in the Organizational Profile and other process Items
- your measures, information, and improvement systems are complementary across processes and work units
- your plans, processes, results, analyses, learning, and actions are harmonized across processes and work units to support organization-wide goals

Results refer to your organization's *outputs* and *outcomes* in achieving the requirements in Items 7.1-7.5 (Category 7). The four factors used to evaluate results are levels, trends, comparisons, and integration (LeTCI).

"Levels" (Le) refers to:
- your current level of performance

"Trends" (T) refers to:
- the rate of your performance improvements or the sustainability of good performance (i.e., the slope of trend data)
- the breadth (i.e., the extent of deployment) of your performance results

"Comparisons" (C) refers to:
- your performance relative to appropriate comparisons, such as competitors or organizations similar to yours
- your performance relative to benchmarks or industry leaders

"Integration" (I) refers to the *extent* to which:
- your results measures (often through segmentation) address important patient and stakeholder; health care service, market; process; and action plan performance requirements identified in your Organizational Profile and in Process Items
- your results include valid indicators of future performance
- your results are harmonized across processes and work units to support organization-wide goals

ITEM CLASSIFICATION AND SCORING DIMENSIONS

Items are classified according to the kinds of information and data you are expected to furnish relative to the two evaluation dimensions given above. The two types of Items are designated as:
1. **Process**
2. **Results**

In process items, approach, deployment, learning, and integration are linked to emphasize that descriptions of approach should always indicate the deployment – consistent with the *specific requirements* of the item and your organization. As processes mature, their description also should indicate how cycles of learning (including innovation), as well as integration with other processes and work units, occur. Although the ADLI factors are linked, feedback to Illinois Performance Excellence Award applicants reflects strengths and opportunities for improvement in any or all of these factors.

Results items call for data showing performance levels, trends, and relevant comparisons for key measures and indicators of organizational performance, and integration with key organizational requirements. Results items also call for data on the breadth of the performance results reported. This is directly related to deployment and organizational learning; if improvement processes are widely shared and deployed, there should be corresponding results. A score for a results item is thus a composite based on overall performance, taking into account the four results factors (LeTCI).

PROCESS SCORING GUIDELINES - Figure 2

SCORE	PROCESS (Categories 1–6)
0% or 5%	• No **systematic approach** to item requirements is evident; information is **anecdotal**. (A) • Little or no **deployment** of any **systematic approach** is evident. (D) • An improvement orientation is not evident; improvement is achieved through reacting to problems. (L) • No organizational **alignment** is evident; individual areas or work units operate independently. (I)
10%, 15%, 20%, or 25%	• The beginning of a **systematic approach** to the **basic requirements** of the item is evident. (A) • The **approach** is in the early stages of **deployment** in most areas or work units, inhibiting progress in achieving the **basic requirements** of the item. (D) • Early stages of a transition from reacting to problems to a general improvement orientation are evident. (L) • The **approach** is **aligned** with other areas or work units largely through joint problem solving. (I)
30%, 35%, 40%, or 45%	• An **effective, systematic approach**, responsive to the **basic requirements** of the Item, is evident. (A) • The **approach** is **deployed**, although some areas or work units are in early stages of **deployment**. (D) • The beginning of a **systematic approach** to evaluation and improvement of **key processes** is evident. (L) • The **approach** is in early stages of **alignment** with your basic organizational needs identified in response to the Organizational Profile and other process items. (I)
50%, 55%, 60%, or 65%	• An **effective, systematic approach**, responsive to the **overall requirements** of the item, is evident. (A) • The **approach** is well **deployed**, although **deployment** may vary in some areas or work units. (D) • A fact-based, **systematic** evaluation and improvement **process** and some organizational **learning**, including **innovation**, are in place for improving the efficiency and effectiveness of **key processes**. (L) • The **approach** is **aligned** with your overall organizational needs identified in response to the Organizational Profile and other process items. (I)
70%, 75%, 80%, or 85%	• An **effective, systematic approach**, responsive to the **multiple requirements** of the item, is evident. (A) • The **approach** is well **deployed**, with no significant gaps. (D) • Fact-based, **systematic** evaluation and improvement and organizational **learning**, including **innovation**, are **key** management tools; there is clear evidence of refinement and innovation as a result of organizational-level **analysis** and sharing. (L) • The **approach** is **integrated** with your current and future organizational needs identified in response to the Organizational Profile and other process items. (I)
90%, 95%, or 100%	• An **effective, systematic approach**, fully responsive to the **multiple requirements** of the Item, is evident. (A) • The **approach** is fully **deployed** without significant weaknesses or gaps in any areas or work units. (D) • Fact-based, **systematic** evaluation and improvement and organizational **learning** through **innovation** are **key** organization-wide tools; refinement and **innovation**, backed by **analysis** and sharing, are evident throughout the organization. (L) • The **approach** is well **integrated** with your current and future organizational needs identified in response to the Organizational Profile and other process items. (I)

RESULTS SCORING GUIDELINES - Figure 2 cont'd

SCORE	RESULTS (Category 7)
0% or 5%	▪ There are no organizational **performance results** and/or poor **results** in areas reported. (Le) ▪ **Trend** data either are not reported or show mainly adverse **trends**. (T) ▪ Comparative information is not reported. (C) ▪ **Results** are not reported for any areas of importance to the accomplishment of your organization's **mission.** (I)
10%, 15%, 20%, or 25%	▪ A few organizational **performance results** are reported; responsive to the **basic requirements** of the item, and early good **performance levels** are evident. (Le) ▪ Some **trend** data are reported, with some adverse **trends** evident. (T) ▪ Little or no comparative information is reported. (C) ▪ **Results** are reported for a few areas of importance to the accomplishment of your organization's **mission.** (I)
30%, 35%, 40%, or 45%	▪ Good organizational **performance levels** are reported, responsive to the **basic requirements** of the item. (Le) ▪ Some **trend** data are reported, and a majority of the **trends** presented are beneficial. (T) ▪ Early stages of obtaining comparative information are evident. (C) ▪ **Results** are reported for many areas of importance to the accomplishment of your organization's **mission.** (I)
50%, 55%, 60%, or 65%	▪ Good organizational **performance levels** are reported, responsive to the **overall requirements** of the item. (Le) ▪ Beneficial **trends** are evident in areas of importance to the accomplishment of your organization's **mission.** (T) ▪ Some current **performance levels** have been evaluated against relevant comparisons and/or **benchmarks** and show areas of good relative **performance.** (C) ▪ Organizational **performance results** are reported for most **key customer,** market, and **process** requirements. (I)
70%, 75%, 80%, or 85%	▪ Good to excellent organizational **performance levels** are reported, responsive to the **multiple requirements** of the item. (Le) ▪ Beneficial **trends** have been sustained over time in most areas of importance to the accomplishment of your organization's **mission.** (T) ▪ Many to most **trends** and current **performance levels** have been evaluated against relevant comparisons and/or **benchmarks** and show areas of leadership and very good relative **performance.** (C) ▪ Organizational **performance results** are reported for most **key customer**, market, **process**, and **action plan** requirements. (I)
90%, 95%, or 100%	▪ Excellent organizational **performance levels** are reported that are fully responsive to the **multiple requirements** of the item. (Le) ▪ Beneficial **trends** have been sustained over time in all areas of importance to the accomplishment of your organization's **mission.** (T) ▪ Evidence of industry and **benchmark** leadership is demonstrated in many areas. (C) ▪ Organizational **performance results** and **projections** are reported for most **key customer,** market, **process,** and **action plan** requirements. (I)

EXECUTIVE SUMMARY

The College of DuPage scored in the range of 352 and 452 based on team of examiner review of the organization's written application and site visit for the Illinois Performance Excellence Award. This assessment places the organization at the *Bronze Award for Commitment to Excellence* recognition level.

Organizational Context

The College of DuPage (COD) serves the Community College District 102 and is the largest of 48 publicly funded community colleges in Illinois. Its mission is to be a center of excellence in teaching learning and experience.

It serves over 30,000 students each semester with more than 3,800 full-time and part-time employees (the workforce is segmented by Administrators, Managers/Directors, Faculty, Staff and Student Employees). The main campus includes 15 major buildings. In addition, there are six other buildings used to deliver services off-site. Programs and services include business training, continuing education, developmental education, career and technical education and transfer education delivered through the following formats: Adult Fast Track, Hybrid, Independent Learning, Online/Distance, and Traditional. In addition, key student market segments are new high school graduates, young adults (19-24), adults (25-54), and other adults (55+). In addition to students, key stakeholder groups are taxpayers and regional employers.

The vision is to be the primary choice for residents to achieve higher education. Core competencies are defined as People, Price, Product, Promotion, and Place. The College of DuPage considers its competitors to be the 16 other institutions of higher education in their district. The following are identified as key strategic challenges: effective and consistent use of data, institutional climate, local and regional competition, shrinking public funding, student retention, and underprepared incoming students.

Key Strengths

The College of DuPage appointed a new President in 2009. Since that time, all key work systems and key work processes have been re-designed in the organization. This re-design has led to substantial change throughout the organization over the past four years. The key steps in the re-design process were: 1. Hire the absolute best leader in that respective work system; 2. In combination with leadership experience and expertise, research best practice on a national level; 3. Review current results, input from stakeholders (through various listening mechanisms), and current practices; 4. Re-design work processes and set measurable targets for monitoring performance; 5. Partner with other work systems to determine alignment and support; and 6. Get approval from senior management team before implementation. This re-design in key work systems has jump-started COD in its journey for performance excellence. As a result of step number 1 in the re-design, the organization has implemented many systematic approaches in the area of leadership.

Sustainability at COD comes from the use of a comprehensive strategic planning cycle. COD is just completing the first three-year planning cycle and will be implementing a new cycle in a few months. The strategic plan calls for annual plans in each area and at each level of the organization. In addition to the required plans, the system of communication and approval of plans allows for vertical alignment within departments and horizontal alignment across departments. The approach for required annual plans has also started to focus the entire organization on results.

One of COD's five core competencies is called "Place," which is defined as "modern, state of the art facilities and equipment." Facilities improvement has been an integral part of the strategic planning cycle. COD has received substantial financial support from the community and will have built new facilities or renovated all current facilities within a five-year period. This large scale facility project was integrated very closely with the annual planning cycle and was done to directly support COD educational programs and services.

Two examples of innovations that came from systematic planning are the state-of-the-art homeland security educational programs and facility, which was recently used as a back-up facility for the NATO event in Chicago and the 3+1 partnerships with four-year colleges and universities. These 3+1 programs are a unique and innovative approach that allows COD students to gain a four-year degree from a university at less than half the cost, while allowing the students to take all classes on the COD campus.

Key Opportunities for Improvement

There is a key misalignment in the performance review process and the data used to manage and improve the organization. COD's mission is to be a "center of excellence" but measures of central tendency (means/medians) are used to compare its performance to like organizations. Failure to define excellence as greater than average or median performance may cause COD to fail to recognize when improvements are needed, thereby potentially causing a loss of competitive ground over time, undermining the ability to achieve the mission.

As a result of the relatively new journey for continuous improvement, COD is early to mid-cycle on implementing redesigns that were a result of fact-based evaluations. For the changes that have been implemented, it is too early to determine whether or not the changes will lead to sustained improved results.

Although COD is transforming its culture to one of management by fact, the opportunity for improvement comes in the area of ease and access to needed data and information, as was consistently heard from senior leadership and the workforce.

Another opportunity for improvement comes in the area knowledge management. With such a focus on strong leadership at the top and the explosion of new key work systems and processes, the lack of a systematic approach to managing organization knowledge may threaten the sustainability of the organization. Since strong leadership at the top is such a priority for COD, a more systematic approach to succession planning for management and leadership is a key business factor.

COD lacks measurable strategic objectives and related goals. Without measurable goals, it may not be able to determine when plans are off course or failing to achieve the desired objectives.

Key Strengths and Significant Improvement Opportunities for Results

Nearly all expected results are reported.

Financial results indicate the highest number of beneficial trends, which is important to note considering the current financial situation facing community colleges today.

Although COD is beginning to see a few positive trends in key work process results and financial results, overall it is not seeing desired improvements in most of the result areas.

Adverse or flat trends are evident for most results reported.

Poor performance levels and comparisons are reported for most results areas.

STRENGTHS & OPPORTUNITIES FOR IMPROVEMENT

1 LEADERSHIP

The *Leadership* category examines **how** your organization's **senior leaders'** personal actions guide and sustain your organization. Also examined are your organization's **governance** system and **how** your organization fulfills its legal, ethical, and societal responsibilities and supports its **key** communities.

1.1 Senior Leadership: *HOW DO YOUR SENIOR LEADERS LEAD?* – Describe **how senior leaders'** actions guide and sustain your organization. Describe **how senior leaders** communicate with your **workforce** and encourage **high performance.**

1.1 Strengths	
Area to Address	**Comment**
1.1a(1)	The College of DuPage (COD) reviews the mission, vision, and values of the organization in step two of the Strategic Planning Process. The Strategic Long Range Planning Advisory Committee reviews data gathered from students, the workforce, and other stakeholders to determine if changes to the mission, vision, and values are appropriate. Recommended modifications are presented to the President and Senior Management Team for evaluation. The recommendations are then presented to the Board of Trustees by the President and publically posted for 30 days to enable internal and external questions, comments, and input. The final recommendations are reviewed, and if acceptable, adopted by the Board of Trustees.
1.1a(2)	COD's senior leaders demonstrate their commitment to and promote an organizational environment for legal and ethical behavior in a variety of ways including participating in the development and review of the organizations Ethics Policy, setting ethics expectations during the New Employee Orientation, and requiring transparency in all external contractual relationships.
1.1a(3)	COD's senior leaders create a sustainable organization through several organizational activities including the development of departmental plans aligned with the Strategic Long Range Plan, annual reviews of the SLRP, and associated annual plans. They have also adopted the Academic Quality Improvement Program (AQIP) as a means for creating and maintaining a sustainable organization through accreditation, process improvement, and performance excellence.
1.1b(1)	COD's senior leaders communicate key decisions with the workforce using multiple approaches including bi-annual convocations, college forums, departmental and one-on-one meetings. In addition, the Shared Governance System, which was a result of a fact-based evaluation and improvement, is applied to ensure that the appropriate people with the necessary skill sets and knowledge are engaged on issues requiring feedback and rationale related to committee recommendations or decisions. This system has also been improved by streamlining the structure of the team.
1.1b(2)	COD's senior leaders create a focus on action to accomplish objectives, identify needed actions, improve performance, and attain its vision through the development and alignment of departmental annual action plans with the Strategic Long Range Plan, periodic review and update of annual plans, and bi-annual review of the Annual Performance Scorecard.

1.1 Opportunities for Improvement (OFI)

Area to Address	Comment
1.1a(3)	Although senior leaders are encouraged to identify successors for key positions, there is no defined, repeatable process to develop succession plans. Identifying strong senior leaders has been identified as a key part of their approach to creating a successful sustainable organization, so without a systematic approach to develop future leaders and succession planning, the organization may lack the "People" (a core competency) needed to continue making refinements to work systems and driving changes to support sustainability in the long term.
1.1b(1)	COD does not have a systematic process in place for senior leaders to take an active role in reward and recognition to encourage high performance. Without direct involvement of senior leaders, the methods used for reward and recognition may not directly influence high performance, which may threaten the core competency of "People".
1.1a(3) 1.1b(2)	While COD uses data and action plans to improve performance, senior leaders and others use results compared to means or medians to determine how "good" that performance is. This is a key misalignment with their mission to be a center of excellence. Failure to define for themselves and compare their performance to that which is deemed "excellent" may cause the organization to miss significant opportunities for improvement and thereby weaken sustainability.
1.1	While COD has conducted fact-based evaluations and implemented improvements in some key approaches such as communication and sustainability, the improvements have not been the result of any innovation. This may impede the organization's efforts to accomplish breakthrough improvement in results, services or processes.

SCORE RANGE:
55-65%

1.2 Governance and Societal Responsibilities: *HOW DO YOU GOVERN AND FULFILL YOUR SOCIETAL RESPONSIBILITIES?* Describe your organization's **governance** system and **approach** to leadership improvement. Describe **how** your organization assures legal and **ethical behavior,** fulfills its societal responsibilities and supports its **key** communities.

1.2 Strengths	
Area to Address	**Comment**
1.2a(1)	The Board of Trustees holds the Senior Management Team accountable through a variety of systems, including President's' Annual Review, appointment/reappointment determination, transparent budget process, annual independent third party audits, fiscal plan requirements, website availability of all policies, meetings, and planning / outcomes documents, ICCB regulation compliance, and the Academic Advisory Council. Based on an evaluation of the financial and facility work system, key work processes were redesigned to improve financial controls. In addition, many improvements to the Board of Trustees operations have been implemented.
1.2a(2)	The Strategic Long Range Plan forms the basis for the performance evaluation of the President and Senior Management Team. The Board of Trustees reviews the Institutional Outcomes Report to evaluate the overall performance of the President. The President evaluates the Senior Management Team based on a review of the appropriate Strategic Objectives and associated Annual Plans.
1.2b(1)	COD anticipates and addresses public concerns with current and future education programs, services, and operations through its community and stakeholder listening processes, including Community Nights, community surveys to gather feedback, and advisory committee meetings.
1.2b(2)	COD applies a set of Employee and Student Ethics Policies including, EEO/AA, HIPAA, Confidential Reporting of Wrongdoing, Student Rights & Responsibilities, and Student Conduct & Discipline. These practices are deployed and managed in a variety of ways, including the Student Handbook and Course Catalog, ethical handling of public funds, intercultural competence, and the use of technology. The organization adopted an Ethics Ordinance to respond to intentional breaches through investigations from Affirmative Action Officers, Employment ADA Coordinators, and Ethics Officers, and the imposition of significant penalties. These practices are monitored through standards/risk management, conflict of interest statements, prevention and reporting, and copyright compliance. Key measurements applied to monitoring include reports to ethics officer, statistics from the anonymous hotline, and number of investigations held.
1.2c(1)	The applicant addresses societal well-being and considers environmental impact through several mechanisms, including stakeholder and community listening posts to gather input to the Strategic Planning Process, energy conservation, paperless office and recycling programs, support of the local PACE bus service to minimize driving, offering free education classes, and building LEED certified structures and implementation of an Energy Master Plan to address environment stewardship and energy efficiency.

1.2c(2)   COD identifies its key communities as the sixteen municipalities that exist within COD's District 502. The applicant supports its communities through various listening posts, such as Community Nights and Student Parent Information Nights (SPIN). The Senior Management Team actively participates in a variety of community organizations including local Chambers of Commerce, County governmental agencies addressing economic development, and groups promoting diversity and student achievement such as NAACP's ACTSO.

1.2 Opportunities for Improvement (OFI)	
Area to Address	**Comment**
1.2	COD does not conduct fact-based evaluation and improvement of the approaches related to legal and ethical behavior, societal well-being and supporting key communities. Failure to evaluate existing approaches may result in negative impacts on the applicant's capacity to be the low-cost leader in providing high quality academic programs and events resulting in the applicant being ineffective in meeting the needs of the community, maintaining a positive community image, and sustaining its competitive advantage.
1.2a(2)	Although COD evaluates its Senior Leadership based on the completion of annual plans, the organization does not have a systematic approach to leadership improvement. Failure to apply a systematic process to leadership development and improvement may result in a breakdown in the organization's ability to leverage its Strategic Societal Advantages of Increased Partnership and a Positive Community Image through a lack of ability to ensure the highest quality performance at appropriate compensation levels and the continuing development of existing personnel.
1.2c(2)	While COD uses a variety of methods to support its key communities, it does not consistently deploy these methodologies to all key communities. Failure to establish systematic, well deployed processes to establish areas for organizational involvement in those communities may negatively affect the organization's ability to consistently meet the needs of the community, create a positive community image, and maintain its competitive advantage.

SCORE RANGE:
45-55%

2 STRATEGIC PLANNING

The *Strategic Planning* category examines **how** your organization develops **strategic objectives** and **action plans**. Also examined are **how** your chosen **strategic objectives** and **action plans** are implemented and changed if circumstances require, and **how** progress is measured.

2.1 Strategy Development: *HOW DO YOU DEVELOP YOUR STRATEGY?* Describe **how** your organization establishes its strategy to address its **strategic challenges** and leverages its **strategic advantages.** Summarize your organization's **key strategic objectives** and their related **goals.**

2.1 Strengths

Area to Address	Comment
2.1a(1)	COD begins its Strategic Planning Process in November and deploys the approved plan in July of the following year. The Strategic Long Range Plan (SLRP) is a three year plan supported by annual action plans. Support for the plan comes from the Board of Trustees (BOT), the President, Senior Management Team, Shared Governance Council, Strategic Long Range Plan Advisory Committee (SLRPAC) and the managers/directors. The process is an eight phase process, involving interaction between numerous key stakeholder groups including representations from the business communities, government, tax payers, and students. The development and review of the organization's philosophy, mission, vision, and core competencies, strategic advantages/ challenges are the responsibility of the Strategic Long Range Planning Advisory Committee (SLRPAC). This committee, which is comprised of various individuals from across the organization, completes a SWOT analysis in the annual review of the core competencies and strategic advantages / challenges. During this analysis, the organization uses a variety of internal assessments (the Fact Book) as well as external influences (E-Scan) to identify potential blind spots. The process to prioritize the strategic advantages/challenges during the SWOT analysis has been revised to improve this review. Changes have also been made to the E-Scan process. These changes will make the E-Scan easier to use and include the expertise of Subject Matter Experts. The systematic approach to setting planning time horizons for the Strategic Long Range Plan considers three year goals for the long range goals with longer (five year) plans such as for the Financial Plan woven into the three year horizon. The plan has been reviewed and revised to accommodate shorter time horizons to adjust for rapid change. Annual action plans are built based on the long term goals and deployed through the organization on a top down process through the Senior Management Team to all managers/directors/departments. The strategic planning process has been evaluated with planned changes going to be implemented in the next planning cycle.
2.1a(2)	COD collects and analyzes data through several mechanisms including internal surveys, a Fact Book to determine the internal environment, environmental scan (E-Scan), community, stakeholder, partner inputs as well as research based scientific surveys to determine key emerging trends. The data includes demographic trends, student, economic, labor force, education, competition, social values comparisons, market data, politics, and technology. The SLRPAC combines the external and internal scan information in the first step of the annual SWOT analysis. Trend analysis and forecasting are used as analysis tools for the SWOT. In phase two of the SPP, the SLRPAC along with the Senior Management Team, reviews core competencies, as well as current and emerging trends. Data collected to support the plan are obtained through the completion of the annual action plans. The ability to execute the plan is evidenced by progress as reported on the Stop Light and

Annual Plan reports. The Senior Management Team members are held accountable as the primary persons responsible for specific strategic tasks. These assignments are outlined in the Accountability Matrix. This accountability includes the successful deployment, completion and review of priorities.

2.1b(2)   COD aligns its strategic themes, tasks and annual goals/strategies to address the strategic challenges, leverage strategic advantages and core competencies. Information from the strategy forums, E-Scans, and surveys are used to drive innovation and determine the need for future competencies. COD uses input from all stakeholders (including students, tax payers, regional employers) in strategy development to balance the needs of all students and stakeholders, and uses a strong financial plan to balance requirements to ensure it has the ability to adapt to sudden shifts in market conditions.

2.1 Opportunities for Improvement (OFI)

Area to Address | **Comment**

2.1a(1)   COD has conducted a fact-based evaluation of the strategic planning process but has not implemented improvements to the strategic planning process. Nor have they conducted a fact-based evaluation and improvement to ensure the strategic themes address strategic challenges and leverage advantages. Without evaluating and improving these key approaches, the organization may be sure it is effectively and efficiently using resources to address those most important factors influencing organizational outcomes.

2.1a(2)   COD does not have a systematic approach for determining projection of future performance and the projections of its competitors' or comparable organizations' future performance. Failure to set projected performance against competitors could threaten the ability to achieve the Mission to be a center of excellence or reach the Vision, which is to be the primary district residents choose for high quality education.

2.1b(1)   While COD has defined three-year strategic themes, six of the seven strategic themes do not include the most important measurable goals/targets for these strategic themes (objectives). Examples include develop and sustain a workforce committed to COD's mission, and strengthen community partnerships. Three-year goals and tasks have been identified, but 22 of the 31 three-year tasks do not include measurable targets, and examples include enhance awareness and promote diversity. Without The College of DuPage measurable goals/targets to drive improvement efforts, shorter term goals and plans may not drive focused improvements designed to maintain or improve its competitive position.

SCORE RANGE:
45-55%

2.2 Strategy Implementation: *HOW DO YOU IMPLEMENT YOUR STRATEGY?*

Describe **how** your organization converts its **strategic objectives** into **action plans.** Summarize your organization's **action plans, how** they are **deployed,** and **key action plan performance measures** or **indicators.** Project your organization's future **performance** relative to **key** comparisons on these **performance measures** or **indicators.**

	2.2 Strengths
Area to Address	**Comment**
2.2a(1)	All senior leaders are responsible for developing an annual plan, which includes objectives, activities and in a few cases measurable goals/targets, for their department that aligns with the three-year strategy themes. The Strategic Long Range Plan and the Annual Plan information are posted on the employee portal to help understanding of and successful completion of the plans. Key changes being implemented include the development of new 3+1 programs, increasing enrollment, piloting free courses for GED graduates, alignment of curriculums with local high schools, and the creation of a new Veteran's Service Center.
2.2a(2)	All Senior Management Team members work with directors, managers, Deans and Associate Deans (as appropriate) to develop an annual plan with objectives and actions that align to the overall department plans. This allows deployment all the way to the division and department level.
2.2a(3)	The organization develops a five-year financial plan that is reviewed on an annual basis. Annual budgets are developed to identify revenue stream and expenses for focusing on the priorities and attaining the action plans. Financial viability is enhanced through strict controls on appropriated amounts, and flexibility to redirect amounts to priority areas.
2.2a(4)	The Human Resource department helps division and department managers evaluate and/or design workforce capacity and capability for needs addressed through action plans. The evaluation process includes budget review, action plan priorities, current resource utilization, work re-design, and training needs.
2.2a(5)	Key performance measures include student retention/success, recruitment, student experience, workforce, cost, and finance. Scorecards are used to monitor progress towards goals. Biannually organizational performance on the Annual Plan Scorecard is reviewed and adjustments are made as necessary. Annually the BOT reviews the Annual Outcome Report and uses the annual results to evaluate the President.
2.2a(6)	Based on quarterly stoplight reviews and other listening mechanisms, annual plans and priorities can be added, modified or eliminated throughout the year. One example of a rapid execution of a plan was the adjustment of the facility improvement plan to include the Homeland Security Training Institute that came from a program advisory group.
2.2b	COD has key performance measures of student, operational, financial, and human resources performance. They benchmark student and school performance against past progress and other required reporting for community colleges. Long-term projections of performance include long-term enrollment for traditional students and five year financial projections.

2.2 Opportunities for Improvement (OFI)

Area to Address	Comment
2.2a(1)	COD does not have a systematic process to evaluate and improve the action plan development process. Without a process to evaluate the methods used to develop and deploy annual plans, COD may be less effective and/or efficient and may miss opportunities to better align the organization for future goal attainment.
2.2a(5)	While COD has identified 49 of the one year action plan goals, 37 of the 49 goals do not have performance measures or indicators of successful completion. Without clearly articulated measures or indicators, it may be difficult to align performance measures for annual plans at all levels to drive the desired organizational performance.
2.2b	COD does not project future performance relative to key competitors or comparable organizations. Without projecting performance against competitive or comparable organizations, COD's strategic considerations may be narrow in scope or miss potential challenges and/or opportunities for high performance/innovation and may fall behind others in the industry thereby undermining the mission of excellence and vision to be the provider of choice.

SCORE RANGE:

40-50%

3 CUSTOMER FOCUS

The *Customer Focus* category examines **how** your organization engages its **customers** for long-term marketplace success. This **engagement** strategy includes **how** your organization listens to the **voice of its customers,** builds **customer** relationships, and uses **customer** information to improve and identify opportunities for **innovation.**

3.1 Voice of the Customer: *HOW DO YOU OBTAIN INFORMATION FROM YOUR CUSTOMERS*? Describe **how** your organization listens to students and **stakeholders** and gains satisfaction and dissatisfaction information.

3.1 Strengths	
Area to Address	**Comment**
3.1a(1)	COD uses a variety of listening mechanisms for student and stakeholders, including Students: Course evaluations, Focus groups, presidential meetings with student leadership council, Pizza with the Pres. meetings, inclusion on the SLRPAC, SGC and the BOT, and through the monitoring and disseminating of information by Marketing & Communications via all social media forums including Facebook, Twitter, LinkedIn, You Tube, Flickr and Google+. Community events, career expos and local chamber of commerce meetings introduce dialogue with adult students populations by providing interaction with the business sector; Community/Community Leaders and Taxpayers: BOT Meetings, Community Nights, SLRP Scientific Survey and SLRP Focus Groups; Regional Employers: Advisory board meetings and Chamber of Commerce meetings. There has been one review of the community survey.
3.1a(2)	The Office of Research and Analytics conducts the Graduate Follow-Up Survey (GFU) with all graduates in occupational degree or certificate programs within one year of graduation to gather employment trends and gather feedback on how well the programs prepare the student for life after graduation. The organization listens to potential students by hosting Student Parent Information Nights, Large Scale Campus Visit Days, Scholarship Receptions and Sampler Days that provide an opportunity to obtain feedback directly from these groups regarding the types of educational programs and services the applicant offers. Through identifying these needs, the organization added 30 new educational programs in 2011.
3.1b (1&3)	COD uses two primary methods to determine student satisfaction and engagement including the Community College Survey of Student Engagement, and the Noel-Levitz Student Satisfaction Inventory that are administered on a three-year staggered cycle. Both surveys provide comparative information and are used as a proxy for competitors. In addition, the organization data mines course evaluation information through the Office of Academic Affairs to identify drop-off, absenteeism rate, student conflict and complaint data in order to plan for, and develop programs and services to improve student outcomes.
3.1b(2)	The organization uses the Noel Levitz Survey to collect data relative to competitors/comparable organizations in the Midwest peer group. COD also uses competitor data from the National Community College Benchmarking Project (NCCBP) to ascertain benchmark information from similar institutions.

3.1 Opportunities for Improvement (OFI)

Area to Address	Comment

3.1a(1) COD does not have in place an approach to systematically evaluate and improve key listening methods for former and current students or stakeholders. Additionally, the applicant does not employ a systematic method to evaluate and improve its process for gathering student satisfaction information. Without evaluating and improving the listening methods the organization may become stale in a changing environment, and opportunities to meet and exceed student needs may threaten the organization's competitive position.

3.1b(1) COD has a gap in deployment/lack of a systematic approach for obtaining satisfaction and dissatisfaction data from all stakeholder groups, such as the community and employers. The organization executed a community survey, however those surveyed were not representative of all key community stakeholder groups identified as important to them. Furthermore, the organization does not determine satisfaction, dissatisfaction and engagement data for different student market segments such as Traditional, Online, Hybrid Independent Learning or Adult Fast Track. In addition, the student surveys are administered every three years and for students who only spend two years at COD, the organization misses entire populations of students' satisfaction. Without systematically listening to all stakeholder groups and student market segments, the organization may have difficulty sustaining its operations. Successfully sustaining an organization requires continuous improvement and innovation in a competitive market.

SCORE RANGE:
45-55%

3.2 Customer Engagement: *HOW DO YOU ENGAGE CUSTOMERS TO SERVE THEIR NEEDS AND BUILD RELATIONSHIPS?* Describe **how** your organization determines **educational programs and services** and communication mechanisms to support students and **stakeholders.** Describe **how** your organization builds student and **stakeholder** relationships.

3.2 Strengths

Area to Address	Comment
3.2a(1)	As part of the SPP, an environmental scan and analysis of emerging workforce trends is completed. This, along with information from collaboration with regional workforce development/economic groups and educational partners, helps the organization identify the needs of stakeholder groups and programs on which to focus and develop. Employer advisory group data are used that focus on adults who work in district but live elsewhere. COD systematically develops relationships with area high schools by hosting large campus visit days, administrative staff focus groups and SPIN to gather information regarding current and future student needs. It has partnered with five different competitor four-year colleges to identify and offer specific programs as 3+ 1, an initiative that allows the student to achieve as many of the credits at this college and then move to the four year college and achieve the final degree from the four year school. This approach is innovative at the community college level. This reduces the cost of obtaining the degree and allows a partnership with a competitor.
3.2a(2)	COD uses a variety of approaches to seek information and communicate with students and stakeholders. These approaches include email, newsletters, President's messages, the use of an internal website, Blackboard, myAccess, campus panel displays, mailings, inquiry cards, information flyers and brochures, impact, the Fact Book, Program Informational Nights, Student/Parent Information Nights (SPIN), financial aid and counseling. In 2011, based on feedback from the students and stakeholders, the organization improved the organization's website, which is considered the primary method of communication. COD provides a variety of support mechanisms for students and stakeholders including advising and counseling, registration, IT support, an academic support center, financial aid, testing, student life, office of access and accommodation and career services. The organization uses feedback from formal student surveys and student comments to make work process improvements. Based upon voice of the student data and analysis of work process data, the ReSET Team was developed. Improvements to student support mechanisms have been developed and implemented.
3.2a(4)	COD uses the environmental scan and information from students, stakeholders and markets to improve marketing opportunities. It also uses data reviews at the department and division level along with student and stakeholder surveys, focus groups and outreach, Presidential Commissions and committees to build a more student and stakeholder focused culture. The organization uses information from all these gathering techniques in combination with analyzing program and service usage data and the Academic Program Review Process to meet requirements.
3.2b(1)	COD works to acquire new students, increase market share and retain current students through Enrollment Management and the Marketing Department. Additional programs to address market segments include the development of a Latino Center, Veterans Lounge and the Adult Fast Track Program. The result of a QIP, the ReSet team is the creation of the ESEIP which focuses on recruitment and retention of current students. It also focuses on improving the customer experience for first-time, full-time students. Another program implemented in 2012 is the Retention Alert System that identifies academically at risk

students and directs interventions to assist the student. To enhance the engagement of the students and stakeholders, the organization provides a variety of programs and activities. Examples of programs are Student Orientation and First Year Experience, Living Leadership, over 60 clubs and associations, Student Leadership Council, men's and women's sports teams, student newspaper and magazine and performing arts.

3.2b(2) COD receives complaints at multiple locations in the organization including Student Affairs, Risk Management, Academic Affairs, Office of the President, and from regional sites. The President sends complaints to specific areas of responsibility for timely response and resolution. A "Service Issues Complaint" form or a "Supervisory Incident Report" is used in some areas and at regional locations. First line staff members are asked to resolve the problem in a timely manner, personally resolve or handoff to the responsible department and report back to the complainant if able.

3.2 Opportunities for Improvement (OFI)

Area to Address	Comment

3.2a(1) While COD has evaluated approaches, improvements have not yet been implemented to the approaches for determining and improving stakeholder engagement, programs and services, serving their needs, or building relationships for all stakeholders. Implementing such improvements may allow the organization to keep methodologies current and support the organization in meeting future requirements of employers, taxpayers and the market.

3.2b(1) COD has a gap in its approach to developing relationships with students outside the traditional, first-time, full-time student and continuing education credit students working on two year degrees. This constitutes 50 percent of the student population and is identified as a customer important to the organization. Without consistently developing and building relationships with all student groups, COD could lose students and this may threaten the strategy to grow enrollment, which is critical to long term sustainability.

3.2b(2) COD does not have a systematic, fully deployed complaint management process that enables effective resolution of student and stakeholder complaints across all areas of the organization. Without this process in place, COD may not be able to make necessary changes to services and processes that meet or exceed student and stakeholder expectations. Lack of a process may also affect the confidence level that student and stakeholders have in the organization's ability to provide excellent service levels on an ongoing basis.

SCORE RANGE:
45-55%

4 MEASUREMENT, ANALYSIS, AND KNOWLEDGE MANAGEMENT

The *Measurement, Analysis, and Knowledge Management* category examines **how** your organization selects, gathers, analyzes, manages, and improves its data, information, and **knowledge assets** and **how** it manages its information technology. The category also examines **how** your organization uses review findings to improve its **performance**.

4.1 Measurement, Analysis and Improvement of Organizational Performance: *HOW DO YOU MEASURE, ANALYZE, AND THEN IMPROVE ORGANIZATIONAL PERFORMANCE?*

Describe **how** your organization measures, analyzes, reviews, and improves its **performance** through the use of data and information at all levels and in all parts of your organization.

4.1 Strengths	
Area to Address	**Comment**
4.1a(1)	COD has selected six key areas of focus established by the President and SMT, which allows performance to be compared to others in the following areas: student retention/success, recruitment, student experience, work force, cost, and finance. Measures are selected that represent key work processes, align with the strategic direction of the organization and are reviewed and monitored through the annual planning process. Annual plans are reviewed quarterly for progress made toward goals. The applicant has multiple mechanisms for accessing operational data for performance and operational measures including reports from Datatel Colleague using SAP Business Objects Web Intelligence, Crystal Reports, Accutrack, FootPrint, and various other systems used to track and manage processes within departments.
4.1a(2)	COD has a systematic approach for how key comparative data and information are selected to support strategic decision making. COD selects evidence-based data from authoritative sources (Community College Survey of Student Engagement, external audits and bond ratings, Illinois Community College Board, Integrated Postsecondary Education Data System, National Community College Benchmarking Project, Noel-Levitz Student Survey and the Personal Assessment of the College Environment) and seeks availability of best-practice and/or benchmark data from organizations that are comparative to the applicant in size and academic offerings.
4.1a(3)	There is the beginning of a process to ensure the effective use of voice-of-the-customer data. Survey results are compiled by the Office of Research and Analytics, with reports provided directly to parties through the Employee Portal, made available to the BOT, and are incorporated into the SPP.
4.1b	A variety of ad-hoc performance analyses and reviews are conducted including a review of performance measures from every six months to a few years. Organizational performance is reviewed on an annual basis as part of the strategic planning cycle which includes organizational measures on the strategic action plans. At an operational level, there are some measures which are continually monitored and action taken if adverse results are noted. For some measures the Office of Research and Analytics compiles data and provides the summary to the appropriate department. The SMT analyzes the results of the annual plans quarterly to determine if progress has been made relative to the strategic plan.
4.1c(1)	COD uses the findings from the Academic Program Review and the Center of Excellence (COE) to showcase programs as best practices. The COE recognition takes many measures of performance into consideration.

4.1 Opportunities for Improvement (OFI)

Area to Address	Comment
4.1a(1)	COD does not have in place a systematic evaluation method of the performance measurement system. Without the continual evaluation and improvement of the measurement system the applicant may not be able to adequately respond to and analyze the "right" data. Further, not reviewing systems may lead to the review and analysis of incomplete data leading to incorrect conclusions.
4.1a(2)	While the organization has identified criteria for choosing comparative data, and comparative data are used, this is most often done by comparing COD's performance to measures of central tendency (means/medians), which is misaligned to the mission to be a center of excellence, and the vision to be the education provider of choice. Failure to use comparisons aligned to the mission and vision may cause the organization to underperform and fail to take action when needed, thereby undermining organizational success and sustainability.
4.1b	COD does not have a systematic approach for conducting an analysis of all organizational performance data. Without the systematic evaluation of organizational performance results the organization may miss crucial correlations between performance result measures and may make decisions that could adversely impact a seemingly unrelated measure. For example, a decision made based primarily on financial results may inadvertently impact the organization's ability to attain the strategic goals.
4.1a(3)	While a review of voice-of-the student and stakeholder data may spur the creation of a team to address unfavorable results, this action is reactionary. There is not a systematic process to ensure the effective use of findings to identify priorities for continuous improvement. Without a process to ensure the effective use of these data and the translation of the results into priorities for performance improvement strategies, the applicant may risk overlooking valuable input from students and stakeholders.

SCORE RANGE:
45-55%

4.2 Management of Information, Knowledge, and Information Technology: *HOW DO YOU MANAGE YOUR INFORMATION, ORGANIZATIONAL KNOWLEDGE, AND INFORMATION TECHNOLOGY?* Describe **how** your organization builds and manages it **knowledge assets.** Describe **how** your organization ensures the quality and availability of needed data, information, software, and hardware for your **workforce,** students and **stakeholders,** suppliers, **partners, and collaborators.**

4.2 Strengths

Area to Address	Comment
4.2a(1)	COD utilizes a host of technology systems such as Datatel Colleague, Accutrack, Amplifund, Blackboard Learn, and Business Objects, among others, to manage institutional data. Data accuracy is the responsibility of the department who is responsible for the management of process. Many of the data management systems use data checks and edits to ensure the accuracy of data upon entry. Further, the departments actively edit and correct data to ensure accuracy. Data timeliness is addressed through the use of portals which allow for timely access to internal data systems for employees and students. Security and confidentiality are managed in accordance with the laws that govern their data types at the highest level of security. Active directory is used for identity management and allows for employees and students to have one sign-on for multiple systems. IT monitors changes in the laws to stay current and in compliance, and undergoes an annual external data security audit to make improvements. Employees, consultants and vendors that are granted access to data are made aware of their responsibilities to adhere to data security laws.
4.2a(2)	Various methods are used to make information available to the workforce and students: (a) all registered students acquire a Microsoft live@edu email account accessed through Microsoft Outlook or the internet; (b) all employees have access to email and shared network drives residing on internal servers; (c) Rave Alerts notifications are utilized for emergency notification, which broadcasts through email, SMS, voice, RSS, and social networks; and (d) operation of a public radio station and a TV station throughout the county area. The organization makes data available to decision makers through the Office of Research and Analytics, Crystal Reports, and Business Object Web Intelligence queries.
4.2b(1)	A Technology Replacement plan is used to ensure computing hardware is reliable and up to date. Computers are replaced on a four year schedule tiered by how the computer is used so that all computers are replaced in the four year time period. Servers, storage and network components are evaluated individually to ensure reliability. Software security is maintained through the use of Patch Management to ensure software is up to date and to distribute anti-virus, malware, and spyware software. An IT strategic plan is developed, reviewed and updated annually to keep approaches to hardware and software current with technology needs and trends.
4.2b(2)	The Information Technology Department uses various approaches to ensure the continued availability of hardware and software systems including uninterruptible power supply (UPS) and building generators, internet connections through two ISPs, Patch Management to ensure software updates on desktops and servers, campus-wide distribution of anti-virus, malware, and spyware software; (e) daily offsite backups, firewall with Intrusion Prevention System, and External Storage Area Network (SAN) running parallel servers.
4.2b(1)	COD has a systematic process to ensure software is reliable and user-friendly. It employs project management methodologies to partner and work with internal stakeholders to ensure software systems are user-friendly and meet requirements.

4.2 Opportunities for Improvement (OFI)

Area to Address	Comment
4.2a(2)	Although data are made available for some division leaders, department managers, Deans and Associate Deans through Business Objects Web Intelligence, Crystal Reports and custom reports from various applications, there is a gap in deployment in what is available for decision making and some access is limited, as reported by all levels of members of the workforce , including senior leaders. Without access to timely and complete data for analysis to support decision making, the organization may hinder its ability to quickly and thoroughly analyze results which may lead to break through improvements.
4.2a(3)	COD does not have a systematic well-deployed process used through all areas of the organization to collect and manage organizational knowledge. Knowledge that is not collected, maintained and shared may be lost to the institution and could undermine the core competency related to "People".
4.2a	There is not the beginning of a systematic or fact-based approach to evaluation and improvement of basic approaches for ensuring the quality and availability of needed data. Without improving these systems the organization may not be adjusting methods to ensure the quality of data that are being used for decision making throughout the organization.

SCORE RANGE:

35-45%

5 WORKFORCE FOCUS

The *Workforce Focus* category examines **how** your ability to assess **workforce capability** and **capacity** needs and build a **workforce** environment conducive to **high performance.** The category also examines **how** your organization engages, manages, and develops your **workforce** to utilize its full potential in **alignment** with your organization's overall **mission,** strategy, and **action plans.**

5.1 Workforce Environment: *HOW DO YOU BUILD EFFECTIVE AND SUPPORTIVE WORKFORCE ENVIRONMENT?* Describe **how** your organization manages **workforce capability** and **capacity** to accomplish the work of the organization. Describe **how** your organization maintains a safe, secure, and supportive work climate.

5.1 Strengths	
Area to Address	**Comment**
5.1a(1)	Individual departments assess staffing capacity during the annual action plan stage of the strategic planning process based on current and future enrollment trends, projections, and targets. The appropriate administrator reviews workforce capability to determine the necessity of position(s). Each division and department depending on program, industry, and regulatory requirements, assesses skills and competencies of faculty and staff. Job descriptions are created to support the skills and competencies needed for each position as well as the minimum and preferred requirements. Each academic division monitors course enrollment requirements every semester and the number of faculty is adjusted accordingly to meet the changing capacity requirements. Non-faculty staffing occurs at the appropriate levels using a complement of full- and part-time employees and is assessed by department administrators.
5.1a(2)	Recruiting begins with HR gathering information regarding skills and requirements for the position from the appropriate department administrator, from which, a job description and qualifications are created and the position is posted. Internal staff is given preferential consideration for all open and new positions, particularly in the first week of posting. COD has an overall goal to promote diversity for all posted positions. Target advertising in minority job websites and publications is utilized to achieve this goal. To further ensure that search committees give appropriate consideration to diversity candidates, all members of the committees are required to have completed formal diversity training. Search committees for full-time employment are established by the appropriate administrator responsible for the department or area where the hiring will occur. Search committees are usually comprised of a diverse selection of employees from both in and outside the hiring department. The committee reviews each qualified application and determines which candidates will be recommended for an interview and ultimately which candidates will be recommended to the hiring administrator. All applications are be submitted through Novus HR. COD provides salaries and benefits on the basis of overall compensation philosophy, internal equity, and external competitiveness, within the parameters of fiscal responsibility.
5.1a(3)	COD is organized into divisions, sub-divisions, and departments. Divisions are led by an academic Dean and subdivisions are led by an Associate Dean. Organizational objectives and strategies (action plans) are developed by the administrators of the respective division or department, i.e. Deans and Associate Deans, in accordance with the mission, vision, values, and longer term goals of the institution. Work is accomplished through

collaboration at the department or division level. Competencies are identified and action plans accomplished by allowing departments and divisions to do what they do best. Administrators work with their employees to align individual work with the action plans. Service Excellence, a fairly new program, is being implemented to give employees the necessary tools to do their jobs and translate into better service for students. Strategic challenges such as workforce turnover, enrollment trends, and funding are identified and addressed by strategic themes and action plans.

5.1a(4)   COD uses the environmental scan, along with the planning and reviews of performance at the program and department level to address changing capacity needs. In addition, the organization uses its workforce development approaches to prepare the workforce for changing capability needs.

5.1b(1)   COD uses several departments and the approaches listed below to maintain a safe and secure environment. These include the Environmental Health and Safety Department (EHSD) that monitors various safety measures and conducts monthly training for each agency under its direction, Sworn Police Department that provides 24 hour police presence along with maintaining close collaboration with local law enforcement departments, disseminating updates on campus safety, providing on-going safety training, annual updates to the Emergency Response Guide and Plans and Crisis Communication Plan, an ADA Compliance Manager that ensures compliance with all ADA requirements, and the Emergency Response Volunteer Program (ERVP) whose members are trained to assist in the event of an emergency. In addition, the organization uses closed circuit cameras, emergency phones, locking systems, alert systems, and results from annual safety audits from OSHA and the Claims Administrator to improve safety and security.

5.1b(2)   The workforce is supported through the Board of Trustees Policy Manual which contains a total of 90 Human Resource policies segmented by General (44 policies) that support all employees, Administrative (18 policies) that support administrators and the Senior Management Team, Full-Time Faculty (15 policies), Part-Time Faculty (seven policies), Classified Staff (11 policies), and Other Employees (six policies). These policies are aligned with the overall organizational needs identified by senior management. COD also supports its workforce through benefits including health insurance programs, life insurance plans, educational development programs, sick leave, vacation, holiday, bereavement, wellness incentives, and intervention services through employee assistance programs. Other services and benefits include free parking in staff lots, discounted tuition for employees and their dependents, discounts at local vendors, free check cashing up to $50, internal vendor discounts, facility usage, and vehicle usage for college related business.

5.1 Opportunities for Improvement (OFI)

Area to Address	Comment

Area to Address   **Comment**

5.1a(1)   The organization does not have a systematic method to evaluate its workforce capability and capacity processes. Without systematic evaluation and improvement, COD may have difficulty maintaining its core competency of "People" and this could negatively impact services to students and stakeholders as well as compliance with regulatory and other organizational needs.

5.1a(2)   While the beginnings of a systematic process exists including targeted advertising on minority websites, COD does not have a defined, repeatable approach and those ad hoc approaches used are not fully deployed to ensure that the methods to recruit, hire, place and retain new members of the workforce represent the diverse ideas and thinking of its student and stakeholder community. Without a fully deployed process, the applicant's workforce may not reflect the diverse needs of its stakeholders and community.

5.1a(4)   COD does not have a systematic process to proactively prepare the entire workforce for changing capability and capacity needs. Proactively addressing future capability and capacity needs is important to prevent negative impacts to service excellence and to maintain the core competency of "People".

SCORE RANGE:
50-60%

5.2 Workforce Engagement: Describe **how** your organization engages, compensates, and rewards your **workforce** to achieve **high performance.** Describe **how** you assess **workforce engagement** and use the results to achieve higher **performance.** Describe **how** members of your **workforce,** including leaders, are developed to achieve **high performance.**

5.2 Strengths	

Area to Address	Comment
5.2a(2)	COD uses a variety of approaches to create a culture of open communication. These include divisional and department meetings, leadership teams and councils, and President publications and monthly representative meetings with different workforce groups. The weekly President's message provides information on internal and external issues that are important to staff and stakeholders. The President hosts a monthly breakfast with members of the full and part-time faculty and classified staff. The representatives are able to bring questions and issues to the table. At the conclusion of Administrator Development sessions, the President provides updates on related topics and allots time for discussion. The Shared Governance Council (SGC) was chartered by the President in 2010 to provide an additional forum for communication and collaboration on important topics. The SPP and the performance improvement processes are used to drive high performance work.
5.2a(3)	The performance management system is implemented through the annual review process and includes key criteria centered around high level job classification and function and may be enhanced with use of the Employee Self-Evaluation tool to provide their supervisor with: • How actions or activities have demonstrated the institution's core values, • Actions or accomplishments that demonstrate a positive student/customer service focus, • Most significant accomplishments, • Job responsibility that requires improvement, and • Obstacles or challenges that prevented the employee from high performance.
5.2b(1)	COD utilizes the Personal Assessment of the College Environment, a nationally normed survey, to assess workforce satisfaction. The survey is administered every three years. The survey is sent to all employees and allows for the disaggregation of the workforce constituency groups. The analysis of survey results are used to make improvements to address adverse trends or undesirable results. The survey administration methodology has been evaluated through the response rates and undergone a cycle of improvement. Informal methods such as staff meetings, presidential forums and department meetings are used to assess satisfaction and engagement.
5.2c(1)	A variety of learning and development approaches are used to accomplish a variety of factors matched to annual action plans for workforce members and leaders. Organizational objectives and strategies (action plans) are developed by the administrators of the respective division or department, i.e., Deans and Associate Deans, in accordance with the mission, vision, values, and longer term goals of the institution. Work is accomplished through collaboration at the department or division level. Administrators work with their employees to align individual work with the action plans. Service Excellence, a fairly new program, is being implemented to give employees tools to do their jobs and translate into better service for students. Strategic challenges such as workforce turnover, enrollment trends, and funding are identified and addressed by strategic goals and action plans. The organization complies with state and local laws to ensure ethical standards are maintained. A mechanism for confidential reporting is provided via telephone and internet. Individual departments or divisions tailor learning and development programs to their specific needs using a variety of techniques including seminars, continuing education, webinars, in-service presentations,

and brown bag lunches.

5.2 Opportunities for Improvement (OFI)

Area to Address	Comment
5.2a(1)	While the organization administers the PACE survey, there is not a systematic approach to determine the key drivers for employee engagement. Without determination of the key factors that drive engagement specifically for the employees of the organization, the organization may not accomplish its mission to be a center for excellence, maintain a rich talent pool of faculty, staff and administrators, and overcome the strategic challenges related to institutional climate and shrinking public funding.
5.2a(3)	Most employees are evaluated annually however there are gaps in deployment for the approaches to compensate and reward high performance behaviors. The absence of consistent rewards and recognition may not be adequately motivating staff to achieve the organization's strategic objectives.
5.2b(2)	While the PACE is regularly administered, it is not evident that COD is able to use the data for evaluation and improvement including correlation to retention, absenteeism, grievances, safety, and productivity. Without measuring and correlating those factors that drive the highest level of commitment from the workforce to achieving the organization's strategic objectives, COD may be missing substantial opportunities to drive improvements.
5.2c(1) and 5.2c(3)	COD lacks a systematic process deployed to the full workforce to transfer knowledge from departing or retiring members nor does it have a systematic, deployed approach for succession planning. Failure to plan for the exit of key staff and leaders, and transfer their knowledge to those remaining at COD could cause crucial information to be lost which could lessen effectiveness, reduce sustainability, and failure to achieve the mission and vision.
5.2c(2)	While the effectiveness and efficiency of individual courses are regularly evaluated and there are many options for professional development available to all segments of the workforce, there is not a systematic approach to evaluate the effectiveness and efficiency of the learning development system. This may limit the effectiveness of the learning development system and could lessen the effectiveness of the organization's core competency of "People".

SCORE RANGE:
40-50%

6 OPERATIONS FOCUS

The *Operations Focus* category examines **how** your organization designs, manages, and improves its **work systems** and **work processes** to deliver **customer value** and achieve organizational success and **sustainability.** Also examined is your readiness for emergencies.

6.1 Work System: *HOW DO YOU DESIGN, MANAGE, AND IMPROVE YOUR WORK SYSTEMS?* Describe **how** your organization designs, manages, and improves its **work systems** to deliver student and **stakeholder value,** prepare for potential emergencies, and achieve organizational success and **sustainability.**

6.1 Strengths	
Area to Address	**Comment**
6.1a(1)	COD uses the following systematic approach to design its work systems: - employ the best leader for each key work system, - determine key requirements through a variety of listening mechanisms, - research best practice in industry, - collaboratively re-design key work processes within the system, - partner with the human resources department to develop job descriptions for the workforce in that system, - develop key measures to monitor progress, and - get approval from senior management team. Using the core competencies, strategic direction, expertise or strategic advantage, COD determines which processes will be internal to the institution and those that will be outsourced.
6.1a(2)	Key work system requirements are determined through using the expertise of key leadership in the department, researching best practice in the industry, and from a variety of student and stakeholder listening mechanisms including surveys, advisory groups, and community meetings.
6.1b(1)	The organization has identified key work systems and supporting work systems. Through alignment of the Work Systems to the strategic themes and one year tasks, the organization manages and improves the Work Systems through senior management's annual plans, stop-light reviews, and on-going review of progress measures. One example of an improvement made in the academic work system was the development and implementation of an annual academic review process where all academic programs are reviewed based on a set of measures. The process recently led to the discontinuation of an existing academic program.
6.1b(2)	Cost Controls are included as part of the strategic planning process. Finance has implemented other procedures to control costs such as strict budget controls for each sub fund level budget that is not allowed to exceed budget expenditure, the e-procurement system called Mercury Commerce, bidding process, and the Business Enterprise System. This system also controls cost through better utilization of staff's time, compliance with existing contracts and vendor relationships, and improved oversight and accountability. Preventing errors, rework and associated cost are accomplished through identifying options, consulting experts, acquiring input, and the development of "educational specifications."
6.1c	The organization has a Campus Emergency Operations Plan (CEOP), which is responsible for ensuring work systems and workplace preparedness for disasters or emergencies. The

Plan was developed by staff and community partners including the police and the fire departments of the communities served. In addition, the Incident Management Team and the Risk Management Environmental Health and Safety Committee meet at least three times a year to conduct hazard analysis, and the results are input in the CEOP. COD also adopts the U.S. Department of Homeland Security (DHS) National Incident Management Systems (NIMS), which establishes standardized incident management processes, protocols, and procedures that all responders, federal, state, and local will use to coordinate and conduct response actions. The plan is distributed to staff at all locations, as well as community stakeholders. The oversight committees meet at least three times per year to analyze and mediate general conditions and/or incidents. Based on this analysis the plan is updated and redistributed. Further, the Chief of Police incorporates any change in industry standards into the plan on an annual basis.

6.1 Opportunities for Improvement (OFI)

Area to Address	Comment
6.1a& b	COD has not begun to systematically evaluate, using a fact based method, the approaches for designing, managing and improving work systems. Failure to apply learning and innovation can result in ineffective work system development and improvement, and in failure to produce desired results.
6.1a(2)	The organization lacks a systematic method to incorporate input from suppliers, partners and collaborators in the design, management and improvement of work systems. This could result in work systems that have unintended negative consequences to these key stakeholders which could reduce their satisfaction and engagement with the organization.
6.1b(2)	While COD has a variety of approaches to overall cost control and error reduction, it does not have a systematic approach to minimize the cost of inspections, tests and audits. Failure to evaluate and the approaches to audits/tests/inspections can inflate the cost of services and decrease cost competitiveness or financial performance, a goal that is important to the organization.

SCORE RANGE:
45-55%

6.2 Work Processes: *HOW DO YOU DESIGN, MANAGE, AND IMPROVE YOUR KEY WORK PROCESSES?* Describe **how** your organization designs, manages, and improves its **key work processes** to deliver student and **stakeholder value** and achieve organizational success and **sustainability.**

6.2 Strengths	
Area to Address	**Comment**
6.2a(1)	Leadership and workforce members in each work system design key work processes by using leadership expertise, researching best practice in the industry, using input from students through surveys or focus groups, and by establishing key measures for the work process.
6.2a(2)	The key requirements are determined based on student input (surveys and focus groups), ICCB and DE regulatory standards, and institutional goals related to enrollment growth and student success. The organization has defined five key work processes including, 1) recruiting and admitting student, 2) providing financial aid counseling and support, 3) providing academic advising and counseling, 4) developing & revising curriculum, and 5) delivering instruction. For the five key work processes, the key requirements have been identified.
6.2b(1)	Key work processes are implemented and improved through the annual planning process. Annual plans are created by directors and manager in non-academic work systems and by Deans and Associate Deans in academic work systems. Their annual plans align to the work system plans that were designed by senior management. Key work processes are improved through on-going review of measures identified in these plans. The annual plans include these key measures: Number of student applications segmented by HS and demographics, enrollment numbers at the subject level, receiving and processes financial aid forms, awarding student aid and scholarships, and academic program schedule.
6.2b(2)	COD has a systematic approach to handle supply chain management. The organization has a Purchasing Department, which the BOT has given the authority to manage the supply chain. There are specific criteria based on administrative policies and governmental regulations. Depending on the size of the contract or project, it may be handled by other functional areas of the organization. COD evaluates supplier performance through student satisfaction surveys as well as the suppliers are contractually required to conduct their own surveys which are reviewed by the organization. Suppliers who do not meet the expectations or performance requirements in their contracts are notified of such deficiencies and are expected to remedy the situation. If performance does not improve, based on contract language, exit clauses are invoked and the supplier is not invited as a partner for future opportunities.
6.2b(3)	COD improves its work processes to increase student learning, reduce variability, and enhance educational programs by using the Academic Program Review Process, which is a cycle containing three steps including Plan, Review, and Improve. By using this method over a five year cycle, all programs/disciplines are reviewed, updated, and improved, with data sharing across institutional disciplines. Additionally, opportunities for improvement are identified, prioritized, and when appropriate, teams are chartered for the purpose of analyses, improvement, and innovation. Ad-hoc teams, committees, and Presidential Commissions may also be formed to address opportunities as they arise.

6.2 Opportunities for Improvement (OFI)

Area to Address	Comment
6.2a(1)	COD has not begun to systematically evaluate how the organization designs, monitors and improves key work processes to deliver student and stakeholder value. Without conducting these cycles of evaluation, the organization may not be sure its key work processes are meeting student and stakeholder requirements to achieve desired results, and may fail to make improvements to achieve organizational success and sustainability.
6.2a(2)	There is no systemic process to utilize inputs from stakeholders, suppliers, partners and collaborators when determining work process requirements. Failure to consider all of these inputs may prevent the work processes from enabling the organization to be the primary college district residents choose for high quality education.
6.2b(3)	Although COD improves key work processes through the annual planning process, the use of key measures, access to these measures and use of the results to drive improvements in work processes are not consistently deployed. Failure to consistently deploy the use of measures, review of progress and improvement may fail to yield the improvement in results desired by the organization.

SCORE RANGE:

40-50%

7 RESULTS

The *Results* category examines your organization's **performance** and improvement in all **key** areas – product and **process** outcomes, **customer-**focused outcomes, **workforce**-focused outcomes; **process effectiveness** outcome; and leadership and **governance** outcomes and financial and market outcomes. **Performance levels** are examined relative to those of competitors and other organizations with similar **product** offerings.

7.1 Student Learning and Process Outcomes: *WHAT ARE YOUR STUDENT-FOCUSED AND PROCESS EFFECTIVENESS RESULTS?* Summarize your organization's **key** student **learning results** and **process effectiveness** and efficiency **results.** Include **processes t**hat directly serve students**,** strategy, and operations. **Segment** your **results** by student groups, by **educational programs and services,** by market **segments,** and by **process** types and locations, as appropriate. Include appropriate comparative data.

7.1 Strengths

Area to Address	Comment
7.1a - c	Results are reported for nearly all areas of importance related to student learning and process outcomes**.** Some of the results reported showed beneficial trends, including: Student learning outcomes and process performance results: • Student learning outcomes and process performance results- remedial math and reading retention and completer success rates; institution-wide retention rates; advising/counseling; admission/financial aid; average credit section size; student to faculty ratio • Operational effectiveness and emergency preparedness results – awarding student financial aid, receiving and processing financial aid applications, advising and counseling survey results, admission/financial aid survey results, and safety and security survey results
7.1a - c	Good performance results are reported for few areas of importance related to student learning outcomes including: • First time full time percent transfer in three years, composition I completer rate, and remedial writing retention and completer success rate.
7.1a - c	Comparisons are reported for most results including: • Survey results related to key work processes and academic performance measures.

7.1 Opportunities for Improvement (OFI)

Area to Address	Comment

7.1a - c   Poor performance levels relative to comparisons are evident for nearly all of the results reported for key student learning and process outcomes including:

- Student learning outcomes: Developmental course completion rates, three year completer and transfer rates, completer success rates, student persistence rates, average credit section size, and student to faculty ratio
- Process learning outcomes: Noel Levitz Results: academic services, advising and counseling, instructional effectiveness; registration effectiveness, admission/financial aid

7.1a - c   No comparison results are reported for some of the key student learning and process outcomes including:

- All process related results

7.1a - c   Adverse/flat trends are evident for most of the results reported for key student learning and process outcomes including:

- Student learning outcomes: first-time, full-time complete in three years, first-time, full-time transfer percent in three years, on-line attrition, career program employed and further education, student persistence rates (fall term), and student persistence rates (fall to fall)
- Process performance results: Noel Levitz survey results for academic services, instructional effectiveness, and registration effectiveness; Number of applications segmented by high school demographics

SCORE RANGE:
25-35%

7.2 Customer-Focused Outcomes: *WHAT ARE YOUR STUDENT AND STAKEHOLDER-FOCUSED PERFORMANCE RESULTS?* Summarize your organization's student and **stakeholder**-focused **results** for student and **stakeholder** satisfaction, dissatisfaction, and **engagement**. **Segment** your **results** by **educational programs and services**, features and by student **stakeholder**, and market **segments,** as appropriate. Include appropriate comparative data.

7.2 Strengths	
Area to Address	**Comment**
7.2a	COD reports results for most areas of importance related customer-focused outcomes**.**
	Some of the results reported show beneficial trends, including: • Student and stakeholder satisfaction and engagement – Community College of Student Engagement survey results: active and collaborative learning, concern for individual, academic challenge, student/faculty interaction, support for student learning; ACT Opinion Survey for Student Satisfaction for seven of the 16 segmented service trends
7.2a	Comparison results are reported for nearly all of the results reported.

7.2 Opportunities for Improvement (OFI)	
Area to Address	**Comment**
7.2a	Adverse/flat trends are evident for most of the results reported for key customer-focused outcomes including: • Student and stakeholder satisfaction and engagement – Noel Levitz Survey - would enroll here again and overall satisfaction; ACT Opinion Survey for Student Satisfaction – nine out of the 16 segmented services, all measures on satisfaction with academics, satisfaction with admissions, satisfaction with rules and policies, and satisfaction with facilities (six out of eight).
7.2a	While comparisons are reported for nearly all results, early good performance levels are not evident for most of the results reported for key customer-focused outcomes for student and stakeholder satisfaction and engagement including: • Student and stakeholder satisfaction and engagement – Noel Levitz Survey - would enroll here again and overall satisfaction; ACT Opinion Survey for Student Satisfaction – 13 of the 16 segmented services, all measures on satisfaction with academics, all measures on satisfaction with admissions, all measures of satisfaction with rules and policies, and satisfaction with facilities (five of eight); and the Community College Survey of Student Engagement – concern for individual, student effort, and support for student learners.
7.2a	No results and/or trends are reported for a few of the key customer-focused outcomes including: • Student and stakeholder satisfaction/dissatisfaction – Complaint data, regional employers, and SLRP scientific community survey for taxpayers

SCORE RANGE:
20 - 30%

7.3 Workforce-Focused Outcomes: *WHAT ARE YOUR WORKFORCE-FOCUSED PERFORMANCE RESULTS?* Summarize your organization's **key workforce-**focused **results** for your **workforce** environment and for **workforce engagement.** **Segment** your **results** to address the **diversity** of your **workforce** and to address your **workforce** groups and **segments,** as appropriate. Include appropriate comparative data.

7.3 Strengths	
Area to Address	**Comment**
7.3a	COD reports results for nearly all areas of importance related to workforce-focused outcomes. Some of the results reported show beneficial trends, including: • Workforce capability and capacity – ratio of students to staff in career services, testing and assessment, counseling and advising, financial aid, and student activities; credit hours taught by part-time faculty • Workforce climate – reportable injuries, crime statistics, and OSHA reportable injuries.
7.3a	Comparison results are reported for most of the results reported. Positive comparisons are indicated for some results including: • Workforce capability and capacity – credit hours taught by full-time faculty, ratio of student to staff for testing and assessment and financial aid • Workforce engagement and satisfaction – department rate • Workforce development – training hours per employee

7.3 Opportunities for Improvement (OFI)	
Area to Address	**Comment**
7.3a	Poor performance levels and adverse or flat trends are evident for a most of the results reported for key workforce-focused outcomes including: • Workforce Engagement and Satisfaction – PACE survey results segmented by academic affairs, student affairs and administrative affairs for formal influence, collaboration , and student focus; and for six of the seven other questions regarding satisfaction.
7.3a	Poor performance levels relative to comparison are evident for most of the results reported for key workforce-related outcomes including: • Workforce capability and capacity – ratio of student to staff for career services, counseling and advising, and student activities • Workforce Engagement and Satisfaction – PACE survey results segmented by academic affairs, student affairs and administrative affairs for formal influence, collaboration , and student focus; and for six of the seven other questions regarding satisfaction.
7.3a	Neither trend data nor comparisons are reported for many of the results reported including: • Workforce climate results and all segmented workforce satisfaction survey results.

SCORE RANGE:
20-30%

7.4 Leadership and Governance Outcomes: *WHAT ARE YOUR SENIOR LEADERSHIP AND GOVERNANCE RESULTS?* Summarize your organization's **key senior leadership** and **governance results,** including those for fiscal accountability, legal compliance, **ethical behavior,** societal responsibility, and support of **key** communities. **Segment** your **results** by organizational units, as appropriate. Include appropriate comparative data.

7.4 Strengths	
Area to Address	**Comment**
7.4a	COD reports results for nearly all areas of importance related to key leadership and governance outcomes**.** Some of the results reported showed good relative performance levels to comparisons including: • Governance – Community opinion survey results • Ethics – Institution wide policies on PACE Survey and harassment rate
7.4a	Beneficial trends are evident for some of the results reported for key leadership and governance outcomes, including: • Leadership – Unacceptable behaviors are communicated from administration on PACE survey • Governance –External financial audit • Accreditation – Higher learning commission • Ethics – Incidents of wrong doing and Administrator's rating of institution wide policies • Society – Energy consumption, water consumption, annual recycling (for metal, glass, plastic and paper products and continuing education for ABE and GED

7.4 Opportunities for Improvement (OFI)	
Area to Address	**Comment**
7.4a	Adverse/flat trends are evident for most of the results reported and poor performance levels relative to comparisons and/or benchmarks are evident for most of the results reported for key leadership and governance outcomes including: • Leadership – PACE Survey Results for actions of institution reflect mission (Administration, Classified and Faculty); extent to which job is relevant (Administration, Classified and Faculty); institution positively motivates performance (Administration, Classified and Faculty); positive work expectations are communicated (Administration and Classified); work outcomes are clarified (Administration, Classified and Faculty); and receives important information (Administration and Faculty) • Ethics – Grievance rates, PACE survey results for open and ethical communication (Administrators, Classified and Faculty), unacceptable behaviors communicated (Administrators and Classified), and Institution Wide Policies (Classified and Faculty) • Society – Continuing education for ASE and ESL
7.4a	No comparison results are reported for some of key leadership and governance outcomes including: • Accreditation – Higher learning commission • Society – Energy consumption, water consumption, annual recycling (for metal, glass, plastic and paper products and continuing education for ABE and GED

SCORE RANGE:

20-30%

7.5 Financial and Market Outcomes: *WHAT ARE YOUR FINANCIAL AND MARKET PERFORMANCE RESULTS?* Summarize your organization's **key** financial and market **performance results** by market **segments** or student and **stakeholder** groups, as appropriate. Include appropriate comparative data.

7.5 Strengths	
Area to Address	**Comment**
7.5a	The organization reports results for nearly all areas of importance related to key budgetary, financial and market outcomes**.** Many of the results reported showed beneficial trends, including: • Budgetary and Financial performance – Business performance solutions, credit hour user per year, unrestricted access, operating funds revenue, and fund balances • Market performance – Students by educational need (for transfer, career and technical, and adult students) and enrollment and head count by delivery method (for on-line, hybrid and adult free track)
7.5a	Good performance levels relative to comparisons and/or benchmarks are evident for many of the results reported for key budgetary, financial and market outcomes, including: • Market performance – Enrollment student penetration rates for credit students

7.5 Opportunities for Improvement (OFI)	
Area to Address	**Comment**
7.5a	Adverse trends are evident for many of the results reported for key budgetary, financial and market outcomes including: • Budgetary and Financial performance – Cost per credit hour • Market performance – Enrollment FTES by market segment (new grades, young adults, adults, and older adults), enrollment head count by delivery method for Traditional and Independent Learning Systems, and enrollment credit per student penetration for non-credit student
7.5a	Poor performance levels relative to comparisons and/or benchmarks are evident for most of the results reported for key budgetary, financial and market outcomes including: • Budgetary and Financial performance – Cost per credit hour and enrollment student penetration rates for non-credit students
7.5a	No comparison results are reported for nearly all of the key budgetary, financial and market outcomes including: • Budgetary and Financial performance – User credit hours per year, unrestricted access, and operating funds revenue • Market performance – Enrollment FTES by market share, enrollment head count by delivery mode, business solutions performance, and student by educational need

SCORE RANGE:
35-45%