

# QUALITY CHECKUP REPORT

## College of DuPage

Glen Ellyn, Illinois

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### **The Higher Learning Commission**

A Commission of the North Central Association

#### QUALITY CHECKUP TEAM MEMBERS:

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## **Background on Quality Checkups conducted by the Academic Quality Improvement Program**

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

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

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

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

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

The visiting team members verified the contents of the institution's Illinois Baldrige-based quality award ILPEX application and feedback report [http://www.cod.edu/about/accreditation/ilpex\\_application.aspx](http://www.cod.edu/about/accreditation/ilpex_application.aspx) by examining multiple documents: the 2013 Assurance Narrative [http://www.cod.edu/about/accreditation/pdf/assurance\\_narrative.pdf](http://www.cod.edu/about/accreditation/pdf/assurance_narrative.pdf), 2013 Assurance Narrative Feedback Report [http://www.cod.edu/about/accreditation/pdf/assurance\\_narrative\\_feedback\\_report.pdf](http://www.cod.edu/about/accreditation/pdf/assurance_narrative_feedback_report.pdf), and current Action Projects [http://www.cod.edu/about/accreditation/action\\_projects.aspx](http://www.cod.edu/about/accreditation/action_projects.aspx); exploring the college's website that provided an extensive variety of institutional documents and much of the main campus; discussions with internal and external stakeholders including employees, students, community and business members, K-12 officials, several of the college's Foundation members, and the board of trustee chair; and observations during the pilot Baldrige Quality Checkup Visit. The key strengths and opportunities for improvement identified in the 2012 Illinois Performance Excellence Award Application are described and verified in the following pages.

**Organizational Context**

COD offers more than 90 certificate programs and degrees for technical careers, nine associate's degrees in 59 career and technical areas, 47 transfer pre-baccalaureate programs, and non-credit classes focused on adult enrichment and professional/career development. For the business community, COD provides a customized curriculum to help them succeed in a competitive business environment. The college has formal processes for regularly meeting with and "listening to" targeted groups of constituencies each year. As COD's district encompasses many communities, school districts, and businesses (16 municipalities within District 502), a system of rotation for these meetings was developed. This information collected during these listening sessions flows directly into the planning processes and discussions of the Senior Management Team (SMT). The college also has four Regional Centers [http://www.cod.edu/about/regional\\_centers/index.aspx](http://www.cod.edu/about/regional_centers/index.aspx): Addison, Carol Stream, Naperville, and Westmont. These Regional Centers provide the following services:

- Registration
- Counseling, Assessment and Testing

- **Placement testing** during scheduled open times each semester or by appointment
- Interest Testing
- Computer access to the **Library**
- Assistance using Library resources, *myACCESS* and *Blackboard*
- Transfer of library books and other materials to and from the Center
- Open computer lab available to students and to the community (call for open hours)
- Tutoring for all age groups
- Math Assistance
- Writing Assistance

The college has been growing in enrollment steadily and has completed considerable program, course, and certificate development over the last few years in response to stakeholder feedback and the institution's planning processes. Information from the Quality Summary document (Five-Year Accomplishments (2009-2014) along with discussions throughout the visit and examination of website data indicated that the college added 42 new certificate programs and 12 new degree programs in the above time period. During the same time frame COD also received initial or reaffirmation of accreditation for 22 new academic programs. The visiting team asked if there is a process for closing programs that were no longer relevant, and administrators from the SMT described a process connected to the formal and ongoing program review process.

The visiting team verified that COD offers a variety of services on the main campus including tutoring, career advising, computer labs, counseling/advising, special services for eligible students with disabilities, and a testing center. Discussions and documents indicated that COD meets five community educational needs through a range of programs, degrees, and services:

1. Business Training – Providing specialized or customized training/education to local companies for their employees.
2. Continuing Education – Providing non-credit courses to the community for personal development and interest.
3. Developmental Education – Providing remedial education for students who are not academically ready to enroll in college-level courses.
4. Careers and Technical Education – Preparing students who will graduate with an Associate in Applied Sciences degree or certificate and directly enter the workforce.
5. Transfer Education – Preparing students for transfer

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 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 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. The AQIP visiting team observed that this Action Project appeared to be well received in those departments working directly with students and other stakeholders; and the sustained training is a best practice. Strategic challenges such as workforce turnover, enrollment trends, and funding are identified departmentally and funneled to either senior management or the Shared Governance Council and often addressed by strategic themes and action plans.

### **Strategic and Departmental Planning and Environmental Scanning Processes**

In recent years COD has revised its strategic and annual planning processes and restructured many of its standing committees and teams. During the 2010 Strategic Long Range Planning Cycle, the Strategic Long Range Planning Advisory Committee (SLRPAC) recommended that the college's mission and vision be modified to better reflect COD's commitment to providing exceptional educational and cultural experiences for its students and communities. These recommendations were reviewed and supported by the Senior Management Team (SMT), and approved by the College's Board of Trustees (BOT). Throughout the visit college employees discussed the revised planning processes, and many individuals provided examples of how the current planning at multiple levels is closely tied to the college's mission and vision statements. These statements were also displayed throughout the campus, and employees often pointed to these displays when explaining processes, systems, and improvements.

A new focus on data-based decision making and tracking performance results was evident throughout the visit. In response to ILPEX feedback, regular discussions of the institution's progress towards objectives/goals, and continual examination of performance results, college teams have identified areas of improvement for many significant work systems. In discussions with individuals from multiple departments, evidence was provided that they have reviewed and re-designed processes with measurable targets. Reports and Scorecards have been developed to document departmental and institutional goals, objectives, and targets, and processes are in place to disseminate these data to relevant stakeholders both internally and externally.

An important component of strategic and annual planning for the college is facilities planning and improvements. COD regularly collects data and comments about its campus environment and does a good job of identifying improvements based on that information. Within a period of five years the college has

built or renovated all current facilities. A tour of the campus and its facilities along with a schedule that included meetings in multiple areas provided ample evidence of this large-scale effort. Visiting team members viewed information on the Facilities Master Plan Overview that is located on the college website at [https://www.cod.edu/facilities\\_plan/over/view.htm](https://www.cod.edu/facilities_plan/over/view.htm). Some examples of the relationship between COD's strategic and annual planning and the college's strong commitment to its Facilities Master Plan are the following: the Homeland Security Educational programs and facility; Three + One partnerships with four-year colleges and universities that allow College of DuPage (COD) students to complete a four-year degree on the COD campus; renovation of the college Library and Physical Education Center ([https://www.cod.edu/news-events/news/14\\_february/14\\_library.aspx](https://www.cod.edu/news-events/news/14_february/14_library.aspx)); developing a second simulation lab for health care programs ([https://www.cod.edu/news-events/news/14\\_february/14\\_library.aspx](https://www.cod.edu/news-events/news/14_february/14_library.aspx)); and a ribbon cutting ceremony for the new McAninch Arts Center ([https://www.cod.edu/news-events/news/14\\_february/14\\_ribboncutting.aspx](https://www.cod.edu/news-events/news/14_february/14_ribboncutting.aspx)).

ILPEX feedback identified many strengths in the college's strategic planning efforts that the AQIP visiting team was able to verify. The Strategic planning process begins in November and results in an approved plan in July. The Strategic Long Range Plan is available on the college website at: [http://www.cod.edu/about/office\\_of\\_the\\_president/planning\\_and\\_reporting\\_documents/pdf/slrp.pdf](http://www.cod.edu/about/office_of_the_president/planning_and_reporting_documents/pdf/slrp.pdf). It is a three year plan supported by annual departmental plans and has an eight-phase process involving interaction between key stakeholder groups including business communities, government, tax payers, and students. Support for the plan comes from the Board of Trustees, President, Senior Management Team, Shared Governance Council, SLRP, and managers/directors. SLRP reviews and develops the philosophy, mission, vision, core competencies, and strategic advantages/challenges and then completes a SWOT analysis in the review of core competencies and strategic advantages/challenges. During analysis the college uses a variety of internal assessments including the Fact Book <http://www.cod.edu/about/research/pdf/factbook.pdf> as well as external influences (E-Scan [http://www.cod.edu/about/office\\_of\\_the\\_president/planning\\_and\\_reporting\\_documents/pdf/slrp.pdf](http://www.cod.edu/about/office_of_the_president/planning_and_reporting_documents/pdf/slrp.pdf)) to identify potential blind spots.

COD has revised processes to prioritize the strategic advantages/challenges during the SWOT analysis. Changes were made to the E-Scan process that will make it easier to use and includes the expertise of Subject Matter Experts. The college also makes use of a systematic approach to setting time horizons that translate to three years for long range goals with longer (five-year) plans for financial planning that is woven into three year period. The plan has been revised to accommodate shorter time ranges to accommodate rapid change. All annual departmental plans are built based on long term goals and

monitored through a top down process from the SMT and trickling down to deans, directors, and departments.

ILPEX feedback stated that COD is transforming its culture to one of management by fact. An opportunity was identified for improving the ease and access to needed data and information. This issue was discussed during the visit, and college personnel provided evidence that the college has multiple methods that provide access to data and information that include the college portal, a formalized process for requesting data reports, and the efforts of the SMT, college president, and other committees, teams, and departments to regularly disseminate information. However, providing ease and access to necessary data is challenging for most institutions, and it is recommended that COD continue efforts to continually improve in this area and regularly provide training and assistance for stakeholders needing access in order to fully transform its culture to one of management by fact.

In the area of data used for strategic planning, ILPEX feedback indicated that COD's mission is to be a "center of excellence" but currently uses measures of central tendency in reporting performance results (means/medians are used to compare its performance to like organizations). This issue was discussed during the visit and SMT members and other administrators stated that this process was now changed and new performance results would reflect a higher level of measures and comparisons.

A lack of formalized succession planning was also rated as an opportunity in the ILPEX feedback report. The ILPEX reviewers stated that in the area of 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 organizational knowledge may threaten the sustainability of the organization. Succession planning was discussed several times throughout the AQIP team visit, and administrators indicated that college personnel are engaged in improving and expanding high level succession planning. Additionally, the college responded to this issue through the development of the Community College Academy on Succession Planning. This is a multi-college effort (initiated and led by COD) to provide a select group of community college administrators or supervisors from up to five community colleges with useful information to help them assume higher managerial/administrative responsibilities. It is also important to note that a best practice is to develop processes and systems to provide succession planning throughout the institution as many levels of positions are critical to maintaining institutional knowledge and experience.

The ILPEX feedback report also included many institutional strengths that were reviewed and verified by the AQIP visiting team. In the area of data collection and reporting nearly all expected results are reported

as was evidenced by multiple documents and charts: financial documents [http://www.cod.edu/about/office\\_of\\_the\\_president/planning\\_and\\_reporting\\_documents/financial.aspx](http://www.cod.edu/about/office_of_the_president/planning_and_reporting_documents/financial.aspx); Fact Book, reporting and planning <http://www.cod.edu/about/research/pdf/factbook.pdf>; Facilities Plan [http://www.cod.edu/facilities\\_plan/](http://www.cod.edu/facilities_plan/); and grants <http://www.cod.edu/about/grants/index.aspx>. An outstanding strength for COD is that the financial results indicate the highest number of beneficial trends, which is important to note considering the current financial situation facing community colleges today. The college has been successful in attaining significant community support during challenging financial times, has successfully raised funds through the college foundation, and has continued success in federal and local grant applications. The continued enrollment growth for COD is also impressive during a time period when most community colleges across the country were losing enrollment.

## **Leadership**

Leadership strengths noted in the report and verified during the visit include a formal process for reviewing the college's mission, vision, and values. The Strategic Long Range Planning Advisory Committee reviews data gathered from multiple key stakeholder groups and recommends any changes to the President and SMT. If approved by the Management Team, recommendations are presented to the Board of Trustees and publically posted for 30 days for any questions and input. Final recommendations are adopted by the Board.

As required by the State and the Higher Learning Commission, senior leadership at COD promotes an environment for legal and ethical behavior by participating in the development and review of the Ethics Policy contained in the Policy Manual for the Board of Trustees ([http://www.cod.edu/about/board\\_of\\_trustees/pdf/board\\_policies.pdf](http://www.cod.edu/about/board_of_trustees/pdf/board_policies.pdf)), setting ethics expectations for the New Employee Orientation, and requiring transparency in all external contractual relationships.

The visiting team found that the communication of key decisions to employees is accomplished with multiple methods. A Shared Governance Council was developed to help promote the discussion of key topics, and these topics/issues are often sent outside the Council for evaluation by the appropriate stakeholders who have the necessary skill sets and knowledge. The college website provides this description of the Council: "The Shared Governance Council (<http://www.cod.edu/about/humanresources/pdf/all-employee-guidebook.pdf>) at College of DuPage is a group that implements a communication and collaboration process designed to ensure that institutionally important topics are broadly approached by engaging the appropriate people with the necessary skill sets and knowledge. College of DuPage solicits input from member organizations of the college community in



its decision-making process. Those included in the process are administrators, classified staff, engineers and maintenance mechanics, full-time faculty, managerial staff, adjunct faculty, police officers, and students. The visiting team members observed some confusion concerning the purpose and scope of the Shared Governance Council. As the Council does not engage in decision-making but may at times make recommendations to the SMT, the college may consider changing the name of the council to aid in the transparency of the function of this key group.

ILPEX feedback identified an opportunity in the area of recruiting minorities in the workforce. “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.” The AQIP team found that COD has an overall goal to promote diversity for all posted positions. The Fact Book provided demographic data on ethnicity for employees and students. In 2013 for all employee groups, 1,890 employees are identified as “White” while the combined minority employee group totaled 365 employees, meaning that in the workforce, just over 6% of employees are from minority groups. 2013 “Credit Students by Ethnicity” data showed that out of 26,755 credit students (removing the unknown and Non-resident Alien groups) 11,309 were Minority students (43%) while 15,446 were labeled White. A process of targeted advertising in minority job websites and publications is utilized. However, depending on what the overall goal to promote diversity for all posted positions actually means, the college may want to develop other marketing/recruiting strategies to ensure a diverse workforce.

The college also works with search committees to give appropriate consideration to diversity candidates, and 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. Search committees are usually comprised of a diverse selection of employees from both in and outside the department. COD provides salaries and benefits on the basis of overall compensation philosophy, internal equity, and external competitiveness, within the parameters of fiscal responsibility.

The visiting team observed that the senior leadership of the college helps create a focus on a culture of continuous quality improvement 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 Scoreboard. This work was highly evident throughout the visit and no doubt has supported the institution’s continued growth and many improvements.

### **Governance and Societal Responsibilities Strengths**

The visiting team found evidence to support statements in the Quality Summary that the Board of Trustees holds the Senior Management Team accountable through a variety of systems, including Presidents' 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. This evidence came from multiple sources including college documents and budget reports, the website, and discussions with college personnel.

As mentioned earlier in this report, the college addresses public concerns with education programs, services, and operations through its community and stakeholder listening processes, including Community Nights, community surveys to gather feedback, and advisory committee meetings. This area of college outreach and sharing of resources was strong, and evidence of outreach and connections with students and external groups was plentiful. It was also evident that college employees were proud of the attractive campus, services provided, and many activities and experiences the college regularly offers. COD created a plan (Curb Appeal) to update and renovate much of the campus. Over a five-year period the college completed or has underway more than \$550 million in campus improvements involving more than one million square feet of enhanced educational space.

Throughout the campus there was evidence of the significant donations from businesses and community members. Student leadership activities were robust, and students were clearly connected to the college. The college regularly brings groups on campus, and employees and students reach out to the community in multiple ways including a project on supporting local charities and interacting and sharing resources with high schools and middle schools. COD is invested in working closely with high school students through offering a wide variety of online and onsite dual-enrolled college courses. The college also goes into the high schools and conducts placement testing for students in their junior and senior years to give them a better idea of how they will place when they enter college and it also gives them time to remediate problem areas before high school graduation. The college also works collaboratively with the middle schools to offer programing and career exploration.

Observations throughout the visit indicated that the college addresses societal well-being and considers environmental impact through multiple mechanisms: stakeholder and community listening posts to gather input to strategic planning process, energy conservation, paperless office and recycling programs, support of the local PACE bus service to minimize driving, offering free education classes, building LEED

certified structures “[http://www.cod.edu/news-events/news/13\\_december/13\\_leedcertification.aspx](http://www.cod.edu/news-events/news/13_december/13_leedcertification.aspx)” and implementation of an Energy Master Plan “[http://www.cod.edu/facilities\\_plan/fom/EnergyMasterPlan.pdf](http://www.cod.edu/facilities_plan/fom/EnergyMasterPlan.pdf)” to address environmental stewardship and energy efficiency. The college now closes the campus in the summer on Fridays and after tracking this practice found that shutting systems down for three days each week saved a considerable amount of energy consumption. These efforts appear to be quite successful, and employees and students expressed a high level of pride concerning these areas.

The ILPEX feedback identified opportunities in governance and societal responsibilities concerning a systematic approach to leadership improvement other than evaluation of senior leadership based on completion of annual plans. The AQIP visiting team found several areas of improvement in this area including regular monitoring of strategic and annual departmental plans along with revised annual evaluation system that aligns to institutional goals and objectives. The annual evaluation system is also connected to a self-evaluation, and a portion of the process includes a discussion of needed training for employees. In several discussions it was evident that employees have departmental and other institutional and foundation funds supporting professional development and innovation. The college provided documentation that compensation levels are competitive throughout the institution and open positions often draw large and qualified applicants. Full-time faculty members receive \$1,800 in professional development per faculty member annually and also have other funds available upon successful application for professional development and innovation.

### **Strategy Implementation**

The visiting team was able to verify the many strengths identified by the ILPEX feedback that ties to the college’s fiscal stability and budget planning, enrollment growth and enrollment management, emphasis and training on customer service, significant institutional outcomes, current and recently retired Action Projects, extensive Facilities Plan, Energy Management Plan ([http://www.cod.edu/facilities\\_plan/fom/EnergyMasterPlan.pdf](http://www.cod.edu/facilities_plan/fom/EnergyMasterPlan.pdf)), Foundation activities and accomplishments <http://www.cod.edu/foundation/index.aspx>, and multiple grants “<http://www.cod.edu/about/grants/index.aspx>”.

Identified opportunities included the lack of a systematic process to evaluate and improve the action plan development process; 37 of the 49 one-year action plan goals did not have performance measures or indicators of successful completion, and the college did not project future performance relative to key

competitors or comparable organizations. As identified previously in the document, the visiting team verified that COD has made progress in these areas, is continuing to make multiple improvements in performance measures, tracking performance of competitors, and the action plan development process. The college initiated the Institutional Effectiveness Council in collaboration with the SMT to provide recommendations and guidance in the identification and chartering of Quality Improvement Project Action Teams (QIPS) and to support the HLC AQIP accreditation process. The council is chaired by the VP of Planning and Institutional Effectiveness, and the Director of Research and Analytics serves as an ex officio member. The remaining council membership is comprised of a minimum of two faculty, two administrators, two managerial staff, and two classified staff, each with a two year term.

### **Customer Focus**

ILPEX feedback enumerated multiple strengths in the COD processes for focusing on customers that includes prospective and current students and community and business members. The AQIP visiting team verified information and data on processes to collect feedback on listening mechanisms, surveys, tracking, benchmarking, and comparison efforts. These data and performance results were available in the ILPEX application, the college website, and discussed in meetings during the visit.

The opportunities included no approach to systematically evaluate and improve key listening methods for former and current students or stakeholders. COD does not employ a systematic method to evaluate and improve its process for gathering student satisfaction information. There is a gap in deployment/lack of a systematic approach for obtaining satisfaction and dissatisfaction data from all stakeholder groups. The college conducted a community survey but those surveyed were not representative of all key community stakeholder groups identified as important to them. 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. Student surveys are only administered every three years for two-year students. The AQIP visiting team verified that either the college made progress on improvements such as a better process for differentiating student market segments or is continuing to improve the types of listening mechanisms and collecting and using that information. Discussions concerning the timing of the student satisfaction/engagement surveys clarified the rationale (providing a snapshot from three surveys, thus creating richer data and information) for conducting the surveys in the three-year timeframe.

## **Customer Engagement**

As indicated in the ILPEX feedback report and verified during the AQIP visit, COD has many strengths in the area of customer engagement and has completed several Action Projects: Improving Students' Skills in Developmental Reading, Writing and Mathematics, Improving Student Advising, Improving Effectiveness of Partnerships with Area High Schools, Valuing People Through Enhanced Communications, Improving Academic Readiness of Students, Improving Student Engagement, Improving General Education Learning Outcomes, Academic Program Development and Approval Process, Improving the Course Scheduling Process, Improving the Effectiveness of the Comprehensive Advising Model, and Exemplary Student Experience. Current projects are Enhancing Student Satisfaction, Retention, and Success Through Advising/Counseling Staff Realignment and Improving Academic Performance "[http://www.cod.edu/about/accreditation/action\\_projects.aspx](http://www.cod.edu/about/accreditation/action_projects.aspx)".

Other areas of strength included improved processes for planning, conducting an environmental scan every three years, and active collaborations with regional workforce development/economic groups and educational partners that help the college identify the needs of key stakeholder groups and programs for development. Employer advisory group data are used that focus on adults who work in district but live elsewhere.

COD develops relationships with area high schools by hosting large campus visit days, administrative staff focus groups, and meetings with the area superintendents. The AQIP team was able to observe one of these meetings during the visit. The college has also partnered with competitor four-year colleges to identify and offer specific programs as 3+ 1, an initiative that allows the student to achieve many of the credits at COD. This is an important innovation for students and community members and was verified in meetings with students, community and business members, and local high school personnel.

Abundant evidence was available that 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 the website and portal, Blackboard, myAccess, campus panel displays, mailings, inquiry cards, information flyers and brochures, the Fact Book, Program Informational Nights, Student/Parent Information Nights (SPIN), and financial aid and counseling.

As discussed earlier in services for students, COD provides a 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. With the

increases in enrollment in online courses, testing personnel reported having the capacity for serving the growing testing needs of students. The college also uses feedback from student surveys and student comments to make work process improvements. The ReSET Team was developed to continually improve student support processes.

COD has successfully increased Latino student enrollment and has developed additional programs to address other market segments, which include the development of a Latino Center, Veterans Lounge and the Adult Fast Track Program. In conversations with students, the AQIP team observed strong support for institutional efforts in this area. Another recently revised process is the Retention Alert System that identifies academically at risk students. Discussions with faculty and Student Affairs indicated support for this system, and discussions are ongoing concerning how to further improve this system. Other programs and activities that provide increased student engagement are the 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. Student Life”  
[http://www.cod.edu/student\\_life/index.aspx](http://www.cod.edu/student_life/index.aspx)”, Performing Arts “<http://home.cod.edu/atthemac>”, First Year Experience

“[http://www.cod.edu/student\\_life/fye/index.aspx](http://www.cod.edu/student_life/fye/index.aspx)”, Student Affairs

“[http://www.cod.edu/student\\_life/student\\_services/index.aspx](http://www.cod.edu/student_life/student_services/index.aspx)”, Tuition and Financial Aid

“<http://www.cod.edu/tuition/index.aspx>”, and Athletics “<http://www.cod.edu/athletics/index.aspx>”.

ILPEX opportunities included a need for determining and improving stakeholder engagement, programs and services, serving their needs, or building relationships for all stakeholders; identification of 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; and that 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. The AQIP team verified recent improvements or new plans for improvements in all three areas. Stakeholder engagement and building relationships for all stakeholders are addressed with three of the current Action Projects, new advising efforts, enrollment management and publicity/promotion efforts. A software solution is under initial implementation to improve the complaint process. Although this process is currently focused on the student complaint process, employees assured the visiting team that the software is capable of expansion to include other stakeholders. The new software holds the promise of a tracking system that will identify trends and repeated complaints.

### **Measurement, Analysis, and Knowledge Management**

The ILPEX feedback identified opportunities for the development of a systematic evaluation method of the performance measurement system and a new practice of choosing comparative data that is not tied to measures of central tendency but instead aligns those measures more closely to the college's mission to be a center of excellence. Other opportunities included the lack of a systematic evaluation method of the performance measurement system, a systematic evaluation of institutional performance results, and no systematic process to ensure the effective use of findings to identify priorities for continuous improvement. Discussions with the Institutional Research Department, SMT, Student Affairs, Academic Affairs, and the Long Range Strategic Planning Committee indicated that these changes/improvements were already either accomplished or underway. The current Action Project, **QIP 14: Improving Data/Information Availability and Management**, was established in part in response to the ILPEX feedback, and changes were made in the strategic planning process, the annual evaluation system, program review, and annual departmental planning process. Many current initiatives were very new and still in the planning or early implementation stage, so actual results are not yet available. However, COD appears to have a history of continuous change and improvement and seems to have the resources and personnel to successfully implement numerous significant changes.

COD is a large and complex organization and therefore knowledge management and technology system security and reliability is vital to the institution. The college has multiple technology systems such as Datatel Colleague, Accutrack, Amplifund, Blackboard Learn, and Business Objects, among other products, to manage institutional data. The ILPEX feedback found that many of the data management systems use data checks and edits to ensure the accuracy of data upon entry. Access to data is achieved through the use of portals which allow employees and students to interact with internal data systems. As with any complex and secure system, some employees expressed some challenges with either access to needed data or some of the newer systems not yet operating at top efficiency. A new requisition system appeared to be having some initial problems and some employees/departments were struggling with receiving payments after turning in expense requisitions. The visiting team spoke with several administrators and managers who agreed there were existing problems but had confidence upon full implementation, these problems would be solved.

Other important components of the system included Active directory that is used for identity management and allows for employees and students to have one sign-on for multiple systems. This is particularly

important considering the college's strong enrollment growth in online courses and hybrid options. The IT department 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. Security "[http://www.cod.edu/about/information\\_technology/security/index.aspx](http://www.cod.edu/about/information_technology/security/index.aspx)" Information Technology "[http://www.cod.edu/about/information\\_technology/index.aspx](http://www.cod.edu/about/information_technology/index.aspx)", Rave Alert Notifications "[http://www.cod.edu/about/office\\_of\\_the\\_president/planning\\_and\\_reporting\\_documents/pdf/slrp.pdf](http://www.cod.edu/about/office_of_the_president/planning_and_reporting_documents/pdf/slrp.pdf)".

The Information Technology Department is responsible for 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. The AQIP visitors found systems to be well-maintained, classrooms had multiple levels of technology tools, classroom assistance was available, and satisfaction was evident in multiple groups with the level of technology and service from the IT department.

ILPEX feedback indicated that 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. The AQIP team found that this issue may be connected to data request forms and a priority system for data reports that related to the Institutional Research department, not the Information Technology department. Although prioritizing data requests is often a problem at institutions, it is an area of importance for many departments as they conduct review, evaluation, or planning efforts and should be regularly assessed for effectiveness and efficiency. Another ILPEX opportunity stated that COD does not have a systematic well-deployed process used through all areas of the organization to collect and manage organizational knowledge. The Action Project, **QIP 14: Improving Data/Information Availability and Management**, was created to address this opportunity and is in its initial stages of planning and development.

### **Workforce Engagement**

The AQIP visiting team found that communication efforts internally and externally were varied and



consistent. COD uses 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 support high performance work.

ILPEX feedback indicated that while the organization administers the PACE survey, there is not a systematic approach to determine the key drivers for employee engagement and that most employees are evaluated annually, although not all. In meetings with administrative and management groups the AQIP visitors were informed that the evaluation process is now annual for all employees. After reviewing the extensive communication, evaluation, and training/professional development processes, the visiting team verified evidence of an emerging systematic approach to drive employee engagement. Discussions with administrative, managerial, and classified groups indicated basic satisfaction with the evaluation system and employee engagement. Student workers also felt they were significantly engaged in the organization and many of its processes.

The ILPEX feedback indicated that 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. The AQIP visiting team members basically agree that the PACE survey by itself may be limited when looking at the multi-faceted workforce issues. Adding other assessments to help triangulate the performance results may provide a richer base of data and information for planning continuous improvements.

### **Operations Focus**

ILPEX feedback and the AQIP visiting team found that the college employs a strong operational focus on many processes and work systems that help with institutional stability, security, and overall effectiveness. COD uses many formal and informal processes to design and manage its work systems. Cost controls are

included as part of the strategic planning process. Procedures to control costs and increase efficiencies include the e-procurement system, bidding process, and the Business Enterprise System. This system also controls cost through better utilization of staff time, compliance with existing contracts and vendor relationships, and improved oversight and accountability. The college has a Campus Emergency Operations Plan (CEOP), which is responsible for ensuring work systems and workplace preparedness for disasters or emergencies. This planning process involves partnering with 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. 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.

Opportunities identified in the ILPEX feedback indicated that COD has not begun to systematically evaluate, using a fact-based method, the approaches for designing, managing and improving work systems; the organization lacks a systematic method to incorporate input from suppliers, partners and collaborators in the design, management and improvement of work systems; and that it does not have a systematic approach to minimize the cost of inspections, tests and audits. Although the AQIP visitors agree that these improvements will help further strengthen the college, it is clear that the college is maturing in this area and has developed numerous best practices.

## **Results**

Results are reported for nearly all areas of importance related to key operations of the college. The ILPEX feedback reported beneficial trends in each area that supported many strengths and improvements over time and are evidence of a growing culture of continuous improvement and operational health. The AQIP team verified these positive performance results through document and website review and multiple discussions during the visit. The college has focused heavily on improving the academic experience for students through faculty efforts, an emphasis on customer service excellence and employee training, and improvements in data collection that is aligned with strategic planning efforts.

ILPEX feedback also reported opportunities in all areas based on multiple survey results, poor performance results or adverse/flat trends in many of key areas, and no comparison results reported for

some key student learning and process outcomes. This feedback is not surprising as the continuous quality improvement process is ongoing and educational institutions must adjust and adapt to the many changes and challenges in the educational and political environment. The strong, consistent improvements and innovations evidenced throughout the AQIP visit illuminate a vibrant and effective college that is responsive to its many stakeholders and constituents. With the emphasis on strategic and operational planning, data-based decision-making, regular communication efforts and sustained training, the college has come a long way in five to seven years. Not all changes have been successful, but the college appears to learn from its mistakes and continues to embrace change and innovation in order to help students succeed and serve stakeholder needs.

### **Review of the organization's quality assurance oversight of its distance education activities.**

The College of DuPage is currently approved to do 20 % of its delivery in a distance education format.

The team met with the Online Education Team and, based on the evidence presented, determined the College of DuPage is in the beginning stages of developing systematic processes for distance education. Since the writing of the Illinois Quality Award Application, the college has begun to assess distance learning, and has begun to develop methods to analyze the data surrounding issues with distance education. The overall goal of the analysis is for the college to develop comprehensive processes to ensure the highest quality distance education experience for its students.

Examples that were given by the college involve the development of training faculty for online instructions, along with the development of an online training course for all first time distance learning students. This course will be required for all students who initially enroll in an online or distance learning course, and will comprehensively train them for the online environment at the college. Additional research is being conducted in the areas of online tutoring and advising, and the plan will be to develop and implement high quality systems for tutoring and advising of distance education students. Future plans include reviewing the current LMS being used to determine if it is the appropriate system or if they should look at a replacement system.

College personnel indicated they need to improve distance education in terms of best practices, such as assessment of learning, as well as teaching expectations for faculty (i.e. what are the expectations and format requirements for distance learning courses). Currently the assessment of distance learning centers primarily in evaluating and comparing grade information with traditional courses. In the future the team plans to develop more advanced, and more substantive, methods to evaluate distance learning courses and

students. One potential method is through the use of online portfolios to ensure that students are meeting learning objectives. This method is currently being assessed. Plans are also being developed to have a systematic process that ensures all courses have minimum requirements for them. This will help assure that all courses share a minimum high quality standard. As part of this initiative, in 2013-2014, the team developed a new process for the structuring of online/distance learning course development. This new process combines faculty with instructional designers, who work collaboratively to develop new courses. The completed/approved course is then placed into the course library of the college so that it can be used by faculty teaching the courses (typically the faculty developer will teach the course; however, other faculty have the option of teaching it as well).

One example of a highly successful course was identified as a Spanish class that is taught online. This course has incorporated live webcam usage for the course, along with voice posting, and online tests and quizzes. This course is very successful and the plan is to use it as a model for other similar courses.

*In the team's judgment, the institution has presented satisfactory evidence that its distance education activities are acceptable and do comply with the Commission's standards and expectations.*

### **Review of the organization's quality assurance and oversight of distributed education (multiple sites)**

COD has four Regional Centers [http://www.cod.edu/about/regional\\_centers/index.aspx](http://www.cod.edu/about/regional_centers/index.aspx): Addison, Carol Stream, Naperville, and Westmont. Each Center has a full-time Supervisor that provides overall management of the site and communicates and meets regularly with the Academic Affairs deans and associate deans. These Regional Centers provide the following services:

- Registration
- Counseling, Assessment and Testing
- **Placement testing** during scheduled open times each semester or by appointment
- Interest Testing
- Computer access to the **Library**
- Assistance using Library resources, *myACCESS* and *Blackboard*
- Transfer of library books and other materials to and from the Center
- Open computer lab available to students and to the community (call for open hours)
- Tutoring for all age groups
- Math Assistance
- Writing Assistance

*In the team’s judgment, the institution has presented satisfactory evidence that its distributed education activities (operation of multiple sites) are acceptable and comply with Commission’s standards and expectations.*

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

The College of DuPage had no accreditation issues identified by the institution’s last Systems Appraisal or its ILPEX Application Feedback Report.

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

**Screening of Criteria for Accreditation and Core Components**

The following section identifies any areas in the judgment of the Quality Checkup Team where the institution either has not provided sufficient evidence that it currently meets the Commission’s *Criteria for Accreditation* (and the core components therein) or that it may face difficulty in meeting the *Criteria* and core components in the future. Identification of any such deficiencies as part of the Quality Checkup affords the institution the opportunity to remedy the problem prior to Reaffirmation of Accreditation. Items judged to be “Adequate but could be improved” or “Unclear or incomplete” during the Checkup Visit screening will not require Commission follow-up in the form of written reports or focused visits. However, Commission follow-up will occur if the issues remain apparent at the point of reaffirmation of accreditation.

Criterion 1: Evidence found in the Systems Portfolio	Core Component				
	1A	1B	1C	1D	
Strong, clear, and well-presented.	x	x	x	x	
Adequate but could be improved.					
Unclear or incomplete.					
Criterion 2: Evidence found in the Systems Portfolio	Core Component				
	2A	2B	2C	2D	2E
Strong, clear, and well-presented.	x	x	x	x	x
Adequate but could be improved.					
Unclear or incomplete.					
Criterion 3: Evidence found in the Systems Portfolio	Core Component				
	3A	3B	3C	3D	3E
Strong, clear, and well-presented.	x	x	x	x	x

Adequate but could be improved.					
Unclear or incomplete.					
Criterion 4: Evidence found in the Systems Portfolio	Core Component				
	4A	4B	4C		
Strong, clear, and well-presented.	x	x	x		
Adequate but could be improved.					
Unclear or incomplete.					
Criterion 5: Evidence found in the Systems Portfolio	Core Component				
	5A	5B	5C	5D	
Strong, clear, and well-presented.	x	x	x	x	
Adequate but could be improved.					
Unclear or incomplete.					

The COD 2013 Assurance Narrative for the Higher Learning Commission, the ILPEX Application and Feedback Report, the COD Quality Summary, college website, internal and external publications, and AQIP Checkup Visit provided ample evidence that all five Criteria and the related Core Components were met with strong and clear evidence. The visiting team reviewed documents that were provided before and during the visit, spent extensive time reviewing documents housed on the college website; toured much of the main campus; and talked with employees from across the campus at multiple levels of the institution (students, faculty, foundation board members, area superintendents and principals, business members, community members, the chairperson of the board of trustees, and college alumni). Team members also reviewed and agree with the Federal Compliance documentation provided by another peer reviewer as part of this pilot.

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

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

The ILPEX feedback report does not specifically state Strategic Issues; however, four key opportunities for improvement were identified in the report. The reviewers determined these opportunities to be strategic issues for the college, and are identified as:

1. There is a key misalignment in the performance review process and the data used to manage and improve the organization.
  - In meetings with the Senior Management Team (SMT), it was noted that this issues is primarily being addressed through Quality Improvement Teams (QIP). The specific QIP that addresses data management is QUIP 14 – Data Warehouse Project. This particular project is a multiphase project, with the first phase being completed in December of 2013. Phase I included the installation of hardware, software and the defining and implementation of fifteen Key Performance Indicators.

2. 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.
  - The college noted that this is an issue and that they are in the early stages of developing new metrics. These metrics will allow the college to set targets that are on the high end and align with top achieving institutions.
3. As a result of the complexity of the institution and its relatively new journey for continuous improvement, COD is early to mid-cycle on implementing redesigns that were a result of fact-based evaluations. As a result COD lacks measurable strategic objectives and related goals.
  - While many of the initiatives the college has for addressing strategic issues are new, the college does have plans in place to implement many of the needed changes. Multiple QIP's are in their early stages, and the college has redesigned many processes. One example of a process is the newly redesigned Strategic Planning Process (SPP). As noted previously, this process requires a SWOT be completed every 3 years. Based on this analysis, the college then develops a 3 – 5 year strategic plan, which fits into its mission and vision. Once the strategic plan is developed (the plan has input from all stakeholders), individual division, department, and personal plans are developed. These plans all feed up to accomplishing the overall strategic plan.

In addition to the SPP, the college has implemented multiple QIP's, along with many new committees and project teams. While many of these are in the early stages of development, overall they appear to be very effective. The end result of these initiatives will be the ability of the college to make fact based decisions, resulting from key and effective measures.

4. Lack of Succession planning
  - Evidence was presented that the college is addressing the succession planning issue in several ways.
    - All employees now received annual reviews, based on goals, which includes mentoring from their immediate supervisor.
    - The college has instituted Supervisory Development Programs, including a program to train supervisors and other management through the creation of a Leadership Academy
    - The college created a plan of "Best Practices", which will put together models for succession planning, with the goal of sharing this with other institutions nationwide.
    - It also implemented a plan of coaching and mentoring future leaders.

### **Student Feedback**

The AQIP visiting team met with multiple stakeholders to help verify the information and data supplied by the college and reported in the ILPEX application and feedback report. One meeting was with students from the Student Leadership Council, students from other campus groups, and student employees (work study and those hired with college funding). The students were from multiple academic programs and

took classes on the main campus, the different Centers, and via online and hybrid courses. In general, students were very pleased with the college, strongly supported the campus renovations and new buildings including the Homeland Security Education Center and the Physical Education Center, and valued their different relationships with the organization. Some of the students were on committees, councils, and acted as a student representative on the college's Board of Trustees.

Two areas of concern emerged during the meeting: the complaint system and lack of accessibility to adjunct faculty outside of the classroom. The visiting team asked students if they were aware of a formalized complaint system at the college. A couple of the students indicated that students filled out a survey at the end of each semester, evaluating the instructor. Another student indicated that if a problem was severe it could be taken to the Board of Trustees meeting and explained during the public comment portion of the meeting. Another student suggested that a complaint could be taken to the heads of programs or a vice president. Most students indicated that they were not aware of a formalized process at COD. One of the student employees from Student Affairs stated that the complaint process was written and posted on the college home webpage or portal. This student also explained that Campus Central (an information/help desk in the Student Affairs area) was helpful in answering questions and redirecting students to a particular office if additional help is needed. The visiting team members recommend that along with the implementation of the new software solution for providing a formalized complaint system, that the college also investigate ways to communicate to students and other stakeholders how the system works and what kind of access is available.

When asked if there were any other concerns, the students expressed the opinion that adjunct faculty did not have formal office hours and that their syllabi did not always include phone numbers; therefore it was sometimes difficult to discuss issues with them outside of the classroom. The AQIP team reviewed course syllabi created by adjunct faculty members and found that although some adjunct faculty listed office hours in one of the larger multi-desk adjunct faculty offices, others provided information on how to communicate with them through either email or a phone number. The team also reviewed two documents: *Adjunct Faculty Expectations - Academic Year 2014-15*

[http://www.cod.edu/gateways/pdfs/adjunct\\_faculty\\_expectations.pdf](http://www.cod.edu/gateways/pdfs/adjunct_faculty_expectations.pdf) and *Course Syllabus Checklist* [http://www.cod.edu/gateways/pdfs/course\\_syllabus\\_checklist.pdf](http://www.cod.edu/gateways/pdfs/course_syllabus_checklist.pdf) provided instructions for adjunct faculty syllabus requirements.

Adjunct Faculty Expectations:

- All faculty members must post their course syllabi to their Blackboard course shell by the first day of their class.



- Syllabi will be retrieved electronically from Blackboard and sent to the appropriate Division Office
- Distribute to and review the course syllabus with students during the first class period.
- Knowledge of classroom management technology is expected (e.g. Blackboard). At a minimum, your syllabus must be posted in Blackboard for every section you teach.
- In addition, it is recommended that you post an instructor profile and use the Blackboard announcement feature for communicating with students outside of class.

Course Syllabus Checklist: (Required Information)

- College of DuPage header
- Course number/Course title
- Instructor name
- Instructor contact information (office, telephone, email, web page)

Discussions with the Academic Affairs and Student Affairs staff indicated that adjunct faculty members are required to take an orientation course and are provided with documents detailing all of the above information/requirements and more. They also believe that the majority of faculty members rely on the Blackboard course shell communication system and the college email to communicate with students. Several areas throughout the academic buildings of the college have large offices with multiple desk areas for adjunct faculty use outside of the classroom. However, current efforts to offer access may not be working and this appears to be an area in which the college should develop strategies or processes that promote contact and communication between adjunct faculty and their students outside the classroom environment.

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

**Review of organizational commitment to continuing systematic quality improvement**

The college identified multiple avenues which are used to show its commitment to continuous quality improvement. One of the best examples is in the fact that the college applied for the ILPEX award, and has used the feedback to begin the process of improving many areas of the college. It was noted that the feedback was made available to all stakeholders (it is currently posted on the college website). The SMT reported reviewing the feedback report and addressing all pertinent issues. As a result, many new initiatives have been launched at the college, with multiple councils and project teams being formed. Each of the councils and project teams is, where appropriate, made up of cross functional team members.

It was evident that the commitment to quality, while starting at the top, also was embraced by all levels of the organization.

An initial step the college has taken in its continuous improvement commitment is the re-engineering of its strategic planning process. One of the first items the Strategic Planning team (Strategic Long Range Planning Team) did was to create a new mission and vision for the college. The new mission and vision have become the driving force for everything the college does. From these initiatives the college developed its 5 P's, which has become a model for how they plan. The 5 P's are Price, Product, Promotion, Place, and People. In conjunction with this, they have created the Institutional Effectiveness Council, which is designed to assist the college in its continuous improvement efforts.

Other examples of the college's commitment to continuous improvement was the reorganizing of the Student Affairs Division. It was noted that the Enrollment and Student Services departments were separate entities. The decision was made, based on stakeholder input and feedback, to combine these two departments into one unit. This new combined entity is able to address both incoming student needs, as well as continuing student issues. In conjunction with this, the college created a new "hub," centralized in the Student Affairs area that serves as a one-stop area for all student issues. This has greatly reduced lines, decreased wait times for students, and overall has increased the efficiency of the Student Affairs processes. Other improvements include:

1. Founding of the Quality Improvement Teams
2. The creation of an Innovation Center
3. The use of a data portal, available to all employees
4. Work around General Education Assessment and the creation of a Steering Committee
5. Enhanced Student Experience Implementation Plan (ReSET), which focused on student recruitment, student retention and service excellence

Additionally, the team reviewed the institution's 39 significant institutional outcomes (*January 2009 to December 2012*) that support the college's organizational commitment to continuing systematic quality improvement [http://www.cod.edu/about/office\\_of\\_the\\_president/significant\\_outcomes.aspx](http://www.cod.edu/about/office_of_the_president/significant_outcomes.aspx)

Below is a sampling of the 39 outcomes:

- Added 38 new certificate programs and 11 new degree programs.
- Twenty-one (21) academic programs received initial or reaffirmation of accreditation.

- Secured passage of \$168 million capital referendum.
- Increased unallocated fund balance by more than \$46.5 million (to \$98.2 million or 60.3% of the College's operating budget). Additionally, created designated reserves of \$36 million to address the potential funding of pensions becoming the responsibility of the College (\$22 million); funding a portion of our IT Strategic Plan (\$8 million) and providing for the maintenance of our existing physical plant (\$6 million).
- Conceived of and implemented comprehensive Strategic Long-Range Planning process, resulting in annual production of integrated Strategic Long-Range Plan, Annual Plan, Outcomes Document, Fact Book and Financial Plan.
- Completed or have underway more than \$550 million in campus improvements involving more than 1 million square feet of enhanced educational space.
- Earned LEED certification for the Health and Science Center (gold), Technology Education Center (silver), Culinary and Hospitality Center (silver expected), and Homeland Security Education Center (certified), reaffirming the College's commitment to energy efficient, sustainable construction.
- Constructed the nationally recognized Homeland Security Education Center to train first responders and to house the College's Criminal Justice, Fire Science programs, the Suburban Law Enforcement Academy and the COD Police Department.
- Received the 2012 Illinois Council of Community College Administrators Innovation Award for the development of the new 3+1 Baccalaureate Completion program in partnership with area universities: Lewis, Governor's State, Benedictine, Concordia and Roosevelt.
- From 2009 through 2012, COD has shown a 1.9 % increase in headcount and a 3.2 % increase in FTEs, significantly higher than the state-wide increases of 0.3% in headcount and 2.3% in FTEs.
- Transformed the physical appearance (curb appeal) of the campus.
- Instituted Community Nights to enhance exchange of information between community leaders of District 502 and the College.
- Awarded \$26.7 million in capital funding from the State of Illinois.
- Received over \$14 million in grants in FY08, 09, 10, 11 and 12.
- Awarded the Illinois Performance Excellence Bronze Award for Commitment to Excellence, making the College only the sixth community college recipient of this award since its inception in 1996. The ILPEX award process is part of the College's reaccreditation process through the Higher Learning Commission.
- Received the Governor's Award for Academic Excellence in serving veterans, making the College of DuPage the first community college recipient of this award from the Illinois Department of Veterans Affairs.

The AQIP team verified many of these accomplishments during the visit through discussions and observations with staff, community members, and business and foundation representatives. Through discussion and analysis of strategic planning and financial documents, the visiting team was also able to verify the strengths listed in the ILPEX feedback report including the following: "COD collects and

analyzes data through several mechanisms: internal surveys, the Fact Book to determine the internal environment, an environmental scan (E-Scan), community members, stakeholder feedback, partner inputs and research based scientific surveys to determine key emerging trends. Data includes: demographic trends, student, economic, labor force, education, competition, social values comparisons, market data, politics, and technology. Trend analysis and forecasting are used as analysis tools for the SWOT.

In phase two the SPP, SLRPAC, and Senior Management Team review core competencies, as well as current and emerging trends. Data from completion of annual action plans used to support strategic plan. STOP LIGHT and Annual Plan reports progress is reported in plan,” An additional strength indicated that COD aligns strategic themes, tasks and annual goals/strategies to address strategic challenges and leverages strategic advantages and core competencies. Information from strategy forums, E-Scans, and surveys are used to drive innovation and determine the need for future competencies. The AQIP visiting team found solid evidence of this strength through previously linked document review and discussions with relevant departments and planning groups.

Current projects based on ILPEX feedback opportunities concern improvements to the strategic planning process; a systematic approach for determining the projection of future performance and competitors’ future performance; and infusing measureable goals/targets for strategic themes have been recently implemented and the college is making progress in this area. COD created “**QIP 14: Improving Data/Information Availability and Management**” to improve data/information availability and management and focus on the design, construction and implementation of a Data Warehouse that provides critical indicators displayed in a clear format (dashboards) to support the selection, collection, and integration of data and information to use in the tracking of daily operations and overall institutional performance. The other related Actions Project is “**QIP 15: Improving Academic Performance**”. This Action Project will focus on within term retention and success rates for students engaged in online learning or developmental coursework. The related goal states “Within-term retention and success rates for students taking online, developmental math, and developmental English courses will be in the top quartile when compared to National Community College Benchmarking Project institutions”

([http://www.cod.edu/about/accreditation/action\\_projects.aspx](http://www.cod.edu/about/accreditation/action_projects.aspx)).

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

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**Other AQIP Considerations or Concerns**

Faculty Open Meeting Discussions

It was noted by the team, at both open faculty forums, that there are some issues between at least a portion of the faculty and the administration. Faculty expressed concern that there was a lack of co-governance when it came to faculty involvement. Some also felt there was an atmosphere of intimidation and fear presented by some senior management. It was difficult to gauge if this was a prevailing concern, or simply the opinion of a small minority of faculty, as attendance at the meetings was less than 10 % of the fulltime faculty at the college. The input at the meetings was somewhat dominated by a few individuals and there appeared to be some dissent (although not verbal) from some of the faculty in attendance. When this was discussed with senior management team members, they said they were aware of a small group of faculty who were disgruntled.. It may be beneficial for the college to address this issue directly with the faculty, as it could cause morale and attitude issues in the future.

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## Federal Compliance Worksheet for Evaluation Teams

Effective September 1, 2013 – August 31, 2014

### Evaluation of Federal Compliance Components

The team reviews each item identified in the Federal Compliance Guide and documents its findings in the appropriate spaces below. Teams should expect institutions to address these requirements with brief narrative responses and provide supporting documentation, where necessary. Generally, if the team finds in the course of this review that there are substantive issues related to the institution's ability to fulfill the Criteria for Accreditation, such issues should be raised in appropriate sections of the Assurance Section of the Team Report or highlighted as such in the appropriate AQIP Quality Checkup Report.

This worksheet outlines the information the team should review in relation to the federal requirements and provides spaces for the team's conclusions in relation to each requirement. The team should refer to the Federal Compliance Guide for Institutions and Evaluation Teams in completing this worksheet. The Guide identifies applicable Commission policies and an explanation of each requirement. **The worksheet becomes an appendix to the team's report. If the team recommends monitoring on a Federal Compliance requirement in the form of a report or focused visit, it should be included in the Federal Compliance monitoring sections below and added to the appropriate section in the team report template.**

**Institution under review:**          College of DuPage    

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### Assignment of Credits, Program Length, and Tuition

*Address this requirement by completing the "Team Worksheet for Evaluating an Institution's Assignment of Credit Hours and on Clock Hours" in the Appendix at the end of this document.*

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### Institutional Records of Student Complaints

*The institution has documented a process in place for addressing student complaints and appears to be systematically processing such complaints as evidenced by the data on student complaints since the last comprehensive evaluation.*

1. Review the process that the institution uses to manage complaints as well as the history of complaints received and processed with a particular focus in that history on the past three or four years.

The college defines expectations for student conduct in the Policy Manual of the Board of Trustees, on the Student Rights and Responsibilities web page, the Student Handbook and the College Catalog. The grievance policy is detailed in the College Catalog (p. 99), and the Student Handbook (p.6).

Complaints may be made in person, by telephone, through social media, letter, or email. If not resolved by the receiving office or individual, complaints will be referred and results sent back to the student. Appeal processes are described in the Student Handbook, pp. 9-10.

2. Determine whether the institution has a process to review and resolve complaints in a timely manner.

The Maxient software system is used to monitor student complaints but is fairly new to DuPage. Student Affairs is assigned the responsibility of responding to the complaint and working with the appropriate individuals/offices to ensure a timely resolution. Customized reports should provide information of trends and needed improvements.

3. Verify that the evidence shows that the institution can, and does, follow this process and that it is able to integrate any relevant findings from this process into its review and planning processes.

To date, the Maxient system has provided no data for determining trends or other information usable in the planning process. Prior to the implementation of Maxient, student complaint-driven changes have been made in areas such as redesigning Academic Advisor and Counselor roles, special population “work groups,” Early Alert training for both full-time and part-time faculty, and “one-stop-shop” student services.

4. Advise the institution of any improvements that might be appropriate.
5. Consider whether the record of student complaints indicates any pattern of complaints or otherwise raises concerns about the institution’s compliance with the Criteria for Accreditation or Assumed Practices.

No complaint logs were available because of the decentralization of complaint processes. The college has initiated a program to correct this and should have data for analysis and use in decision-making.

6. Check the appropriate response that reflects the team’s conclusions:

- The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements.
- The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements but recommends Commission follow-up.
- The team has reviewed this component of federal compliance and has found the institution not to meet the Commission’s requirements and recommends Commission follow-up.
- The team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The College’s approach to this issue, documentation, and performance are acceptable and comply with the Commission and AQIP expectation.

Additional monitoring, if any: None.

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### **Publication of Transfer Policies**

*The institution has demonstrated it is appropriately disclosing its transfer policies to students and to the public. Policies contain information about the criteria the institution uses to make transfer decisions.*

1. Review the institution’s transfer policies.  
Policies are accessible, well defined, and consistent with higher education standards and expectations.
2. Review any articulation agreements the institution has in place, including articulation agreements at the institution level and program-specific articulation agreements.

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College of DuPage participates in the Illinois Articulation Initiative which guarantees the transfer of a general education course package to more than 100 Illinois colleges and universities, and with several out-of-state institutions. Three plus one programs are maintained with five university partners.

3. Consider where the institution discloses these policies (e.g., in its catalog, on its web site) and how easily current and prospective students can access that information.

Transfer policies are published in the Student Catalog, p. 105, and on the Transfer Program Information web page. Various links are provided that give contact information, answer questions, list steps to be taken, and provide transfer worksheets for student use.

Determine whether the disclosed information clearly explains the criteria the institution uses to make transfer decisions and any articulation arrangements the institution has with other institutions. Note whether the institution appropriately lists its articulation agreements with other institutions on its website or elsewhere. The information the institution provides should include any program-specific articulation agreements in place and should clearly identify program-specific articulation agreements as such. Also, the information the institution provides should include whether the articulation agreement anticipates that the institution under Commission review: 1) accepts credit from the other institution(s) in the articulation agreement; 2) sends credits to the other institution(s) in the articulation agreements that it accepts; or 3) both offers and accepts credits with the other institution(s).

4. Check the appropriate response that reflects the team's conclusions:

- The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.
- The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends Commission follow-up.
- The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends Commission follow-up.
- The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: DuPage has demonstrated that it is appropriately disclosing its transfer policies to students and the public by posting the requirements in the Student Catalog and on the institution's website.

Additional monitoring, if any: None.

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### **Practices for Verification of Student Identity**

*The institution has demonstrated that it verifies the identity of students who participate in courses or programs provided to the student through distance or correspondence education and appropriately discloses additional fees related to verification to students and to protect their privacy.*

1. Determine how the institution verifies that the student who enrolls in a course is the same student who submits assignments, takes exams, and earns a final grade. The team should ensure that the institution's approach respects student privacy.

DuPage verifies student identity through the use of usernames and passwords that provide for access to COD email, the College's portal, myACCESS, and the Blackboard Learning Management System.



2. Check that any fees related to verification and not included in tuition are explained to the students prior to enrollment in distance courses (e.g., a proctoring fee paid by students on the day of the proctored exam).

A per-course internet fee is charged all students taking online courses. The fee is disclosed in the Course Schedule and on the College web site on the Tuition and Fees page. There are no charges for student verification or additional proctoring.

3. Check the appropriate response that reflects the team's conclusions:

- The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.
- The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends Commission follow-up.
- The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends Commission follow-up.
- The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The institution presented satisfactory evidence that the process used for student identity verification is appropriate for the current modes of classroom presentation.

Additional monitoring, if any: None.

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#### **Title IV Program Responsibilities**

*The institution has presented evidence on the required components of the Title IV Program.*

#### **This requirement has several components the institution and team must address:**

- **General Program Requirements.** *The institution has provided the Commission with information about the fulfillment of its Title IV program responsibilities, particularly findings from any review activities by the Department of Education. It has, as necessary, addressed any issues the Department raised regarding the institution's fulfillment of its responsibilities in this area.*

The College of DuPage has received no limitations, suspensions or terminations by the U.S Department of Education regarding Title IV programming.

- **Financial Responsibility Requirements.** *The institution has provided the Commission with information about the Department's review of composite ratios and financial audits. It has, as necessary, addressed any issues the Department raised regarding the institution's fulfillment of its responsibilities in this area. (Note that the team should also be commenting under Criterion Five if an institution has significant issues with financial responsibility as demonstrated through ratios that are below acceptable levels or other financial responsibility findings by its auditor.)*  
As part of the A-133 compliance review, Crowe Horwath, LLP identified a deficiency in internal controls over compliance on the proper calculation of the Return of Title IV Funds. The College has since implemented a formal review process and has hired an experienced auditor to perform monthly reviews of a random sample of Return of Title IV calculations. The Office of Student Financial

Assistance and Information Technology has revised the FAR 005 report so that more of the R2T4 review and calculations are automated.

The Comprehensive Annual Financial Report for the 2013 year documents (p. 25) an unqualified opinion on the College's CAFR by Crowe Horwath, LLP, independent auditors in all other areas.

- **Default Rates.** *The institution has provided the Commission with information about its three year default rate. It has a responsible program to work with students to minimize default rates. It has, as necessary, addressed any issues the Department raised regarding the institution's fulfillment of its responsibilities in this area. Note for 2012 and thereafter institutions and teams should be using the three-year default rate based on revised default rate data published by the Department in September 2012; if the institution does not provide the default rate for three years leading up to the comprehensive evaluation visit, the team should contact Commission staff.*

The College had a three-year default rate of 18.4% for the year 2010, a reduction from 2009. The College has default management processes that target excessive borrowing and educational programming through the CashCourse interactive financial tool.

- **Campus Crime Information, Athletic Participation and Financial Aid, and Related Disclosures.** *The institution has provided the Commission with information about its disclosures. It has demonstrated, and the team has reviewed, the institution's policies and practices for ensuring compliance with these regulations.*

The College hosts a "Your Right to Know" page that links to campus crime statistics, gender equity in athletics, financial aid, etc. Reported campus crimes in 2011 were largely drug law violations but also reported were 5 burglaries and robberies.

- **Student Right to Know.** *The institution has provided the Commission with information about its disclosures. It has demonstrated, and the team has reviewed, the institution's policies and practices for ensuring compliance with these regulations. The disclosures are accurate and provide appropriate information to students. (Note that the team should also be commenting under Criterion One if the team determines that disclosures are not accurate or appropriate.)*

The institution hosts several web sites linked from the "Your Right to Know" page that offer information in areas of athletic program participation, costs and refund policies, educational programming and faculty, disability services, accrediting agencies, transfer policies, and anti-discrimination policies. The web pages and the hard copies they mirror have been reviewed, appear to be accurate, and to provide necessary information to students and the public.

- **Satisfactory Academic Progress and Attendance.** *The institution has provided the Commission with information about policies and practices for ensuring compliance with these regulations. The institution has demonstrated that the policies and practices meet state or federal requirements and that the institution is appropriately applying these policies and practices to students. In most cases, teams should verify that these policies exist and are available to students, typically in the course catalog or student handbook. Note that the Commission does not necessarily require that the institution take attendance but does anticipate that institutional attendance policies will provide information to students about attendance at the institution.*

The Satisfactory Academic Progress and Attendance Policies are available on line, along with a well-defined Appeals Process should financial aid be suspended. Information is also available in the College Catalog under Academic Policies and Procedures.

- ***Contractual Relationships.*** *The institution has presented a list of its contractual relationships related to its academic program and evidence of its compliance with Commission policies requiring notification or approval for contractual relationships (If the team learns that the institution has a contractual relationship that may require Commission approval and has not received Commission approval the team must require that the institution complete and file the change request form as soon as possible. The team should direct the institution to review the Contractual Change Application on the Commission's web site for more information.)*

The College maintains no contractual relationships.

- ***Consortial Relationships.*** *The institution has presented a list of its consortial relationships related to its academic program and evidence of its compliance with Commission policies requiring notification or approval for consortial relationships. (If the team learns that the institution has a consortial relationship that may require Commission approval and has not received Commission approval the team must require that the institution complete and file the form as soon as possible. The team should direct the institution to review the Consortial Change Application on the Commission's web site for more information.)*

The College maintains no consortial relationships.

1. Review all of the information that the institution discloses having to do with its Title IV program responsibilities.
2. Determine whether the Department has raised any issues related to the institution's compliance or whether the institution's auditor in the A-133 has raised any issues about the institution's compliance as well as look to see how carefully and effectively the institution handles its Title IV responsibilities.
3. If an institution has been cited or is not handling these responsibilities effectively, indicate that finding within the federal compliance portion of the team report and whether the institution appears to be moving forward with corrective action that the Department has determined to be appropriate.
4. If issues have been raised with the institution's compliance, decide whether these issues relate to the institution's ability to satisfy the Criteria for Accreditation, particularly with regard to whether its disclosures to students are candid and complete and demonstrate appropriate integrity (*Core Component 2.A and 2.B*).
5. Check the appropriate response that reflects the team's conclusions:
  - The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.
  - The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends Commission follow-up.
  - The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends Commission follow-up.
  - The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The institution has provided documentation verifying the meeting of all Title IV requirements.

Additional monitoring, if any: None.

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### Required Information for Students and the Public

1. Verify that the institution publishes fair, accurate, and complete information on the following topics: the calendar, grading, admissions, academic program requirements, tuition and fees, and refund policies.
2. Check the appropriate response that reflects the team's conclusions:
  - The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.
  - The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends Commission follow-up.
  - The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends Commission follow-up.
  - The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The College of DuPage has provided documents reflecting information needed by students and the public. The information from the Student Handbook, both hard copy and online, online web pages, and the College Catalog appears accurate and complete.

Additional monitoring, if any: None.

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### Advertising and Recruitment Materials and Other Public Information

*The institution has documented that it provides accurate, timely and appropriately detailed information to current and prospective students and the public about its accreditation status with the Commission and other agencies as well as about its programs, locations and policies.*

1. Review the institution's disclosure about its accreditation status with the Commission to determine whether the information it provides is accurate and complete, appropriately formatted and contains the Commission's web address.
2. Review institutional disclosures about its relationship with other accrediting agencies for accuracy and for appropriate consumer information, particularly regarding the link between specialized/professional accreditation and the licensure necessary for employment in many professional or specialized areas.
3. Review the institution's catalog, brochures, recruiting materials, and information provided by the institution's advisors or counselors to determine whether the institution provides accurate information to current and prospective students about its accreditation, placement or licensure, program requirements, etc.
4. Check the appropriate response that reflects the team's conclusions:

- The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.
- The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends Commission follow-up.
- The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends Commission follow-up.
- The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The online College Catalog carries the name, address and direct link to the NCA/HLC web site. Accreditation information is also available in the Student Handbook for the HLC and program-specific accrediting agencies.

Additional monitoring, if any: None.

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### **Review of Student Outcome Data**

1. Review the student outcome data the institution collects to determine whether it is appropriate and sufficient based on the kinds of academic programs it offers and the students it serves.

The College of DuPage collects data and monitors student success through retention, persistence and completion rates. This information is supplemented by course, program and discipline student outcome data, general education learning outcome results, program review processes, and graduate success. External data sources such as the National Community College Benchmark Project and surveys such as CCSSE, Noel-Levitz, and ACT further support the College's information analyses.

2. Determine whether the institution uses this information effectively to make decisions about academic programs and requirements and to determine its effectiveness in achieving its educational objectives.

The Institutional Outcomes Mid-Year Report FY 2014 lists 2014 institutional priorities that include curricular and program partnership developments (items 4 and 5) that will support the institution's goal to provide high quality programming aligned with changing community needs.

3. Check the appropriate response that reflects the team's conclusions:

- The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.
- The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends Commission follow-up.
- The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends Commission follow-up.
- The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: DuPage meets the intent of this federal compliance requirement.

Additional monitoring, if any: None.

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## Standing with State and Other Accrediting Agencies

*The institution has documented that it discloses accurately to the public and the Commission its relationship with any other specialized, professional or institutional accreditor and with all governing or coordinating bodies in states in which the institution may have a presence.*

*The team has considered any potential implications for accreditation by the Higher Learning Commission of sanction or loss of status by the institution with any other accrediting agency or loss of authorization in any state.*

***Important note: If the team is recommending initial or continued status, and the institution is now or has been in the past five years under sanction or show-cause with, or has received an adverse action (i.e., withdrawal, suspension, denial, or termination) from, any other federally recognized specialized or institutional accreditor or a state entity, then the team must explain the sanction or adverse action of the other agency in the body of the Assurance Section of the Team Report and provide its rationale for recommending Commission status in light of this action. In addition, the team must contact the staff liaison immediately if it learns that the institution is at risk of losing its degree authorization or lacks such authorization in any state in which the institution meets state presence requirements.***

1. Review the information, particularly any information that indicates the institution is under sanction or show-cause or has had its status with any agency suspended, revoked, or terminated, as well as the reasons for such actions.
2. Determine whether this information provides any indication about the institution's capacity to meet the Commission's Criteria for Accreditation. Should the team learn that the institution is at risk of losing, or has lost, its degree or program authorization in any state in which it meets state presence requirements, it should contact the Commission staff liaison immediately.
3. Check the appropriate response that reflects the team's conclusions:
  - The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.
  - The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends Commission follow-up.
  - The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends Commission follow-up.
  - The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The College offers programming approved by 17 different accrediting agencies.

Additional monitoring, if any: None.

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## Public Notification of Opportunity to Comment

*The institution has made an appropriate and timely effort to solicit third party comments. The team has evaluated any comments received and completed any necessary follow-up on issues raised in these comments. Note that if the team has determined that any issues raised by third-party comment relate to*

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***the team's review of the institution's compliance with the Criteria for Accreditation, it must discuss this information and its analysis in the body of the Assurance Section of the Team Report.***

1. Review information about the public disclosure of the upcoming visit, including sample announcements, to determine whether the institution made an appropriate and timely effort to notify the public and seek comments.

DuPage published the required public notification of the HLC site visit in the Arlington Heights, *Daily Herald*, and the *Chicago Tribune*, as well as posting the information to the College's web site. Each publication carried accurate information regarding the visit.

2. Evaluate the comments to determine whether the team needs to follow-up on any issues through its interviews and review of documentation during the visit process.
3. Check the appropriate response that reflects the team's conclusions:

- The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.
- The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends Commission follow-up.
- The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends Commission follow-up.
- The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The College fulfilled this requirement.

Additional monitoring, if any: None.

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### **Institutional Materials Related to Federal Compliance Reviewed by the Team**

Provide a list materials reviewed here:

Federal Compliance Packet  
Policy Manual of Board of Trustees  
Degree Requirements (9 degrees)  
Code of Student Conduct  
Student Handbook  
College Catalog  
Articulation Agreements  
Transfer Worksheets  
Transfer Policies  
Fact Book  
Course Schedule  
Satisfactory Academic Progress Policy  
Web site and link pages for verification  
Student Appeals Process  
U.S Department of Education Safety and Security Data Analysis Cutting Tool, Equity in Athletics Tool  
U.S. Department of Education Crime Statistics  
Institutional Outcomes Report  
Multiple Student Outcome Data Sources

Course syllabi as listed on page 15



## Appendix

### Team Worksheet for Evaluating an Institution's Program Length and Tuition, Assignment of Credit Hours and on Clock Hours

Institution under review: College of DuPage

#### Part 1: Program Length and Tuition

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##### Instructions

The institution has documented that it has credit hour assignments and degree program lengths within the range of good practice in higher education and that tuition is consistent across degree programs (or that there is a rational basis for any program-specific tuition).

Review the "*Worksheet for Use by Institutions on the Assignment of Credit Hours and on Clock Hours*" as well as the course catalog and other attachments required for the institutional worksheet.

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#### Worksheet on Program Length and Tuition

##### A. Answer the Following Questions

Are the institution's degree program requirements within the range of good practice in higher education and contribute to an academic environment in which students receive a rigorous and thorough education?

Yes

No

Comments: Program requirements and program lengths are comparable with those at other higher education institutions. Nine Associate degrees are offered with credit requirements from 64-68 hours.

Are the institution's tuition costs across programs within the range of good practice in higher education and contribute to an academic environment in which students receive a rigorous and thorough education?

Yes

No

Comments: Programs requiring greater than the standard tuition and fees are those with small class sizes, increased program costs, program length, or program objectives.

##### B. Recommend Commission Follow-up, If Appropriate

Is any Commission follow-up required related to the institution's program length and tuition practices?

Yes                       No

Rationale:

Identify the type of Commission monitoring required and the due date:

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## Part 2: Assignment of Credit Hours

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### Instructions

In assessing the appropriateness of the credit allocations provided by the institution the team should complete the following steps:

1. Review the Worksheet completed by the institution, which provides information about an institution's academic calendar and an overview of credit hour assignments across institutional offerings and delivery formats, and the institution's policy and procedures for awarding credit hours. Note that such policies may be at the institution or department level and may be differentiated by such distinctions as undergraduate or graduate, by delivery format, etc.
2. Identify the institution's principal degree levels and the number of credit hours for degrees at each level. The following minimum number of credit hours should apply at a semester institution:
  - Associate's degrees = 60 hours
  - Bachelor's degrees = 120 hours
  - Master's or other degrees beyond the Bachelor's = at least 30 hours beyond the Bachelor's degree
  - Note that one quarter hour = .67 semester hour
  - Any exceptions to this requirement must be explained and justified.
3. Scan the course descriptions in the catalog and the number of credit hours assigned for courses in different departments at the institution.
  - At semester-based institutions courses will be typically be from two to four credit hours (or approximately five quarter hours) and extend approximately 14-16 weeks (or approximately 10 weeks for a quarter). The description in the catalog should indicate a course that is appropriately rigorous and has collegiate expectations for objectives and workload. Identify courses/disciplines that seem to depart markedly from these expectations.
  - Institutions may have courses that are in compressed format, self-paced, or otherwise alternatively structured. Credit assignments should be reasonable. (For example, as a full-time load for a traditional semester is typically 15 credits, it might be expected that the norm for a full-time load in a five-week term is 5 credits; therefore, a single five-week course awarding 10 credits would be subject to inquiry and justification.)

- Teams should be sure to scan across disciplines, delivery mode, and types of academic activities.
  - Federal regulations allow for an institution to have two credit-hour awards: one award for Title IV purposes and following the above federal definition and one for the purpose of defining progression in and completion of an academic program at that institution. Commission procedure also permits this approach.
4. Scan course schedules to determine how frequently courses meet each week and what other scheduled activities are required for each course. Pay particular attention to alternatively-structured or other courses with particularly high credit hours for a course completed in a short period of time or with less frequently scheduled interaction between student and instructor.
5. **Sampling.** Teams will need to sample some number of degree programs based on the headcount at the institution and the range of programs it offers.
- At a minimum, teams should anticipate sampling at least a few programs at each degree level.
  - For institutions with several different academic calendars or terms or with a wide range of academic programs, the team should expand the sample size appropriately to ensure that it is paying careful attention to alternative format and compressed and accelerated courses.
  - Where the institution offers the same course in more than one format, the team is advised to sample across the various formats to test for consistency.
  - For the programs the team sampled, the team should review syllabi and intended learning outcomes for several of the courses in the program, identify the contact hours for each course, and expectations for homework or work outside of instructional time.
  - The team should pay particular attention to alternatively-structured and other courses that have high credit hours and less frequently scheduled interaction between the students and the instructor.
  - Provide information on the samples in the appropriate space on the worksheet.
6. Consider the following questions:
- Does the institution's policy for awarding credit address all the delivery formats employed by the institution?
  - Does that policy address the amount of instructional or contact time assigned and homework typically expected of a student with regard to credit hours earned?
  - For institutions with courses in alternative formats or with less instructional and homework time than would be typically expected, does that policy also equate credit hours with intended learning outcomes and student achievement that could be reasonably achieved by a student in the timeframe allotted for the course?
  - Is the policy reasonable within the federal definition as well as within the range of good practice in higher education? (Note that the Commission will expect that credit hour policies at public institutions that meet state regulatory requirements or are dictated by the state will likely meet federal definitions as well.)

- If so, is the institution's assignment of credit to courses reflective of its policy on the award of credit?
7. If the answers to the above questions lead the team to conclude that there may be a problem with the credit hours awarded the team should recommend the following:
- If the problem involves a poor or insufficiently-detailed institutional policy, the team should call for a revised policy as soon as possible by requiring a monitoring report within no more than one year that demonstrates the institution has a revised policy and evidence of implementation.
  - If the team identifies an application problem and that problem is isolated to a few courses or single department or division or learning format, the team should call for follow-up activities (monitoring report or focused evaluation) to ensure that the problems are corrected within no more than one year.
  - If the team identifies systematic non-compliance across the institution with regard to the award of credit, the team should notify Commission staff immediately and work with staff to design appropriate follow-up activities. The Commission shall understand systematic noncompliance to mean that the institution lacks any policies to determine the award of academic credit or that there is an inappropriate award of institutional credit not in conformity with the policies established by the institution or with commonly accepted practices in higher education across multiple programs or divisions or affecting significant numbers of students.

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## Worksheet on Assignment of Credit Hours

### A. Identify the Sample Courses and Programs Reviewed by the Team (see #5 of instructions in completing this section)

English 1101, Honors Composition I, 3 credits  
English 1101, Composition I, 3 credits  
English 1102, Composition II, 3 credits  
Fire Science 2271, Emergency Medical Technician, 10 credits  
Nursing 1230, Family Health Concepts I, 5 credits  
Philosophy 1100, Introduction to Philosophy, 3 credits  
Spanish 1101, Elementary Spanish I, 4 credits  
Speech 1100, Speech Communication, 3 credits  
Speech 1100, Fundamentals of Speech Communication – Honors, 3 credits  
Surgical Technology 1101, Surgical Technology Concepts I, 15 credits  
Surgical Technology 1111, Sterile Processing Distribution Technician, 4 credits  
Math 0482, Foundations of College Mathematics II, 5 credits  
Earth Science 1140, Fundamentals of Earth Science, 4credits

\*\*Multiple syllabi were reviewed when selected courses are offered in more than one delivery mode.

### B. Answer the Following Questions

**1) Institutional Policies on Credit Hours**

Does the institution’s policy for awarding credit address all the delivery formats employed by the institution? (Note that for this question and the questions that follow an institution may have a single comprehensive policy or multiple policies.)

Yes                                   No

Comments: Credit is awarded on the semester basis.

Does that policy relate the amount of instructional or contact time provided and homework typically expected of a student to the credit hours awarded for the classes offered in the delivery formats offered by the institution? (Note that an institution’s policy must go beyond simply stating that it awards credit solely based on assessment of student learning and should also reference instructional time.)

Yes                                   No

Comments:

For institutions with non-traditional courses in alternative formats or with less instructional and homework time than would be typically expected, does that policy equate credit hours with intended learning outcomes and student achievement that could be reasonably achieved by a student in the timeframe and utilizing the activities allotted for the course?

n/a Yes                                   No

Comments:

Is the policy reasonable within the federal definition as well as within the range of good practice in higher education? (Note that the Commission will expect that credit hour policies at public institutions that meet state regulatory requirements or are dictated by the state will likely meet federal definitions as well.)

n/a Yes                                   No

Comments:

**2) Application of Policies**

Are the course descriptions and syllabi in the sample academic programs reviewed by the team appropriate and reflective of the institution’s policy on the award of credit? (Note that the Commission will expect that credit hour policies at public institutions that meet state regulatory requirements or are dictated by the state will likely meet federal definitions as well.)

Yes                                   No

Comments:

Are the learning outcomes in the sample reviewed by the team appropriate to the courses and programs reviewed and in keeping with the institution's policy on the award of credit?

Yes                       No

Comments:

If the institution offers any alternative delivery or compressed format courses or programs, were the course descriptions and syllabi for those courses appropriate and reflective of the institution's policy on the award of academic credit?

Yes                       No

Comments:

If the institution offers alternative delivery or compressed format courses or programs, are the learning outcomes reviewed by the team appropriate to the courses and programs reviewed and in keeping with the institution's policy on the award of credit? Are the learning outcomes reasonably capable of being fulfilled by students in the time allocated to justify the allocation of credit?

Yes                       No

Comments:

Is the institution's actual assignment of credit to courses and programs across the institution reflective of its policy on the award of credit and reasonable and appropriate within commonly accepted practice in higher education?

Yes                       No

Comments:

### **C. Recommend Commission Follow-up, If Appropriate**

*Review the responses provided in this section. If the team has responded "no" to any of the questions above, the team will need to assign Commission follow-up to assure that the institution comes into compliance with expectations regarding the assignment of credit hours.*

Is any Commission follow-up required related to the institution's credit hour policies and practices?

Yes                       No

Rationale: Courses awarding more than six (6) semester hours credit are skill-based in the area of allied health and typical of course award in comparable higher education programs.

Identify the type of Commission monitoring required and the due date: None.

**D. Identify and Explain Any Findings of Systematic Non-Compliance in One or More Educational Programs with Commission Policies Regarding the Credit Hour**

### Part 3: Clock Hours

Does the institution offer any degree or certificate programs in clock hours?

Yes

No

Does the institution offer any degree or certificate programs that must be reported to the Department of Education in clock hours for Title IV purposes even though students may earn credit hours for graduation from these programs?

Yes

No