Administrative Unit Assessment Report

Assessment is a term commonly used to encompass the process of gathering and using evidence to guide improvements.

SACSCOC requires that "The institution <u>identifies</u> expected outcomes, <u>assesses</u> the extent to which it achieves these outcomes, and <u>provides evidence of seeking improvement</u> based on analysis of the results".

Be sure to SAVE your progress as you work!

Administrative Unit
Student Affairs - Student Development and Outreach

Submission Year
2022-2023

Assessment Coordinator Name
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Unit Goal

Goal

Goal 1

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal
To provide on-going training for CARE team members to increase field competencies and strengthen overall team efficiency.

Pillar of Success Supported
Robust Student Experience

Outcomes

Outcome 1

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

Most administrative units measure **Operational Outcomes** which describe the level of performance of an operational aspect of a program or office (ex. number of services provided, timeliness of a process).

Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?
Operational Outcome

Enter Outcome
Training initiatives are supported by allocated funds; and other training opportunities, such as tabletops, are facilitated a minimum of two times per academic semester.

Timeframe for this Outcome
2021-2022 Academic Year

Performance Target for "Met"
An average of 85-100% score in Section 8.1 of the NaBITA CORE Q10 Analysis.

Performance Target for "Partially Met"
An average of 70-84.9% score in Section 8.1 of the NaBITA CORE Q10 Analysis.

Performance Target for "Not Met"
An average of <70% score in Section 8.1 of the NaBITA CORE Q10 Analysis.

Assessment Measure Used
The NaBITA CORE Q10 checklist is provided to assist the CARE Team in conducting an internal audit. A portion of this audit is focused on Team training. The reviewer enters a 0 as an indication the item in question is present. A score of 1 is entered to represent the item is in progress of being addressed. A score of 2 is entered to represent the item is not present. Team members were asked to complete the CORE-Q10 analysis for the year-end review. Scores of all participating team members were averaged to obtain scores within each corresponding category. These scores were then converted to percentages for purposes of assessment. Section 8.1 of the CORE Q10 were used as indicators. Section 8.1 consists of the following:

8.1 Does the team leader have a dedication to training and educating the CARE members?

8.1 Does CARE have a budget set aside for training during the year?

8.1 Does the team have tabletop exercises to use as training tools?

8.1 Does the team complete at least two tabletop exercises each semester?

Frequency of Assessment
The CORE Q10 will be administered annually at the end of the Spring semester.

Data Collected for this Timeframe (Results)
The CORE Q10 analysis was distributed to Team members at the end of the Spring 2021 semester. The percentage score for section 8.1 of the CORE Q10 equaled 89%.

Score (Met=3, Partially Met=2, Not Met=1)
3

Comments/Narrative

The threshold for the outcome of "Training initiatives are supported by allocated funds; and other training opportunities, such as tabletops, are facilitated a minimum of two times per academic semester" was met during the reporting period (89%). Performance target percentages for partially met and not met were adjusted to better reflect anticipated progress. During the previous reporting period, the percentage score of 8.1 equaled 99%. There were several staffing changes made to the CARE Team in 2021-2022. Several members were unaware there was a dedicated training budget. This will be better communicated moving forward to ensure CORE Q10 responses are accurate. Additional emphasis continues to be placed on Team training. Since this has been monitored for several consecutive years and the targets have been consistently met, outcomes/performance targets will be further modified for future reporting cycles.

Resources Needed to Meet/Sustain Results
CARE Team Budget – Continued $6000 per academic year.

Explanation of How Resources Will Be Used
Team Training and Professional Development

Goal Summary

Goal Summary/Comments
SLED leadership working within the behavioral analysis unit provided training to CARE Team members in August 2021 (reference opening year training schedule above). The focus of the training was threat assessment and response. Utilizing outside expertise provides the Team with valuable insight, further enhances Team critical thinking skills, and provides practical knowledge about the application/execution of resources in potentially high-risk situations. Tabletop exercises establish clear preparedness objectives and increase critical thinking among Team members regarding potential situations/incidents. This year, tabletop exercises were executed during both the Fall and Spring semesters. Tabletops were facilitated on the following dates: August 18, 2021, December 7, 2021, March 16, 2022, and April 27, 2022.

Various Team members and other campus constituents participated in a webinar on August 11, 2021. The webinar focused on the growing demand for student mental health services due to the pandemic. The training provided best practice guidance regarding holistic-based student support.

On November 5, 2021, the Student Outreach Coordinator attended a course on how to triage risk related to suicide with utilization of the Non-Clinical Assessment of Suicide Tool (NAS). The NAS relies on evidence-based risk and poses factors to help non-licensed professionals triage the overall risk for suicide an individual poses. The instructors in the course provided an overview of how to identify an individual who may be experiencing suicidal ideation, strategies for asking about suicide in a 1:1 appointment, and in-depth teaching of the NAS as a suicide assessment tool. Additionally, participants learned how to make an effective referral to clinical mental health services and deploy appropriate interventions based on the level of risk assessed using the NAS.

On December 7, 2021, Dr. Brittany Aga provided mental health first aid training to CARE Team members. Mental Health First Aid provided Team members with information about how to help someone experiencing a mental health problem or crisis. Additionally, the training helped Team members to identify, understand, and respond to signs of addiction and mental illnesses more effectively.

In February 2022, the Director of CARE & Advocacy completed the Mindfulness X training provided by Positive Psychology. The Mindfulness-based stress reduction training is an eight-week evidence-based program that offers secular, intensive mindfulness training to assist individuals with stress, anxiety, depression, and pain. Worksheets and materials provided were used as a guide to support students, in a non-clinical manner, with navigating through college and better managing common stressors that are

often associated with their experience.

Cornerstone hosted an in-person training opportunity on March 21, 2022. The program was entitled "High in Plain Sight." The workshop trainer was Jermaine "Tall Cop" Galloway. Galloway is a national expert in substance use trends and is a resource for those involved with prevention, education, and enforcement. Officer Galloway began his law enforcement career in 1997 and has nearly 25 years of experience in alcohol and drug education, enforcement, and prevention. Six (6) CARE Team members participated in this training event.

Changes Made/Proposed Related to Goal
Since the Team had new staff added in 2021-2022, appropriate training remained a key focal point. As stated previously, future measures will be updated to reflect further enhancement.

Upload Files (if needed)

Goal 2

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal
To provide adequate marketing and education that communicates the existence of, and promotes ease of access to, the CARE Team.

Pillar of Success Supported
Robust Student Experience

Outcomes

Outcome 1

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

Most administrative units measure **Operational Outcomes** which describe the level of performance of an operational aspect of a program or office (ex. number of services provided, timeliness of a process).

Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?
Operational Outcome

Enter Outcome
To enhance Team visibility, biweekly programs/tabling events are offered.

Timeframe for this Outcome
2021-2022 Academic Year

Performance Target for "Met"
Biweekly programs are offered throughout the academic year.

Performance Target for "Partially Met"
At least one program per month is offered throughout the academic year.

Performance Target for "Not Met"
Monthly programs are not offered throughout the academic year.

Assessment Measure Used
Calendar, dates, notes, and execution of events.

Frequency of Assessment
Annually

Data Collected for this Timeframe (Results)
Biweekly programs were offered.

Score (Met=3, Partially Met=2, Not Met=1)
3

Comments/Narrative
The threshold for the outcome of "To enhance Team visibility, biweekly programs/tabling events are offered" was met during the 2021-2022 reporting period. While the Team's marketing strategies should consistently remain a key focus, further enhancements were made in 2021-2022. There was a significant increase in the number of programming/tabling events offered, which were facilitated biweekly. Based on patterns and trends, updates to the Team's website and additional marketing/branding opportunities will remain ongoing and fluid. There is no comparative data related to this outcome since it has not been evaluated previously.

Resources Needed to Meet/Sustain Results
Programming funds - $2000

Explanation of How Resources Will Be Used
Participation incentives such as giveaways, food, snacks, etc.

Goal Summary

Goal Summary/Comments
During the 2021-2022 academic year, the Student Outreach Coordinator in conjunction with the CAREConnect mentors facilitated CARE programs on a biweekly basis. Contact information for the CARE Team and the Team logo were displayed to promote increased Team visibility and awareness. In addition to programs offered, the Team continued to place much focus on community outreach. Such examples are delineated below.

Blackboard Training for New Students: During the 2021-2022 academic year, all incoming students were provided information about the CARE Team via an online Blackboard training platform. Since all new students are required to complete training specific to sex/gender-based misconduct, other pertinent information, aside from VAWA requirements, was included in the training to ensure incoming students were familiar with other essential functions, resources, and opportunities for assistance. The training provided new students with information regarding the CARE Team and its purpose, as well as an overview of relevant behaviors and how to report concerning matters to the Team (1,374 students trained).

New Employees (Faculty and Staff): Effective summer 2020, a CARE Team module was added to the onboarding training for all newly hired employees. The training provides an overview of the Team itself, its purpose, the types of behaviors to report, how to report, and what to expect following the submission of a referral. This process was continue to be utilized in 2021-2022.

Faculty/Staff Email Outreach: In conjunction with the Academic Success Center, an announcement regarding the types of behaviors to report and how to report was sent out via the faculty/staff list serve in August 2021. This announcement clarified the difference between Academic Early Alerts and Welfare

Concern/CARE Reports. Further, the announcement also detailed other types of reporting tools that could be utilized, as appropriate.

Resident Assistants: Resident Assistants were provided education/training about the CARE Team and its purpose. Training was provided both online and in-person during RA training in August 2021. The information presented discussed the distinct types of behaviors to report, how to report, and specifics about how RAs can provide essential feedback to the Team.

LINK Peer Leaders: LINK Peer Leaders were provided education/training about the CARE Team and its purpose. Training was provided in-person in August 2021. The information presented discussed the distinct types of behaviors to report, how to report, and specifics about how LINK Peer Leaders can provide essential feedback to the Team.

Condolence Card Campaign: To emphasize the Team's support of students that have lost a loved one, a condolence card campaign was launched during the Spring 2021 semester. This initiative continued in 2021-2022. Cards were personally delivered to each impacted student's residence and included contact information for the CARE Team and Wellness Center.

CARE Chirps: The Director of CARE and Advocacy implemented CARE Chirps in Spring 2021. This initiative continued during the 2021-2022 academic year. Bird houses were displayed in various areas throughout campus that contain positive/uplifting messages. If any member of the campus community is having a challenging day, they can reach into the birdhouse and pull out an envelope for words of encouragement.

Feminine Hygiene Products: To promote Team visibility and fulfill a common need, feminine hygiene supplies were placed in multiple high traffic restroom facilities around campus. Supplies were checked regularly and refilled, as necessary. Ultimately, the Team desires to be considered a supportive, caring resource. Such initiatives work as a complement to this goal.

Housing Overflow: During the Fall 2021 semester, Housing occupancy exceeded 100% capacity. As a result, an estimated 20+ students were assigned to reside at a local hotel until on-campus bed space could be secured. The Director of CARE & Advocacy and the Student Outreach Coordinator hosted weekly programs to foster connections. Further, student mentors and staff provided ongoing support to impacted students to ensure needs were identified and resolved in a proactive manner.

Communication with Employees Following a Referral: The Team continued to email employees upon submission of a referral. The purpose of this outreach was to ensure employees knew their respective referrals had been received, as well as provide a point of contact in the event additional information became available.

CAREConnect: In 2021-2022, the CAREConnect program was implemented to provide a structured, one-on-one relationship between five (5) student mentors and designated students of concern. Mentors were trained and provided a manual to help facilitate strategically planned follow-up based upon pre-defined resilience building strategies. One goal of the CAREConnect program is to establish a mutually trusting and respectful relationship between the mentor and student. Continued, ongoing communication between mentors and mentees following completion of the program was observed. The development of a positive rapport among participants was another noted benefit. Enhancing and further expanding the program will continue to remain a focal point in 2022-2023.

Changes Made/Proposed Related to Goal
Previously, there was an outcome related to the development of a CARE Team website. Since the outcome was met during the last reporting period, a new outcome related to the enhancement of Team visibility was established and assessed.

Upload Files (if needed)

Goal 3

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal
To adjudicate student conduct cases in a timely manner.

Pillar of Success Supported
Robust Student Experience

Outcomes

Outcome 1

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

Most administrative units measure **Operational Outcomes** which describe the level of performance of an operational aspect of a program or office (ex. number of services provided, timeliness of a process).

Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?
Operational Outcome

Enter Outcome
Student Conduct cases are adjudicated within 1-10 business days upon case creation in Maxient.

Timeframe for this Outcome
2021-2022 Academic Year

Performance Target for "Met"
85% or above of all student conduct cases are adjudicated within 10 business days (not including the disposition of civil rights cases).

Performance Target for "Partially Met"
65%-84.9% of all student conduct cases are adjudicated within 10 business days (not including the disposition of civil rights cases).

Performance Target for "Not Met"
Below 64.9% of all student conduct cases are adjudicated within 10 business days (not including the disposition of civil rights cases).

Assessment Measure Used	Frequency of Assessment
Maxient database analytics.	Annually

Data Collected for this Timeframe (Results)	Score (Met=3, Partially Met=2, Not Met=1)

94% of cases were adjudicated within ten days   3
upon case creation in Maxient.

Comments/Narrative
The threshold for the outcome of "Student Conduct cases are adjudicated within 1-10 business days upon case creation in Maxient" was met during the 2021-2022 reporting period. Previously, in 2020-2021, the success rate for this outcome equaled 100%. During the 2019-2020 reporting period, this outcome was partially met, with approximately 75% of student conduct cases being adjudicated within the 1-10 business day timeframe.

It is noteworthy to mention that in 2021-2022 the complexity of cases increased. Complex cases frequently involve a greater number of internal and external stakeholders. This likely contributed to the length of time it took to handle each respective case. As the enhancement and dedication to timely case completion is apparent, this outcome will not be assessed moving forward. (Reference changes made to goal summary below.)

Resources Needed to Meet/Sustain Results
Continued budgetary allowance for payment of annual Maxient invoice (cost of $6000 per academic year).

Explanation of How Resources Will Be Used
Case resolution, case management, analytics and departmental tracking.

Goal Summary

Goal Summary/Comments
The duties of the Assistant Director, Ayrn Gilstrap, were increased due to the change in leadership in the Housing and Residence Life Department. Because of these changes, Mrs. Gilstrap adjudicated all low-level housing violations that were not warnings. This includes, but is not limited to, the following violations: pet policy, alcohol, and creating fire/safety hazards. Moving forward, the office of Student Conduct plans to hire a Graduate Assistant to assist with programming, low level adjudications, and office coverage/management.

It is also noteworthy to mention that the department continued to improve internal processes/communications. For instance, community service forms were digitalized to provide students with a more convenient method to submit documentation. Further, QR pocket codes were distributed to promote ease of access to the department. Lastly, departmental marketing/promotional initiatives were further enhanced and expanded upon.

Changes Made/Proposed Related to Goal
Moving forward, since the outcome regarding the timeline for adjudication of conduct cases has been met for two (2) consecutive years, a goal related to timely sanction completion and follow up will be added. Additionally, the office of Student Conduct will be implementing a survey for all students that were adjudicated during both the Fall 2022 and Spring 2023 semesters. Outcomes and performance targets will be created and assessed accordingly.

Additionally, the outcome related to conduct training for Area Coordinators was removed. It was stated in the 2020-2021 report that contingent upon staffing and the number of referrals received, the outcome may not be applicable for future reporting periods. Since duties were shifted in 2021-2022, the outcome was no longer relevant based on the updated operational work flow.

Upload Files (if needed)

Goal 4

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal
To promote the Office of Student Conduct, the Conduct Code, and healthy behaviors through on-going education and targeted programming.

Pillar of Success Supported
Robust Student Experience

Outcomes

Outcome 1

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

Most administrative units measure **Operational Outcomes** which describe the level of performance of an operational aspect of a program or office (ex. number of services provided, timeliness of a process).

Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?
Operational Outcome

Enter Outcome
Provide annual education to incoming students on the Office of Student Conduct, to include an overview of the Conduct Code.

Timeframe for this Outcome
2021-2022 Academic Year

Performance Target for "Met"
The Director or Assistant Director of Student Conduct annually reviews the corresponding year LINK 101 data as well as departmental trends and creates/updates a relevant, educational presentation about the Department/Conduct and submits this information to the LINK Director for inclusion in the LINK 101 curriculum by June 30th.

Performance Target for "Partially Met"
The Director or Assistant Director of Student Conduct annually reviews the corresponding year LINK 101 data as well as departmental trends and creates/updates a relevant, educational presentation about the Department/Conduct and submits this information to the LINK Director for inclusion in the LINK 101 curriculum after June 30th.

Performance Target for "Not Met"
The Director or Assistant Director of Student Conduct does not complete the annual review and/or meet the appropriate submission deadline, and therefore, an updated departmental presentation is not

included in the LINK 101 curriculum.

Assessment Measure Used
Completion of annual review/updates for departmental presentation, followed by timely submission to the Director of LINK.

Frequency of Assessment
Annually

Data Collected for this Timeframe (Results)
Patterns/trends reviewed prior to June 30, 2022. No needed changes in materials were apparent.

Score (Met=3, Partially Met=2, Not Met=1)
3

Comments/Narrative
The threshold for the outcome of "Provide annual education to incoming students on the office of Student Conduct, to include an overview of the Conduct Code" was met during the 2021-2022 reporting period. During the 2020-2021 reporting period, this outcome was also met. Target dates/deadlines, to include a review of data, conduct trends, and general updates, were appropriately established to ensure timely submission of the LINK 101 presentation. While the Assistant Director of Student Conduct updated the training in early June, due to the vacant position of the LINK Director, notification was unable to be provided to the new LINK Director until late July. Since it is unclear if the office of Student Conduct will have a platform in LINK moving forward, this outcome will be removed for the 2022-2023 reporting period.

Resources Needed to Meet/Sustain Results
N/A

Explanation of How Resources Will Be Used
N/A

Outcome 2

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

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Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?
Operational Outcome

Enter Outcome
The Office of Student Conduct participates in and/or facilitates a minimum of five (5) educational programs per academic year and provides on-going promotion of the Bearcat Creed.

Timeframe for this Outcome
2021-2022 Academic Year

Performance Target for "Met"
Implementation of and/or participating in at least three (3) active programs during the Fall semester and

at least two (2) active programs during the Spring semester. The department implements at least two (2) initiatives geared toward the promotion of the Bearcat Creed.

Performance Target for "Partially Met"
Implementation of and/or participating in at least two (2) active programs during the Fall semester and at least one (1) active program during the Spring semester. The department implements at least one (1) initiative geared toward the promotion of the Bearcat Creed.

Performance Target for "Not Met"
Implementation of and/or participating in > two (2) active programs during the Fall semester and zero (0) active programs during the Spring semester. The department implements zero (0) initiatives geared toward the promotion of the Bearcat Creed.

Assessment Measure Used	**Frequency of Assessment**
Calendar, dates, notes, and execution of events.	Annually

Data Collected for this Timeframe (Results)	**Score (Met=3, Partially Met=2, Not Met=1)**
Data available following the close of the academic year.	3

Civility Champion Award: On-going (full academic year)

August 2021: Housing check-in, Coasters with Conduct, Student Training

September 2021: Red Zone, Have a ball without alcohol, hazing prevention, Rec-a Palooza, Dr. Bednarchik, and House calls.

October 2021: National Bullying Prevention Day, Bearcat Bash, These Hands Don't Hurt, Moonshine Run, Halloween, and Homecoming.

November 2021: Great American Smoke Out.

December 2021: Conduct Candy Canes, and DeStress Fest.

February 2022: Valentines day - We Love Consent.

March 2022: Spring Break, St. Patricks Day, and Creed Grab.

April 2022: Passive outreach - Denim Day

Comments/Narrative
The threshold for the outcome of "The Office of Student Conduct participates in and/or facilitates a minimum of five (5) educational programs per academic year and provides on-going promotion of the Bearcat Creed" was met during the 2021-2022 reporting period. During the 2020-2021 academic year, this outcome was also met.

In addition to funds being specifically allocated for programming/educational purposes, the ability to budget and partner with other areas allowed for Student Conduct to program more efficiently. Such initiatives resulted in enhanced educational opportunities, increased awareness of policies and procedures, and more campus-wide visibility of conduct staff. Budget allocations also allowed conduct staff to incentivize participation by offering prizes/giveaways. Programming and education will continue to be a focal point for the department.

Resources Needed to Meet/Sustain Results
$2000+ annually.

Explanation of How Resources Will Be Used
To execute, promote, and incentivize events.

Goal Summary

Goal Summary/Comments
Increased programming, combined with establishing collaborations with both on and off campus partners continued to positively impact the department's ability to effectively promote the Office of Student Conduct, the Conduct Code, and healthy behaviors. Off campus partners such as Beyond Abuse, Meg's House, and Cornerstone serve an integral role in many educational initiatives. On-campus partners such as the Lander University Police Department, Student Life, Greek Life, Athletics, the CARE Team, and various student leaders maximize efforts and expand the scope of students reached. An educational programming committee will remain in place for the 2022-2023 academic year. The purposes of the committee are to promote additional collaboration; offer enhanced educational programming and positively impact prevention and awareness; and track programming efforts/initiatives.

Since analytics for the last two reporting periods have consistently demonstrated a majority of conduct cases are freshmen students (source: Maxient data based on classification), targeting methods should be further explored and measures should be effectively incorporated. In previous years, a LINK module specific to student conduct has been included in the LINK 101 curriculum. As the department is unsure if this will be an option moving forward, additional educational opportunities targeting freshmen students will be explored and implemented. Potential opportunities are orientation, Resident Assistant programming, and/or expansion of educational brochures/awareness materials. Opportunities will be contingent upon feedback from other stakeholders and feasibility of execution/implementation.

Changes Made/Proposed Related to Goal
Outcome specific to LINK module will be removed. An additional outcome that is attainable and measurable will be added.

Upload Files (if needed)

Goal 5

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal
To monitor occupancy rates of residential facilities and implement actions contingent upon the availability of bed space, enrollment trends, and various other customer service aspects.

Pillar of Success Supported
Selective, Competitive Recruitment and Enrollment of Ambitious and Talented Students

Outcomes

Outcome 1

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

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Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?
Operational Outcome

Enter Outcome
Housing occupancy/application rates are tracked Fall through Summer, and a weekly report/update is shared with pertinent campus constituents.

Timeframe for this Outcome
2021-2022 Academic Year

Performance Target for "Met"
A weekly occupancy/application report/update is provided to pertinent campus constituents Fall (beginning November 1st) through the end of summer.

Performance Target for "Partially Met"
N/A

Performance Target for "Not Met"
A weekly occupancy/application report/update is not provided to pertinent campus constituents Fall (beginning November 1st) through the end of summer.

Assessment Measure Used	Frequency of Assessment
Housing Occupancy Report	Annually

Data Collected for this Timeframe (Results)	Score (Met=3, Partially Met=2, Not Met=1)
Data collected from emailed occupancy reports (sent weekly).	3

Comments/Narrative
The outcome "Housing occupancy/application rates are tracked Fall through Summer, and a weekly report/update is shared with pertinent campus constituents" was met during the 2021-2022 reporting period. Information was consistently communicated to the Vice President for Student Affairs and President's Cabinet. Occupancy rates and housing applications were tracked throughout the year for both the current and upcoming academic year. While this outcome has also been met during previous reporting periods, occupancy and projections remain a focal point for the department. Communicating up-to-date information in a timely manner to other university constituents is essential since occupancy rates directly impact a variety of administrative areas. For the past two years occupancy has been at or above 100 percent. As a result, it has been necessary to track occupancy more closely/regularly so that

the department could prepare accordingly. Alternative housing options in the community have been secured until long term plans can be identified.

Resources Needed to Meet/Sustain Results
Alternative off campus options, as needed, to meet occupancy needs. Long term solutions should be explored. A cost estimate is unknown at this time.

Explanation of How Resources Will Be Used
Meet increased demand for residency.

Outcome 2

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

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Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?
Operational Outcome

Enter Outcome
To ensure a quality residential experience, decisions about staffing, placement of students, and other operational plans are appropriately implemented by Spring of each year.

Timeframe for this Outcome
2021-2022 Academic Year

Performance Target for "Met"
A minimum of two decisions based on occupancy rates and/or other relevant factors are made by Spring of each year.

Performance Target for "Partially Met"
N/A

Performance Target for "Not Met"
Less than (<) two decisions are made based on occupancy rates and/or other relevant factors by Spring of each year.

Assessment Measure Used	**Frequency of Assessment**
Verbal feedback from Director of Housing and Residence Life and/or documentation of data-driven decisions by Spring of each year.	Annually

Data Collected for this Timeframe (Results)	**Score (Met=3, Partially Met=2, Not Met=1)**
Decisions Made in 2021-2022 = Five (5)	3

Comments/Narrative

During the 2020-2021 reporting period, the outcome "To ensure a quality residential experience, decisions about staffing, placement of students, and other operational plans are appropriately implemented by Spring of each year" was met. Although the outcome was met previously, the number of decisions based on occupancy rates and/or other relevant factors in 2021-2022 increased by three (3) when compared to 2020-2021.

(1) RAs were given temporary roommates based on increased occupancy and hotel beds were utilized for overflow students during the Fall 2021 semester.

(2) A new graduate assistant position was added in Housing to help assist with Business Operations. This new addition was in response to the increase in the on campus population and the need for more hands to help with room changes, withdrawals, assignments and managing overflow spaces.

(3) A new Resident Assistant Director position was created in response to the growing residential population. The Resident Assistant Programmer aids in programming for residence life. In addition to further enhancing the overall community experience, workloads among RAD staff are more manageable/sustainable with the addition of this position.

(4) With more residential students, and as a result, more incidents to manage, the need for residence life staff to be better informed of of the happenings in their respective areas has become increasingly necessary. Structural changes were made that include weekly meetings between RA's and Area Coordinators. The goal is to address issues and concerns as proactively as possible.

(5) The department extended partnerships within the community. Initially, it was anticipated that additional bed spaces would only be needed for Fall 2021; however, beds remained at max capacity for Spring 2022. Additionally, conversations with hotel management regarding potential Fall 2022 needs were proactively addressed.

Resources Needed to Meet/Sustain Results
Continued budget for Resident Assistant Programmer - $4,050 stipend.

Explanation of How Resources Will Be Used
Stipend to support position

Goal Summary

Goal Summary/Comments
Overall, the goal was met for the 2021-2022 academic year; however, it is noteworthy to mention there were structural/staffing changes within the department. In February 2022, the Director of Housing and Residence Life, Zach Helms, resigned to take another position elsewhere. The Associate Director of Housing and Residence Life, Catherine Covar, agreed to serve as interim director until the position was filled. With the resignation of Zach Helms in February 2022, the Department was short staffed for the majority of the Spring 2022 semester. Further, aside from the Associate Director, other staff within the department are relatively new in their respective positions.

There is no doubt that the entire staff faced a significant learning curve. Although there were some hiccups and confusion about processes and fully understanding the various intricacies of operational tasks, staff met challenges head on with a positive and determined mindset.

A lack of available bed space based on occupancy rates is a foreseeable obstacle/challenge. The age of some residence halls and the need for upkeep and renovation work is another foreseeable obstacle/challenge. Based on the summer schedule (high usage of residence halls), time for overhauling is often far, few, and in between.

During the 2020-2021 reporting period, the proposed changes to goal were to implement a third outcome beginning the Fall 2021 semester regarding monthly meetings to be held with Housing Office and a representative from Athletics and sending/requesting automated commit and application reports between Housing and the Office of Admissions. Due to staff turnover and management changes, the outcome was not addressed. The new Director will evaluate the need and potential solutions moving forward.

Changes Made/Proposed Related to Goal
N/A

Upload Files (if needed)

Goal 6

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal
To promote a more robust, convenient, and opportunistic residential experience.

Pillar of Success Supported
Robust Student Experience

Outcomes

Outcome 1

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

Most administrative units measure **Operational Outcomes** which describe the level of performance of an operational aspect of a program or office (ex. number of services provided, timeliness of a process).

Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?
Operational Outcome

Enter Outcome
Implementation of alternative Housing options.

Timeframe for this Outcome
2021-2022 Academic Year

Performance Target for "Met"
At least one (1) alternative Housing option is implemented.

Performance Target for "Partially Met"
N/A

Performance Target for "Not Met"

Zero (0) alternative Housing options are implemented.

Assessment Measure Used
Housing Contract Terms and/or Housing options available

Frequency of Assessment
Annually

Data Collected for this Timeframe (Results)
Number of Housing options implemented in 2021-2022 =Two (2)

Score (Met=3, Partially Met=2, Not Met=1)
3

Comments/Narrative
The outcome 'Implementation of alternative Housing options' was met during the 2021-2022 reporting period. The department worked to vary housing prices by area to ensure there was a more diverse range of pricing options based on what was feasible for one's financial situation. Previously, the rate structure was limited and did not offer allow much range in associated cost. The new structure allowed for more flexibility in options available based on one's unique circumstances.

In addition, Housing met with Athletics to discuss alternative residence hall options to expand across a more diverse range of living styles. In previous years, athletes were typically clustered in one area, which limited their options. It is also noteworthy to mention that this provides a benefit to the larger campus community, specifically non-athletes, in that it opens up the amount of options available to them.

The outcome was also met during the 2020-2021 reporting period with the implementation of 12-month housing and alternative pricing options for summer school students that desired to be housed in the residence halls.

Resources Needed to Meet/Sustain Results
N/A

Explanation of How Resources Will Be Used
N/A

Outcome 2

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

Most administrative units measure **Operational Outcomes** which describe the level of performance of an operational aspect of a program or office (ex. number of services provided, timeliness of a process).

Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?
Operational Outcome

Enter Outcome
Transportation Services provides ease of access for residential students.

Timeframe for this Outcome

2021-2022 Academic Year

Performance Target for "Met"
Effectively implemented at least one improvement and/or enhancement to services offered.

Performance Target for "Partially Met"
N/A

Performance Target for "Not Met"
No improvement and/or enhancement to services offered was effectively implemented.

Assessment Measure Used	**Frequency of Assessment**
Number of improvements/enhancements made	Annually

Data Collected for this Timeframe (Results)	**Score (Met=3, Partially Met=2, Not Met=1)**
Number of improvements and/or enhancements = Two (2)	3

Comments/Narrative
The outcome 'Transportation Services provides ease of access for residential students' was met during the 2021-2022 reporting period. (There is no comparative data available as this outcome has not been assessed previously.) In 2021-2022, Transportation Services partnered with BusWhere to provide riders with real-time updates on bus/Lander Line location and estimations on when vehicles will arrive to each designated area. Further, another full-time bus driver and two additional part-time drivers were hired to meet increased demand and enhance the quality of services offered.

Resources Needed to Meet/Sustain Results
BusWhere annual cost ($2,500). Salary associated with created positions ($25,000 for full-time driver, and $13 per hour for part-time drivers).

Explanation of How Resources Will Be Used
Continued BusWhere access and salaries for drivers.

Goal Summary

Goal Summary/Comments
During the Fall 2021 semester, Housing occupancy exceeded 100% capacity. As a result, an estimated 20+ students were assigned to reside at a local hotel until on-campus bed space could be secured. The Department and the administration desired for students assigned to the hotel to feel connected. As a result, the Director of CARE & Advocacy and the Student Outreach Coordinator hosted weekly programs at the hotel to foster connections. Further, student mentors and staff provided ongoing support to impacted students to ensure needs were identified and resolved in a proactive manner.

The department continued to work closely with Resident Assistants to shift them back to new normal, post-COVID-19 functioning. The value of resident interactions and community building as a whole play an essential role in the overall college experience. Since the first- and second-year RA staff had only operated under the climate of COVID-19 (whereas many typical community building requirements were made more flexible in terms of methodology and execution),professional staff provided intentional support and guidance as RA staff transitioned back to the more traditional type of community building.

Lastly, in working toward the larger goal, a new Transportation Services outcome was added in 2021-2022.

Changes Made/Proposed Related to Goal
A Transportation Services outcome was added and assessed.

Upload Files (if needed)