

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 identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement 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

2021-2022

Assessment Coordinator Name

Jalysa Green

Enter Assessment Coordinator Email

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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

2020-2021 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 60-84.9% score in Section 8.1 of the NaBITA CORE Q10 Analysis.

Performance Target for "Not Met"

An average of <60% 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 99%.

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

3

Comments/Narrative

The threshold for the outcome of "Training initiatives is 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 2020-2021 reporting period. During the 2019-2020 time-frame, the percentage score of 8.1 equaled 67% (partially met). As additional emphasis was placed on Team training, significant improvements were noted in 2020-2021 (reference goal 1 summary). Outcomes/performance targets will be 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 and various representatives of the President's Cabinet, Wellness Center, Human Resources, and University Police on May 3, 2021. (CARE Team members and other campus constituents met in person.) Topics included the following: FERPA/HIPAA and cross-sharing of information, research and identifying issues, law enforcement's role in threat assessment, attributes of concern, workplace violence, and administrative response. Tabletop exercises establish clear preparedness objectives and increase critical thinking among Team members regarding potential situations/incidents. Adequate time for Team tabletops exercises was not set aside during the 2019-2020 academic year. This year, tabletop exercises were executed during both the Fall and Spring semesters. Tabletops were facilitated on the following dates: August 4th, December 9th, and May 5th. The Covid Rage webinar also allowed Team members an opportunity to think strategically based on specified scenarios. To ensure Team members remain current in the field, additional trainings methods were also provided. During the 2020-2021 academic year, funds were allocated for professional development purposes. Designation of such funds helped to enhance field competencies and strengthen overall team efficiency.

The Team will work to maintain the training initiatives supported by allocated funds; and other training opportunities, such as tabletops facilitated a minimum of two times per academic semester. The CORE Q10 will be administered each year and the results will be monitored to ensure Section 8.1 is maintained. In 2020-2021, the Team had tabletops/training dates pre-established to ensure completion. The Team will continue to set dates for tabletops/trainings prior to the start of the year. To improve the state of this goal, continuing to monitor, evaluate, and update will remain a priority.

Changes Made/Proposed Related to Goal

Since the Team made significant improvements during the 2020-2021 timeframe (based on the established outcome/performance targets), 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

The CARE Team preserves a website that includes relevant information such as the Team's mission, educational materials/brochures, and at least two of the following components: list of behaviors to report, team membership list, online reporting form, and FAQ about the Team, and/or a faculty class guide.

Timeframe for this Outcome

2020-2021 Academic Year

Performance Target for "Met"

An average of 85-100% score in Section 4.2 of the NaBITA CORE Q10 Analysis.

Performance Target for "Partially Met"

An average of 60-84.9% score in Section 4.2 of the NaBITA CORE Q10 Analysis.

Performance Target for "Not Met"

An average of <60% score in Section 4.2 of the NaBITA CORE Q10 Analysis.

Assessment Measure Used

The CORE Q10 checklist is provided to assist the CARE Team in conducting an internal audit. A portion of this audit is focused on Team marketing. 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

Frequency of Assessment

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

assessment. Section 4.2 of the CORE Q10 were used as indicators. Section 4.2 consists of the following:

4.2 The team has developed a website.

4.2 The website includes contact phone number, team mission and contact email.

4.2 The website contains two of the following: list of behaviors to report, team membership list, online report form, FAQ about team and faculty class guide.

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 4.2 of the CORE Q10 equaled 100%.

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

3

Comments/Narrative

The threshold for the outcome of "The CARE Team preserves a website that includes relevant information such as the Team's mission, educational materials/brochures, and at least two of the following components: list of behaviors to report, team membership list, online reporting form, and FAQ about the Team, and/or a faculty class guide" was met during the 2020-2021 reporting period. During the 2019-2020 academic year, the CARE Team did not meet the outcome to develop and publish a website within the desired time-frame. In February 2020, the challenges of COVID-19 significantly impacted the Team's progress. However, with support from University Relations and Publications, the Team was able to effectively accomplish this outcome in 2020-2021 (reference goal 2 summary). Outcomes/performance targets will be modified for future reporting cycles.

Resources Needed to Meet/Sustain Results

N/A

Explanation of How Resources Will Be Used

N/A

Goal Summary

Goal Summary/Comments

The Team's website was fully developed and posted. The website contains information about the Team, its purpose, and the types of behaviors to report. Various campus resources, FAQs, and testimonials are also highlighted.

<https://www.lander.edu/student-life/care-team>

<https://www.lander.edu/student-life/care-team/care-faqs>

<https://www.lander.edu/student-life/care-team/resources>

The Team will continue to provide adequate marketing and education that communicates the existence of and promotes ease of access to the CARE Team. The CORE Q10 will be administered each year and the results will be monitored to ensure Section 4.2 is maintained. The CARE Team will continue to

communicate/coordinate with University Relations and Publications to maintain and update the website with information related to the CARE Team. There will be continuous evaluation of this goal annually as the CORE Q10 is administered.

Additional areas of improvement made during the 2020-2021 reporting period are referenced below.

(1) Enhanced Team Visibility – Offered an increased number of tabling events/programs.

(2) 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 will continue moving forward. (The Team plans to expand similar outreach efforts to those experiencing a variety of difficulties.) Cards were personally delivered to each impacted student's residence and included contact information for the CARE Team and Wellness Center.

(3) Safety Saturdays - In conjunction with the Lander University Police Department, the CARE Team sponsors "Safety Saturdays." Safety tips on a variety of topics are sent weekly via the student and faculty/staff list serves.

(4) Student Outreach Coordinator - The Vice President for Student Affairs and the administration supported an FTE adjustment for a previously vacated Student Affairs position. The purpose of this role is to positively impact the retention and graduation of students by providing support and ensuring students are appropriately connected to various campus resources. The Student Outreach Coordinator will also focus on programming and other outreach, which will further enhance Team visibility.

Changes Made/Proposed Related to Goal

Since the Team made significant improvements during the 2020-2021 timeframe (based on the established outcome/performance targets), future measures will be updated to reflect further enhancement.

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.).

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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

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

Timeframe for this Outcome

2020-2021 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

Maxient database analytics.

Frequency of Assessment

Annually

Data Collected for this Timeframe (Results)

100% of cases were adjudicated within ten days upon case creation in Maxient.

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

3

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 2020-2021 reporting period. 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 time-frame. Much of this success can be attributed to the hiring of an Assistant Director. Additionally, there were less formal hearings requested, and therefore, the majority of matters were resolved on an informal basis.

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.

Outcome 2

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(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

Annual training for Area Coordinators increases competencies, minimizes confusion, and therefore promotes timely case disposition for the adjudication of cases classified as residence life student conduct.

Timeframe for this Outcome

2020-2021 Academic Year

Performance Target for "Met"

Area Coordinators demonstrate an understanding of the conduct process, to include Maxient, and independently adjudicate 85% or more of assigned cases accurately within 10 business days upon case creation.

Performance Target for "Partially Met"

Area Coordinators demonstrate a fair understanding of the conduct process, to include Maxient, and with minimal confusion/assistance, adjudicate 65%-84.9% of assigned cases accurately within 10 business days upon case creation.

Performance Target for "Not Met"

Area Coordinators demonstrate limited understanding of the conduct process, to include Maxient, and cannot accurately adjudicate > 64.9% of cases within 10 business days upon case creation.

Assessment Measure Used

Maxient data (case turnaround analysis) and the 2020-2021 Area Coordinator survey.

Frequency of Assessment

Annually

Data Collected for this Timeframe (Results)

2020-2021 Maxient data (available immediately at the close of each semester) indicated 100% of cases were adjudicated by Area Coordinators within 1-10 business days. (Seven days was the most lengthy resolution period noted.)

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

3

According to the Area Coordinator survey, the current conduct liaison felt well equipped to perform the conduct job duties as assigned. It is noteworthy to mention that only one Area coordinator participated in the survey due to staffing turnover.

Comments/Narrative

The threshold for the outcome of "Annual training for Area Coordinators increases competencies, minimizes confusion, and therefore promotes timely case disposition for the adjudication of cases classified as residence life student conduct" was met during the 2020-2021 reporting period. For the 2019-2020 academic year, this outcome was partially met due to staffing shortages and staff turnover in the Office of Housing and Residence Life. Although staff turnover continued to be a challenge in 2020-2021, more intentional communication and training was provided to increase competencies. A Microsoft Team, which included training materials/resources for Area Coordinators, was developed. During the Fall semester, meetings were held bi-monthly between the Area Coordinator and the Assistant Director of Student Conduct. The purpose of these meetings were to discuss/troubleshoot any issues and review any needed areas of improvement. During the Spring semester, as a result of staff turnover, a new Area Coordinator was hired. At this time, the decision was made to have the Area Coordinator adjudicate extremely low-level residential violations only. If these changes remain in effect, contingent upon staffing and the number of referrals received, the outcome may not be applicable for future reporting periods.

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

Records in Maxient will be reviewed to monitor the accuracy of records and ensure the assigned Area Coordinator facilitated case resolution in a timely manner, as applicable.

Goal Summary

Goal Summary/Comments

The addition of a staff member in conduct to assist with Maxient case input, trainings, adjudication, and other departmental logistics significantly improved case turnaround time in 2020-2021. Timeliness of adjudication is essential for both emotional and intellectual growth. If interventions are not administered in a timely manner, there is a potential disconnect in terms of understanding that consequences are tied to a specific behavior or action. Further, timely adjudication minimizes the potential of future incidents and increases the likelihood of positive outcomes.

Other areas of process improvement were also developed and executed. Examples are as follows: (1) Due process forms and submission of community service hours were digitalized. Digitalized opportunities afford students with a more convenient way to submit required documentation. (2) The text method option in Maxient was utilized. This resulted in a quicker response time and increased two-way communication. (3) A general student conduct email address was created and publicized. This provided students with an easy-to-remember email address and a convenient way to ask general questions.

Changes Made/Proposed Related to Goal

Potential adjustment of outcomes for 2021-2022. Update the Area Coordinator survey to gather more information specific to the Resident Assistant role. Data can be used to adapt the training curriculum, as necessary.

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**

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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

2020-2021 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

Frequency of Assessment

Annually

submission to the Director of LINK.

Data Collected for this Timeframe (Results)

Patterns/trends reviewed prior to June 30, 2021. No needed changes in materials were apparent. Method/execution of module was also explored (reference outcome comments). While needed changes to material were not apparent (based on patterns/trends), conduct staff communicated a desire to have the module presented earlier in the semester (request sent to LINK Director 3/23/2021). The purpose of the request was related to the number of referrals received on Freshmen students early on in the semester.

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 2020-2021 reporting period. During the 2019-2020 reporting period, this outcome was partially 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. The Assistant Director of Student Conduct expressed an interest in revamping the way Student Conduct information is presented. Conversations occurred with the LUX Team to discuss potential options. While the method of delivery was not enhanced for 2021-2022, options will continue to be explored. Opportunities are contingent upon feedback obtained from the Director of LINK and the vision of various other stakeholders.

Resources Needed to Meet/Sustain Results

N/A

Explanation of How Resources Will Be Used

N/A

Outcome 2

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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

2020-2021 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

Calendar, dates, notes, and execution of events.

Frequency of Assessment

Annually

Data Collected for this Timeframe (Results)

Data available following the close of the academic year.

Conduct Carnival - Oct 22 2020

Moonshine Run - Oct 26 2020

BEARCAT CREED – Key chains distributed Fall 2020

Information Table Lander Title IX (Community Partner Beyond Abuse) - 2/16/2021

Handbook General Programming - 2/22/2021

Safe Spring Break - 2/25/2021

VAWA/Title IX - 3/8/2021

Binge Drinking (St. Patrick's Day) - 3/17/2021

Megs House "Healthy Relationships" - 4/21/2021

Civility Recognition - On-going Fall 2020/Spring 2021

Civility Champion Award - Spring 2021

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

3

Data available following the close of the academic year.

PROGRAMS -"Thirsty Thursday": August 22, 2019; Moonshine Run: Oct. 28, 2019; Escalation Workshop for Gamma Phi Beta: November 12, 2019; Sexual Assault Education: February 24, 2020

BEARCAT CREED – Key chains distributed: Fall 2019; Civility Champion Award: Spring 2020

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 2020-2021 reporting period. During the 2019-2020 academic year, this outcome was partially met. While challenges with Covid-19 were still prevalent, safe opportunities

to engage with students were planned and executed. Effective 2020-2021, funds were 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.

Resources Needed to Meet/Sustain Results

\$1500-\$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, has positively impacted the department's ability to effectively promote the Office of Student Conduct, the Conduct Code, and healthy behaviors. An educational programming committee has been established for the 2021-2022 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. Additionally, LINK 101 is a significant factor that influences the overall freshman experience. Since analytics demonstrate a majority of conduct cases are freshmen students (2020-2021 data based on classification), targeting methods should be further explored and measures should be effectively incorporated.

It is also noteworthy to mention that conduct staff were responsible for the disposition of Covid-19 related violations. Staff consulted with fellow Association for Student Conduct Administration (ASCA) members on existing protocols. The Director worked closely alongside a colleague from Northeastern University to derive a tiered chart for Covid-related policy violations (tailored to meet the needs of Lander's campus). Digital signage, which ran on axis TV, provided continual reminders of the community mask mandate. Other methods of outreach included increased communication via the Bearcat Buzz, Resident Assistant education, and updates made to the Student Handbook based on public health guidance.

Changes Made/Proposed Related to Goal

N/A

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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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

2020-2021 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

Housing Occupancy Report

Frequency of Assessment

Annually

Data Collected for this Timeframe (Results)

Data collected from emailed occupancy reports (sent weekly).

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

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 2020-2021 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. This allowed for flexibility in the assignments process and to prepare for potential overflow housing. 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.

Resources Needed to Meet/Sustain Results

N/A

Explanation of How Resources Will Be Used

N/A

Outcome 2

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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

2020-2021 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

Verbal feedback from Director of Housing and Residence Life and/or documentation of data-driven decisions by Spring of each year.

Frequency of Assessment

Annually

Data Collected for this Timeframe (Results)

Decisions Made in 2020-2021 = Two (2)

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

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.

(1) RAs were given temporary roommates based on increased occupancy and hotel beds were utilized for overflow students during the fall 2020 semester.

(2) Sixteen singles were converted to doubles ahead of room sign-up for the 2021-2022 academic year based on data collected regarding occupancy and application rates

While this outcome has also been met during previous reporting periods, based on enrollment trends, continuous monitoring is imperative. Gender breakdowns for housing applicants were monitored more closely and earlier on, which allowed for the foresight to increase capacity, as feasible. The department continues to look for ways to increase capacity within the residence halls to be better positioned to house as many resident students as possible.

Resources Needed to Meet/Sustain Results

N/A

Explanation of How Resources Will Be Used

N/A

Goal Summary

Goal Summary/Comments

Overall, the goal was met for the 2020-2021 academic year. While the goal was met for the 2020-2021 academic year, continued communication with Athletics is crucial to the continued success of this goal due to the number of beds generally held for student athletes on campus. Improvement is also needed in the communication process between the Housing Office staff and Admissions as it relates to sharing and receiving data (commits, application reports, overall trends).

Regarding occupancy, the Housing Office is in contact with local hotels in the event that there is a need for overflow housing for Fall 2021. If overflow housing is required, transportation will be adjusted to accommodate impacted students.

It is also noteworthy to mention that during the 2020-2021 reporting period, the Department of Housing and Residence Life introduced the Housing Ambassador (HA) student worker position. The HA positions were created with the intent of providing customer service to students and families, providing tours of residential facilities beyond the standard Admissions tour, and promoting room sign-up/providing application help to students. Additionally, the request-to-move (RTM) process was streamlined to provide a better experience for students and staff.

Changes Made/Proposed Related to Goal

The proposed changes to goal are to implement a third outcome beginning during 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. While cross-communication and sharing of information has significantly improved, more intentional tracking of such efforts will ideally enhance the department's ability to navigate occupancy challenges more efficiently.

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

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

2020-2021 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 2020-2021 =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 2020-2021 reporting period. 12-Month housing was introduced in the previous academic year and utilized by students during the current reporting period. Additionally, alternative options related to pricing were introduced for summer school in 2020-2021, which provided students with more flexibility during times that housing would typically be closed. This outcome was also met during the 2019-2020 reporting period, as both 12-month Housing and extended stay/early arrival options were offered to residential students.

Resources Needed to Meet/Sustain Results

N/A

Explanation of How Resources Will Be Used

N/A

Goal Summary

Goal Summary/Comments

In the foreseeable future an obstacle/challenge for the Department of Housing and Residence Life is training the RA staff in a way that helps them fully understand and value resident interactions, documentation, and community building. The first- and second-year RA staff have only operated under the climate of COVID-19 in which some requirements were flexible in their means of delivery and execution due to health and safety protocols and concerns from staff and students. Getting the RA staff fully invested in community development along with student engagement in the process may be a challenge as many of our staff and students have not navigated residential living outside of the restrictions of COVID-19. These topics will be discussed at length during fall RA and RAD trainings. Live-in staff that supervise the RAs will be required to sit down with their individual staff and discuss/reflect on the 2020-2021 academic year. The purpose of these conversations will be for live-in staff to reiterate the importance of community building, intentional interactions, and sense of belonging. Since COVID-19 will likely still be a contributing factor, safety precautions and creative community building will also be discussed.

Fall 2020 opened with the second highest number of on-campus students ever with an occupancy rate of over 99%. Additionally, 20 male students were temporarily housed in a local hotel. Further alternative housing options were introduced. The methods by which RAs interact with residents and report information to Housing Staff is being explored as a way to provide a more robust residential experience in the wake of COVID-19.

An additional outcome related to Transportation Services was not assessed for the 2020-2021 reporting period but will be a top priority for the 2021-2022 reporting period. Due to COVID-related quarantines and employee turnover, there was a shortage of drivers, which impacted operational hours. Outcomes and performance targets were not appropriately identified/evaluated.

Changes Made/Proposed Related to Goal

An additional outcome related to transportation will be implemented for the 2021-2022 academic year as the service returns to capacity following the COVID-19 pandemic and a shortage of available drivers. Additionally, in conjunction with other university offices, the Department of Housing and Residence Life will continue to explore the possibility of other inclusive housing options.

Upload Files (if needed)