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1 - Reflective Overview

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

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

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

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

Evidence

Overall: Established in 1968, Laramie County Community College (LCCC) is a public, two-year comprehensive community college serving Laramie and Albany counties in Southeast Wyoming. Governed by an elected seven-member board of trustees, the College operates through a main campus in Cheyenne, a branch campus in Laramie, and two outreach centers (Pine Bluffs and F. E. Warren Air Force Base).

As a comprehensive community college, the Institution offers degrees (Associate of Arts, Associate of Science or Associate of Applied Science) in 78 different programs and certificates in 27 programs. With an annualized student FTE of nearly 3,200, 38% of students attend full-time and 62% attend part-time. Approximately 55% of students attending LCCC are undeclared with another 22% enrolled in transfer degree programs and 23% in career and technical education programs of study.

LCCC focuses on high quality instruction which will prepare students for life beyond college. Their expressed values include *passion, authenticity, courage,* and h

and processes.

Since roughly 2012, LCCC has initiated the following improvements, some of which are fully implemented and others that are still in process:

- The MCOR (Master Course Outline of Record), which guides all curricula and courses
- Five cycles of program review (8 per year, or 45 completed out of 78 programs)

The Team notes that the College regards itself having robust policies and procedures related to Academic Integrity for both students and faculty.

CATEGORY 2

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An important outcome of the Strategy Forum participation in 2012 was the LCCC Model of Continuous Quality Improvement (CQI). The College used this CQI model in evaluating a myriad of areas within Strategic Planning, Academic Program Assessment and Review, and Service/Support Function Assessment and Review.

The model, in short, was designed to achieve an organization-wide approach to continuous improvement and the integration of essential processes. The College reports assessing the extent to which goals are met via Key Performance Indicators and specific measures for effectiveness and efficiency. In studying Category 4, the Team learned more about how this CQI model "originates and terminates with the institution's mission statement and values" and what tangible improvements have been achieved via this model.

The program and function assessment process is presented as ensuring that programs (including service/support programs) do not deviate over time from being "mission centric" after they are approved. Policy exists to ensure all degrees and certificates are appropriate to its mission, practical relevant, and "offered in a way that supports student completion and success."

LCCC has used AQIP feedback to inform major changes in its planning and leading and the assembling of a strong executive leadership team. The belief that all internal college constituencies should have active involvement in the governance of the institution through an ongoing participative process of shared governance is instantiated in policy. The College appears to be strongly focused on improving the campus climate, addressing misconduct or harassment, and making the campus a safer, more respectful environment.

CATEGORY 5

LCCC reports that it systematically uses stakeholder feedback in the form of satisfaction surveys and advisory committees to inform operational planning and process design. The Team relied on the Portfolio to more fully understand the extent of progress made since 2014 regarding assessment plans for all programs and units and the degree to which improvement opportunities identified in the 2014 Systems Appraisal have been acted upon.

Processes for sharing data and information and encouraging all units and programs to utilize peer and benchmarking data are advancing but not yet fully matured. New technologies are a great step in the right direction for making information readily available.

Budget development and approval processes are clearly depicted, as are resources for national benchmarking and the comparison of programs and functions to those of other Wyoming community colleges.   Declining enrollments make close budgetary monitoring and the use of data to inform hard budget decisions appropriate. It is notable that, despite fiscal constraints and slowly declining enrollment, the College created a campus Master Plan in 2016 and built two new buildings.

LCCC reports significant gains in the areas of protecting student and employee information and deployment of technology tools to improve access to data and service responsiveness. The College is taking steps to bolster cybersecurity but has much work remaining to meet all 30 of the standards set forth by the Federal Financial Institutions Examination Council.

CATEGORY 6

The College speaks clearly about focusing on quality in all aspects of the college. The turmoil and

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3 - Accreditation Evidence Screening Summary

Systems Appraisal teams screen the institution's Systems Portfolio evidence in relation to the Criteria for Accreditation and the Core Components. This step is designed to position the institution for success during the subsequent review to reaffirm the institution's accreditation. In order to accomplish this task, HLC has established linkages between various Process and Results questions and the Criteria's Core Components. Systems Appraisal teams have been trained to conduct a "soft review" of the Criteria/Core Components for Systems Portfolios completed in the third year of the AQIP Pathway cycle and a more robust review for Systems Portfolios completed in the seventh year. The formal review of the Criteria and Core Components for purposes of reaffirming the institution's accreditation through the comprehensive evaluation that occurs in the eighth year of the cycle, unless serious problems are identified earlier in the cycle. As part of this Systems Appraisal screening process, teams indicate whether each Core Component is "strong, clear, and well-presented," "adequate but could be improved," or "unclear or incomplete." When the Criteria and Core Components are reviewed

5 - AQIP Category Feedback

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

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

LCCC focuses on academic success through the incorporation of four general education outcomes and associated competencies in its curriculum. These four general education outcomes include *Reasoning*, *Effective Communication*, *Collaboration*, and *Human Culture*. The College uses four primary methods to ensure these general education outcomes remain relevant and aligned with student, workplace, and societal needs: (1) annual alumni survey, (2) academic program advisory committees, (3) transfer articulation agreements with partner institutions, and (4) program review. These complimentary processes are supplemented by qualitative and less formal methods, including student focus groups and interactions with local business advisory boards. In reviewing the System Portfolio, it was not clear how these informal processes were continually evaluated to ensure they are functioning as expected. Over time, trended data accrued via the formal processes listed above will help move this process into being solidly aligned.

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

The college's Student Organization Procedure outlines the process for organizing, approving, and implement

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learning competencies, faculty peer review, peer

- Uploaded Documents for Plan Results and Improvements
- Reviewer Feedback
- Program Response

To effectively evaluate the College in this area, the Team would need a summary—or examples from-- all programs.

- Comparison of results with internal targets and external benchmarks

Each of the 55 assessment plans includes internal targets for each learning competency and operational outcome; faculty assigned to the Student Learning Assessment subcommittee of the Academic Standards Council review these targets annually. Program review sections are rated on a 1-4 point scale through peer review. LCCC reports that 64% of programs included data in assessment reports, which suggests that work remains to be done in 36% of programs. Further, average peer-review scores exceeded 3.0 for all but one of the chosen metrics, which suggests an opportunity to make the peer-scoring process more rigorous or more nuanced. In addition, only 44% of programs responded to peer-review comments, which suggests the efficacy of the peer-review process could be reconsidered.

- Interpretation of assessment results and insights gained

LCCC acknowledges that the deployment of its interlocked assessment and program review processes is a work in progress. While the college's assessment planning process has been broadly deployed i.e., 96% of plans were completed, there has not been the same level of engagement with the implementation, use, and refinement of these plans. LCCC acknowledges that interpretation is lacking due to inconsistencies in the collection of data and believes that through the integration of the MCOR and other tools, improvements will occur. A need for development in "improvement of student learning," which on average is reported below target levels among the 64% of the programs that submitted assessment reports, is acknowledged. As the Campus Labs utilities, the MCOR process, and use of data deployed on dashboards increase and grow consistent across programs, the College will mature in this area.

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

Through four years of the current program review process, faculty are now beginning to design program-specific rubrics to complement the institutional competency rubrics. These program-specific rubrics will help more accurately measure student achievement within these programs. Having an Institutional Effectiveness unit helps ensure that institutional knowledge is used to guide improvements. LCCC made a huge investment by becoming part of the AACC Guided Pathways 2.0 project that requires many systemic changes over the course of their involvement. Aligning their work into academic pathways, implementing a new advising model, and providing enhanced co-curricular support systems are all a part of this work.

1.3: ACADEMIC PROGRAM DESIGN

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

Describe the processes for ensuring new and current programs meet the needs of the institution

and its diverse stakeholders. This includes, but is not limited to, descriptions of key processes for the following:

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

LCCC identifies student stakeholder groups and determines their educational needs through its onboarding process. Students are placed into one of six primary student stakeholder subgroups i.e., Credential-Seeking: Transfer, Credential-Seeking: Career, Lifelong Learning: Professional, Lifelong Learning: Enrichment, Future: Early College (Dual & Concurrent Enrollment), Future: Prospective Students). At admission and during orientation, data are collected on variables such as target population, e.g., veteran, first generation, and on objective identifiers such as ACT and GPA. These data are used to design programs and activities e.g., targeted advising, scholarships. The process of identifying student stakeholder groups is active, but maturing. The fact the College is reviewing student success technology solutions to improve this process is encouraging and will help the College move toward an aligned level of maturity. LCCC is selecting a technological system e.g., Civitas, EAB Navigate, to increase the effectiveness with which is designs and implements targeted interventions.

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

The College has identified three primary other key stakeholder groups: other educational institutions, the external community, and governmental entities. Figure 1P3-2 clearly details how input on the needs for the three main stakeholder groups is gathered. The College continues to determine these stakeholders' needs via advisory boards, accrediting bodies, and professional and community organizations. Alumni surveys provide information about how students fare after leaving the College. The College uses articulation agreements to facilitate student transfer to four-year institutions. These agreements help clarify the views external stakeholders have of LCCC. It's clear that the College works to meet other stakeholder needs; however, it is not clear that these methods are designed to generate data that can lead to better understanding. Maturing this process will entail a description of how emerging or new stakeholder groups and determining their needs, little information is provided on how they identify new "other" stakeholders.

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

The college's *Program Development and Approval Procedure* adheres to the Wyoming Community College Commission (WCCC) program criteria and establishes the process for developing programming responsive to stakeholder needs. LCCC has clear processes for documenting alignment with stakeholder needs in the creation of a new program and the review of stakeholder / program alignment during periodic program review. Both processes are well established and include identification of the stakeholder need(s), design of an intervention, e.g., program learning goal or student learning activity, to address that need, reference or external benchmarking that intervention both locally and nationally, identification of required resources, approval and implementation of the intervention. Program improvement follows the college's program assessment and review processes. Maturity in this area could be advanced by detailing how emerging or changing stakeholder needs are monitored to inform program creation or modification. The "environmental scanning" aspect of reaching maturity in this area is not described.

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

LCCC's Program Analysis and Ranking System is ambitious as it utilizes 25 Key Performance I

review of all programs and the feedback is used to drive improvements, this process promises to mature to a fully aligned level.

- Comparison of results with internal targets and external benchmarks

LCCC uses state and internal benchmarks to judge performance and progress. Data from the Wyoming community college system are used to judge LCCC in the context of its peers. Based on 2017-18 data, the College ranked first among Wyoming colleges. But this appears to be data collected by the IR unit and displayed in Tableau. The data are limited to credentials granted per year and did not include the number of students registered at the other colleges. Therefore, the comparison was not as informative as it could be. Internally, programs are rated on three variables, on a 1-5 scale. Programs with scores below 3.0 are expected to propose and implement corrective changes. As such, the institutional goal is an average > 3.0 on each of the variables. The College met its internal target for two of the three variables but fell short in Section

1.4: ECG to improve by identifying and using external benchmarks. This may occur as part of their participation in the AACC Guided Pathways 2.0 Project.

1.4: ACADEMIC PROGRAM QUALITY

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

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

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

Placement information is communicated to students through mandatory orientation and advisory sessions. The faculty use the MCOR process to specify and evaluate prerequisites for classes, so students, advisors and other faculty are aware of expectations for each class. Programs with program-specific admission standards convey this information via program brochures, the website, and the catalog. Students participate in mandatory orientation and holistic advising, so all students are reached and informed about requirements. The College recently, i.e., in 2018, completed an analysis of student success and found that the two variables, i.e., GPA, ACT and subject-based tests (ALEX for mathematics, McCann for English) are predictive of success and serve students well as guidance for placement. The College may be able to improve its maturity level by developing evaluation processes for other areas of student experiences.

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

Processes for documenting the competencies and level of achieve mpp aes

apprenticeship programs. Examinations, portfolios, demonstrations, and other program-specific methods are used to award PLA credit. When explicit transfer agreements exist, evaluation of prior learning is a straightforward process. If the prior learning was achieved in a less clearly documented fashion, LCCC uses tools such as competency exams, portfolios and demonstrations to ensure that quality standards are maintained. The process is detailed and explicit. It is unclear from the narrative if there is a procedure in place to periodically evaluate these collective processes. It may benefit the College to periodically evaluate the attainment of course outcomes across the various modalities to ensure that the process is consistent.

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

LCCC appears to have well-established processes for maintaining specialized accreditation. Specialized accreditations by external organizations e.g., in health care, provide a profession with assurance that its members are competent to meet public needs. The College currently maintains nine specialized accreditations with six related to health fields. Since the "College and Program Specialized Accreditations" table lists only those programs which hold specialized accreditation, the Team lacks context. Future reports will be strengthened by including data on which programs, if any, have specialized accreditation available but do not hold it. Further, a process for determining which programs should seek such accreditation could be described so reviewers can better evaluate performance in this area.

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

Since the last review, the College has established key continuous improvement processes, including common course assessment, annual assessment planning, academic program review, to assess outcomes attainment by graduates at all levels.As a comprehensive community college, LCCC offers transfer and CTE associate degrees and certificates. The College uses Campus Labs utilities and templates that prompt assessment using quality standards developed by the Institutional Effectiveness (IE) department. The IE staff maintains a virtual office on the myLCCC portal to offer guides and information on best practices. Tools such as common course assessment, program review and annual assessment are used to provide at least some evaluative data for each program and each course on an annual basis. Academic program review and the annual assessment cycle fit together logically to create short-term assessment cycles embedded within a longer five-year cycle. Results are reported in assessment plans, program websites, and KPIs. As these processes are fully implemented and all programs go through at least one cycle of program review, maturity in this area can move from systematic to aligned.

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

Processes for documenting the competencies and level of achievement of courses and programs are strong. The primary tool used to assess programmatic rigor is the MCOR. That tool was developed through faculty input and is implemented through the Academic Standards Committee, which is a body with strong faculty representation. As such, individual MCORs, learning assessments, and program reviews all are strongly influenced and run by faculty members. Beyond faculty, external certification bodies, advisory councils, and alumni surveys all influence tool refinement to ensure that results are informative to all relevant stakeholders. Within the Program Review Self-study is a prompt requiring faculty to evaluate rigor across all modalities. In preparation for its upcoming Comprehensive Quality Review, the College should be prepared to explain how tools specific to the online environment e.g., the LMS, collaboration tools, identity monitoring or proctoring tools, are used to monitor and ensure rigor.

What are the results for determining the quality of academic programs? The results pr uogrogr

Human subjects and animal use practices are monitored and both IRB and IACUC procedures are in place if a student research effort includes humans or animals.

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

The college's IRB reviews research protocols. Online resources guide faculty in acceptable use

integrity violations. The portfolio suggests that no academic integrity data exist before 2017-18. There are no internal or external benchmarks for academic integrity. The College intends to use the 43 violations as a base against which to compare future years. Over time, trended data garnered from Maxient will enable the College to set and strive for realistic internal targets. Doing so will help the College move forward in its quality journey.

- Interpretation of results and insights gained

The College candidly assesses its maturity level in this area by indicating that processes appear to be working reasonably well. Gathering data in this area is a challenge. The College is responding to Common Rule implementation for human subjects work by preparing training for researchers. The Office of Sponsored Awards and Compliance is taking on more work since submissions to the IRB are increasing training is conducted. As yet, no data are gathered on processes for ensuring freedom of expression. The College can see wisdom in adding qualitative data collection to its Exit survey and adding curriculum and integrity data collection to the annual survey of faculty. Implementing this work will advance it from reacting to systematic in the future.

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

Improvements in this area seem to focus on improved training for ethical conduct in research. The College intends to implement the changes identified above, i.e., deepen training available for IRB, add material to the annual faculty survey and the exit survey of graduating students. The Office of Sponsored Awards and Compliance will clarify College conflict of interest policies, and the library system will develop a uniform proctoring to ensure all students have the same experience. Working with the WDE, UW, and the other state community colleges should yield additional strategies and/or resources. An important development will be improved processes for online proctoring and the enforcement of integrity standards in the online classroom. This training is scheduled to begin in Fall 2019.

The College has a very tight system for setting core competencies, determining where in the curriculum and at what level of rigor they are addressed, and documenting these processes. Participating in AACC's Guided Pathways 2.0 Project is an indication LCCC wants to move beyond meeting minimum requirements to take a leadership role among community colleges in the state. The College is to be commended for that. The assessment of core competencies is still a work in process, partly because of refinements made during implementation and partially due to human factors, e.g., dissimilar application of rubrics among faculty. Processes related to core competencies are maturing, and the College appears to have the right processes established to bring this area to an aligned level of maturity over time. The assessment of program learning outcomes benefits from having a clear structure, but more work is needed to deploy processes in all programs. Processes for measuring, monitoring, and evaluating the effectiveness and performance of academic programs are very well developed and designed to be reciprocally supportive. The College has several processes, such as the program review template, the Program Review Rubric, the KPI Report Card, and the Academic Program Prioritization measures that support active monitoring of program productivity and viability. It is clear from the narrative that administrators, faculty, and staff have bought into principles of continuous quality improvement and are encouraged to continue down a CQI path. Overall, processes in this Category are mostly systematic. The processes not described in this Category pertain to distance education and the monitoring and assessment of instructional design and

student access to institutional resources and services.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

mission and vision of the College. In addition, external stakeholder influence over student organizations appears to be very far-reaching, so this process should be evaluated in terms of its effectiveness.

- Meeting changing student needs

To address changing student needs, LCCC invites Student Government Association officers to meet with the President's Cabinet and the College Council. The College also established a Student Veterans Task Force in spring 2018 that meets twice annually. The College makes agendas and minutes of the meetings available online. It is unclear how often minutes are posted making it difficult to determine how well the process is working. The President's written response to the March 3, 2017 Student Forum gave reviewers insight into how one part of the process functions. To further clarify the process and provide evidence of its effectiveness, LCCC could include minutes from multiple meetings that indicate student needs identified, communicated, and resolved. More details about an established and repeatable process are needed to move this to Systematic.

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

The College uses intake and advising processes to identify and support student subgroups with distinctive needs. Disability Support Services (DSS) provides reasonable accommodations related to each student's disability. Returning adult students, through the Adult Promise Scholarship, access enhanced case management focused on unique challenges, and this is a notable strength for the school. The College connects with military and veteran students through the local U.S. Air Force base, the Student Veterans Task Force, and the SVA. Specific programs also target online learners, including online orientation, tutoring, and library resources. In addition, the recently adopted LMS includes 24/7 help support and, as the standard LMS used at all educational levels in the state, it facilitates students transitioning from K-12 to higher education. LCCC could move this work to aligned by evaluating the processes for each population.

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

The College provides numerous non-academic support services to help students succeed including, but not limited to, counseling, a food pantry, housing, on-campus child care, a health clinic, wellness programs, and a new Student Hub that serves as a single point of contact for all student support services. The multi-disciplinary Campus Assessment Response and Evaluation (CARE) Team is an example of communication and support across units. This team is responsible for assessing, evaluating, and responding to reports of individuals "who present disruptive or concerning behavior." LCCC deploys non-academic support services via enrollment procedures, advising case management, best practices, and literature. To mature this work, it should be made clear the extent to which students are encouraged to make use of these services.

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

Hiring managers work with HR staff to develop position descriptions that include minimum and preferred qualifications. LCCC provides financial support in the form of professional development, in the form of employees taking courses at LCCC, tuition waivers for courses taken at UW, and tuition reimbursement housing in the

whether LCCC evaluates whether there are sufficient numbers of staff to address student services. In addition, while these processes work for new hires, it is unclear what process the College has to ensure current employees receive ongoing professional development training.

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

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

The narrative indicates the College uses statistical modeling to determine targets for retention, persistence, and completion although no example of the model is provided. The Board of Trustees also set a goal of a five percent increase in the number of credentials awarded each year through 2022. The Integrated Post-Secondary Educational Data System (IPEDS), National Community College Benchmark Project (NCCBP), CCSSEE, and the Wyoming Community College system are used as sources for external comparisons and benchmarks. It is unclear if the Board considered results of the statistical modeling to determine the five percent increase-per-year target given the 11.25% increase from 2016-17 to 2017-18 and a ten-year increase of 37.23% (as indicated in the President's 2018 State of the College Address). More information about the process can move this work to Aligned.

- Analyzing information on student retention, persistence and completion

LCCC analyzes student retention, persistence and completion data at the program level within the annual Program Analysis process and at the institutional level when updating the KPI system data. After analysis, faculty develop strategies to improve low-scoring results. During the annual State of the College address, the President shares results and analyses with the college community. In addition, a Learning Leadership Team comprised of academic and student services leaders, analyzes retention and other KPI data. It is unclear how often the CARE team conducts these analyses. The Portfolio reports that performance on each KPI is expressed in quintiles; however, such analysis would only be an intra-institutional comparison, rather than an evaluation of a goal being met. Articulating this process may improve the college's maturity level.

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

LCCC uses its academic program and service/support function review processes along with the goals and strategies in its strategic plan to meet retention, persistence and completion targets. In the case statement provided to AACC as part of the Guided Pathways 2.0 project application process, the College lists three pieces of evidence they are not meeting the promises made to students. The College is to be commended for recognizing the need to improve and for undertaking the Guided Pathways Project. Continued development of processes to address these issues will move the work to Systematic.

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

IR staff lead the selection and development of tools used for assessment. The KPI variables and tools for institution-wide assessment were selected based on best practices, national norms and input from internal college stakeholders. Variables used in the PAA, which assesses individual programs, were selected by the IR staff and collaborators from within the programs. In order to mature this work, it needs to be clear the KPIs used are reviewed periodically and evaluated for effectiveness and relevance.

What are the results for student retention, persistence and completion? The results presented should be for the processes identified in 2P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

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

Several KPI measures relevant to meeting stakeholder needs are reported and analyzed annually. These include enrollment in concurrent/dual enrollment programs, percent of students matriculating to a four-year institution within one year, workforce or CTE degrees awarded, in-field job placement rate, number of businesses served, and total participation in non-credit life enrichment courses. The College could strengthen their data by administering a survey to businesses employing LCCC graduates to determine their satisfaction with the graduates.

- Comparison of results with internal targets and external benchmarks

The most recent data supplied indicates LCCC is meeting four of seven targeted benchmarks and one of three external benchmarks. The College has an opportunity to improve in this area by conducting further analysis as trended data is accrued.

- Interpretation of results and insights gained

LCCC provides some broad observations pertaining to results related to the effectiveness of their processes for meeting stakeholder needs. More robust and germane data could be acquired via a standardized survey of advisory board members surveys and employer surveys and/or focus groups. The data collection process is early in its development and relatively little information is available to date. As data collection persists and analysis processes are refined, the college will mature in this area.

Based on 2Rled,

Because of the limited number of complaints in a single area and the inconsistent numbers year to year, LCCC has not identified systemic problems to address. The College observed that despite increasing opportunities and venues for submitting complaints, the overall number of complaints is on the decline. The College may find it useful to begin tracking informal complaints or employing different input methods, such as focus groups or discussions with student senate to better understand whether the low number of complaints is indicative of students' overall satisfaction or their unawareness of the complaint process.

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

Plans LCCC outlined in this section are appropriate steps to improve the complaint process. Recent improvements include the use of a centralized system for managing complaints and internal training to ensure greater use of the tool. Within the next three years, the College plans to strengthen and systematize the analysis of complaint information and establish internal benchmarks to monitor the effectiveness of the complaint processes. The College may also want to consider adding a question to one or more of their surveys to determine if students know how to file a complaint. That data my help the College analyze the effectiveness of complaint processes.

2.5: BUILDING COLLABORATIONS and ors?

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

LCCC varies how it measures the effectiveness of its partnerships based on the partnership outcomes. The instruments include surveys, monitoring reports, achievement of partnership milestones, and other measures as needed. However, the College does not describe the process by which it selects the measures or s

process, the College plans to update the program advisory handbook to include more direct measures of process effectiveness. The College also plans to strengthen academic program advisory processes and establish internal targets and appropriate external benchmarks to improve effectiveness in this area. The College is to be commended for recognizing these opportunities and is encouraged to find measures that will provide actionable data. The College recognizes the need to establish internal targets and identify external benchmarks to better assess partnership effectiveness.

The College is solidly systematic in its established processes for meeting student and other key stakeholder needs. These processes are embedded in key assessment activities at the College such as academic program review and functional unit assessment. LCCC has established and refined its measures to evaluate the effectiveness of partner relationships by focusing heavily on a suite of KPIs. LCCC provides academic support services to its all of its students and provides numerous non-academic support services, including counseling, a food pantry, housing, on-campus child care, a health clinic, wellness programs, and a new Student Hub. Robustness of complaint processes is a strength. Portfolio text and accompanying data show LCCC is concerned with partner relationships and seeks to improve them on multiple levels. In general, the institution is gathering and analyzing data that could inform their improvement Aral t

III - Valuing Employees

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

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

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

Evidence

CATEGORY 3: VALUING EMPLOYEES

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

3.1: HIRING

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

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

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

The College described strongly systematic and well-documented processes for recruiting, hiring, and orienting employees. These processes concur with the college's strategic vision and mission. Employees who serve on search committees undergo required training and utilize position-specific evaluation rubrics. LCCC's strategy of creating new employee cohorts to foster relationships via training modules is innovative. Sharing the rubrics used as part of these processes would demonstrate direct ties to the mission of the institution and provide evidence of a higher maturity level. If this process is conducted via an online tool or executed according to questions or values used in all academic programs, this process may already be aligned in maturity.

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

The College employs policies and procedures to ensure that instructors meet appropriate academic standards. The College has described distinct processes for credential review within respective disciplines with clear minimal credential standards for all instructors. The College evaluates high school faculty teaching concurrent enrollment (CE) courses as adjunct faculty according to the same credentialing standards; high school teachers receive specific training and professional development to ensure the student experience in CE courses mirrors that of college-level courses. Maturing this process may entail clarifying whether regular faculty have equal orientation and explaining how the College assesses the degree to which these orientation and professional development programs meet faculty needs.

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

The College identified recurring and repeatable processes for ensuring sufficient numbers of faculty to carry out both classroom and non-classroom programs and activities. Academic deans monitor student / faculty ratios and class sizes to determine need for adjunct or permanent new faculty. The College compares itself with peer institutions to help determine the number of faculty needed, and the Deans use the annual budget cycle to request resources for increases in personnel. To assist faculty to meet their non-teaching responsibilities, the VPAA has a discretionary number of release hours he/she may allocate to support various initiatives. It is neither clear what process deans use to determine if additional faculty members are needed nor how such requests are reviewed and evaluated.

involved in collecting the data and how the results are shared. These results might include:

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

The College provided summary results of several measures. More than nine of every ten applicants over the past three years met minimum qualifications. Nearly nine of every ten new employees participating in the new employee orientation rated the experience as "Excellent," which is the highest rating. Three of every four new employees found the information "highly" useful as a new employee. To move this work to aligned, LCCC needs to give specifics of who collects this information and how the results are shared.

- Comparison of results with internal targets and external benchmarks

Student-to-faculty ratios are included in the KPI report, and benchmarks are offered. The source of the data is not clearly specified. KPIs were mentioned as internal targets for adequacy of instructional and non-instructional staffing; however, only one was specifically identified: faculty-to-student ratios.

- Interpretation of results and insights gained

Based on the data, LCCC has determined iTst tith

yield very good results.

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

  LCCC has a thorough and structured (albeit, paper-based) process for emplo cess for do

The College recently switched from using the RNL College Employee Satisfaction Survey to an internally developed instrument that appears to model the RNL instrument but allows for closer focus on engagement and satisfaction. As the process is new, maturity is systematic; however, if the response rate is high, and the data is sufficiently relevant to the attributes of engagement and satisfaction, this process could rapidly mature. Future Portfolios would benefit from including a description of how the data is shared and used

What are the results for determining if evaluation processes assess employees' contributions to the institution? The results presented should be for the processes identified in 3P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

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

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

Tuition waivers are an especially attractive form of professional development, especially since this benefit extends to University of Wyoming courses. The College also hosts professional development programs for its employees and provides funding for employees to attend specialized development programs off-campus. While the Office of the President has some unspecified amount of funding available for which anyone can apply, the College does not provide solid evidence such as how much funding is available and what the breakdown of these funds are for faculty and staff. The College does not report if courses taken by employees are evaluated for their professional development or personal enrichment value. The College does not report what percentage of faculty take advantage of the CET professional development workshops.

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

The data offered for the spring 2018 Employee Experience survey do not enable reviewers to evaluate the level or extent of faculty participation in CET offerings. Earlier sections of the Portfolio describe how new faculty members are oriented and trained, but the Portfolio is silent on what methods are used to ensure senior faculty engage in ongoing development. More information could move this work to Systematic.

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

The College has the standard resources and opportunities for staff development offered by most colleges. Understanding the rate of participation among employees is difficult for reviewers as the only data provided (e.g., in Figure 3R3a-1 and a-2) report on all employees, including faculty. The "n" of respondents for the data in Figure 3R3a-1 is approximately 260, and the results are on the positive side. As this employee experience survey is repeated and trended results are accrued, staff in the CET and HR will have the information needed to make improvements.

- Aligning employee professional development activities with institutional objectives

The annual budgeting process at LCCC provides the opportunity to request funds for professional development. The president's cabinet reviews and funds professional development opportunities that arise between annual budget planning processes. Both routes require that the request demonstrate that the funds requested advance institutional objectives. The College does not yet explain how funding requests are evaluated, by whom, and according to what standards for 'alignment' with institutional objectives.

- Tracking outcomes/measures utilizing appropriate tools

The college has historically used a RNL instrument to track employee satisfaction. However, that tool was deemed insufficient for providing necessary feedback to inform meaningful decisions. In 2018, the College developed its own assessment. Future data from this more localized assessment will provide information allowing the College to make targeted investments in employee

development.

What are the results for determining if employees are assisted and supported in their professional development? The results presented should be for the processes identified in 3P3. All data presented should include the population studied, responseed d include the p

means of querying prospective employees on their values.

assessment processes) and resource allocation processes help it maximize current resources and meet future needs. Specifically, the college's strategic planning process generates several broad systematic goals that are based on fulfillment of the mission. Narrower, action-oriented goals are developed under each broad area and resources are allocated to support them. The College uses KPIs and other institutional data to support allocation decisions. As the College repeats the strategic planning process and related environmental scan and SWOT analyses during the next cycle, maturity in this process will increase.

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

The College assesses its process for assessing its strategic planning goals. First, by assessing employee experience, LCCC determines the level of engagement in, understanding of, and commitment to the strategic planning process. Secondly, through a formative evaluation process, the 2016 Strategic Plan Progress Report, the College tracks interim progress towards plan goals and strategies. Finally, LCCC uses summative strategy-specific assessments to evaluate progress towards strategic plan goals and inform the next planning cycle. As the College continues to assess its progress in meeting strategic plan goals, its maturity level will x- as

responsible for the execution. What is less clear is how the Faculty Senate functions regarding exerting faculty ownership of curricula. Afn

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use the Senate to communicate concerns, needs, and vision to the administration.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

V - Knowledge Management and Resource Stewardship

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

In this section, the team should provide a consensus narrative that focuses on the processes, resSp

closing tickets in a timely manner." In general, generalizations and interpretations cannot be offered. Increasing response rates and considering the development of

displays, shared governance structures, and public Board of Trustee meetings. The Information Technology Governance Committee manages LCCC's technological infrastructure according to an Integrated Technology Services (ITS) Strategic Plan 2017-2020, which is presented in draft form in the Portfolio. These processes considered together indicate an Aligned level of maturity. Finalizing its ITS Strategic Plan may help the College move to a more Integrated level of performance.

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

The College uses strategic planning and campus master planning to set goals consistent with the institutional mission, resources, opportunities and emerging needs. In turn, these established goals are moved into the budgeting processes for resource allocation. The 5-year cycle of program review and functional unit assessments provide direction to the college in the allocation of available resources. Keeping this process at a systematic would require providing more detail in future reporting, e.g., scoring rubrics, weighting of priorities, etc., to depict how trade-offs and allocations to meet competing needs are resolved.

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

LCCC allocates and assigns resources to achieve organizational goals through its annual budget processes and new position prioritization process. Funding proposals are made to the BPAC, which proposes allocations. These proposed allocations are vetted by the BRAC to ensure consistency with the mission and institutional priorities. The last step for vetting and prioritizing funding proposals is the College Council. The Council deliberates then sends a reviewed list of priorities to the President, who, in turn, sends the semi-final budget to the Board of Trustees. The Board makes final allocations and approves the budget.

- Tracking outcomes/measures utilizing appropriate tools

The College uses an annual customer satisfaction survey, the Colleague Financial System, the Computer Maintenance Management System, the LCCC Student Account process, and project completions to track outcomes/measures and to determine the extent to which they are successful in various areas. Completion of proposed tasks is equated with achievement of goals, and this is an indirect assessment of effectiveness. The recently implemented functional unit assessment process will provide actionable information (and mature these processes) once the 114 plans created are implemented and results are accrued. Future reporting could be enhanced by explaining who uses the results of these tracking mechanisms.

What are the results for resource management? The results presented should be for the processes identified in 5P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

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

Results from two years of Administration & Finance Division surveys indicate general satisfaction with resource management processes within the division.   Data from the Resource Management Relational Table tracks changes or improvements in budgeting, preventative maintenance, Campus Master Planning, maintaining the physical infrastructure, investments in

technology infrastructure and tools, improvements unrelated to Campus Master Planning. The Table Includes 44 'measures or results' entries, and most included internal targets and external benchmarks. The College is to be commended for these results. To further improve, LCCC might consider setting internal targets for the customer survey as they have for the Resource Management Table and then track the trends over time.

- Comparison of results with internal targets and external

how or if the College has a way of forecasting or anticipating problems.

- Managing risks t

mission, curricular outcomes, or service and support functions, identified stakeholders, and short- and long-cycle planning elements. Institutional strategic planning is six years old, while program review processes are four years old, and support-unit review processes are one year old. All areas of the College are touched by these processes. Over the next decade, and as a new strategic planning cycle is undertaken, processes in this area could mature to an aligned level.

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

The role and importance of the AQIP framework to LCCC is apparent throughout the Portfolio. As indicated in the graphic representation of the model, all CQI activities and efforts begin with a recognition of the institution's mission and vision for which the College has identified or developed specific and measurable KPIs. Two long-cycle improvement initiatives, the Guided Pathways project and creation of a review process for all support functions, are cited as examples of how the college's Continuous Improvement model plays out. Direct links between goals of the Strategic Plan and actions described in the Portfolio are very clear. The AQIP pathway used for institutional accreditation strongly influences the college's CQI processes. The Action Project Directory on the HLC website is no longer active, so it would have helped the reviewers to see a list of all Action Projects and the charges (or equivalent) given to Strategy Forum teams.

What are the results for continuous quality improvement initiatives? The results presented should be for the processes identified in 6P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared.

LCCC offers a range of significant results that demonstrate its path toward continuous improvement. The primary work completed since the last systems portfolio work centered on the design, implementation, and institutionalization of the college's CQI model. Of the descriptive statistics offered, the most significant ones (aside from the number of strategies achieved) pertain to the number of academic program review and functional unit assessment plans that have been completed. The College is justifiably proud of its work and may regard itself as approaching an integrated level of maturity; however, only six years have passed since its major reorganization effort, and the current strategic planning cycle needs to be completed—and repeated—for the College to achieve a fully aligned level of maturity. The College could improve their maturity level by providing not only how many were involved in each initiative but to what extent they meet the expected outcome.

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

The College has undertaken numerous quality initiatives over the past few years coupled with initiatives currently underway. Under development is LCCC's comprehensive and coordinated strategic enrollment management (SEM) planning process, which will identify enrollment goals in alignment with recruitment, retention, and student success strategies. LCCC joining the Guided Pathways initiative is a key quality improvement initiative. This project brings with it nationally recognized best practices. Guided assessment of Pathways work will take enrollment management processes to a higher level of maturity.

6.2: CULTURE OF QUALITY

Culture of Quality

successfully institutionalized the CQI approach in operations. While many of the processes described in the Portfolio are of recent creation or in need of repetition to be fully instantiated in campus operations, the concept and value of a CQI approach or framework promises to endure under whatever Pathway the College follows. The College is to be commended for integrating CQI principles into is organizational culture and for its commitment to contin ednde ndw Atto cort L

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

process, which is conducted every five to seven years. Strategic planning is guided through shared governance and ensures all internal stakeholders provide input.

1.A.2. Processes for developing and approving new academic programs or deploying new support services require alignment with the mission and the four foundational elements of a comprehensive community college – academic preparation, workforce development, transfer preparation, and community development. The college's established review processes – particularly, academic program review and service/support function review – ensure continued alignment with the mission.

1.A.3. LCCC has well-developed processes through which it plans, assesses institutional effectiveness, and allocates resources. Budget building and resource allocation decision making include all stakeholders, including students. Two distinct committees, Budget Resource Allocation and Budget Process Advisory committee, guide the process. Each committee uses the strategic plan and KPIs (which indicate performance) to evaluate ongoing and new budget requests. The College qe College

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No Interim Monitoring Recommended.

2 - Integrity: Ethical and Responsible Conduct

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

2.A - Core Component 2.A

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

Rating

Clear

Evidence

2.A. The College has established policies and procedures for operating financial, academic, personnel and auxiliary functions with integrity. In some areas, such as finance and human resources, best practice is well described by industry standards. In other cases, guidance is more localized, but the bounds of ethical practice are described in the procedure manual. The College offers substantial evidence of results for assessment of integrity. For example, financial audits have been supportive. The 360° evaluation of the President's Cabinet members has proved positive. The Presidential review conducted by the Board has provided support for Presidential leadership. The Human R_{sy}C

2.B - Core Component 2.B

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

Rating

Clear

Evidence

2.B. LCCC presents itself to the community through avenues such as web, print, and interpersonal communication, including portals used by employees and students to access information specific to their roles at the college. A "Consumer & Compliance Information" web page ensures all public information required under Title IV is easily located by the public.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2.C.1. and 2.C.2. The Board is the primary custodian of the college mission and, as such, it is the board's responsibility to ensure all stakeholders are supported through advancing the mission. At LCCC, the Board is seen as an autonomous actor, shepherding the mission.

2.C.3. The Board of Trustees adopts and adheres to defined governance policies with the expectation that "the President will establish and maintain effective and efficient administrative procedures to ensure the College's actions are in alignment with Board policy." Board Policy 1.2.5 provides overall oversight responsibilities of the Board that include fiscal management, organizational decision-making and legislative requirements. The Board provides oversight for and has its own policies regarding ethics and conflicts of interest.

2.C.4. The Board of Trustees governs the institution and provides direction through established policies as indicated by Policy 1.1.1 which begins with an unambiguous and detailed statement of 'governance philosophy.' This statement clearly commits the College to serving the purposes that make up the four pillars of a community college's value proposition. The Board expectation is the President will lead the creation and implementation of administrative procedures aligning with these board policies. Through presidential leadership, the College uses an established shared governance model – the College Council – for the development of policies and procedures. Policy 1.1.7 clearly delegates to the President "executive responsibility for administering the policies adopted by the Board and executing all decisions of the Board requiring administrative action." This process also allows the President to further delegate responsibilities entrusted in the position; however, the President remains specifically responsible for the execution.

Evidence for 2.C.4. could be strengthened by detailing what structures, policies, and processes exist to ensure faculty oversight of academic matters and the role of the Faculty Senate in governance.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2.D - Core Component 2.D

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

Rating

Clear

Evidence

2.D. The College has a definition of academic freedom that is communicated through the college Catalog, student handbook, and institutional procedures. Integrity standards are set by the Student Code of Conduct and statement of Student Rights and Responsibilities.

Students are subject to adjudication and disciplinary procedures if a breach of academic integrity is alleged. Faculty use tools such as TurnItIn to screen for plagiarism. The college employs the Respondus LockDown Browser to prevent students from accessing restricted information from electronic sources during online assessments.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

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

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

3.A - Core Component 3.A

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

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

Rating

Adequate

Evidence

3.A.1.

3.B - Core Component 3.B

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

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

Rating

Clear

Evidence

3.B.1. LCCC connects the learning outcomes for general education and institutional competencies to its mission, educational offerings, and degree levels using two related procedures: the General Education Procedure and the Master Course Outline of Record (MCOR). General Education Procedure outlines the process to ensure that expectations are clearly articulated. The MCOR establishes connections between courses, course competencies, and the assessment of competencies.

3.B.2. LCCC ensures that it core outcomes are relatable to the skills required for graduate success. The college has a clear process through which proposed courses are vetted to ensure alignment with the institutional mission and programmatic objectives. The Academic Standards Committee (ASC) reviews the Master Course Outline of Record to monitor the content and relevance of all courses, including those in the core curriculum.

3.B.3. LCCC, through the general education core, ensures that all students are provided a foundation for achieving core outcomes. In addition, degree-seeking students build on this foundation through program-specific courses which reinforce the knowledge and skills gained through the general education core.

3.B.4. LCCC focuses on academic success through the incorporation of four general education outcomes and associated competencies in its curriculum. These four general education outcomes include Reasoning, Effective Communication, Collaboration, and Human Culture. The latter outcome includes a focus on diversity. The college uses four primary methods to link its general education outcomes with the april eludutional m nd degr)

3.C - Core Component 3.C

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

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

Rating

Adequate

Evidence

3.C.1. The College identified recurring and repeatable processes for ensuring sufficient numbers of faculty to carry out both classroom and non-classroom programs and activities. Academic deans monitor student / faculty ratios and class sizes to determine need for adjunct or permanent new faculty. The College compares itself with peer institutions to help determine the number of faculty needed, and the Deans use the annual budget cycle to request resources for increases in personnel. A comparative analysis is conducted on faculty numbers and peer institutions benchmarks of faculty numbers regularly. To assist faculty to meet their non-teaching responsibilities, the VPAA has a discretionary number of release hours to allocate for support various initiatives.

3.C.2. To ensure that all instructors are properly qualified, interview procedures, education and reference checks, and onboarding/orientation is required. The College uses distinct processes for credential review within respective disciplines with clear minimal credential standards for all instructors. Credentialing standards are monitored by the Academic Leadership Team. The College also evaluates high school faculty teaching concurrent enrollment (CE) courses as adjunct faculty according to the same credentialing standards.

3.C.3. LCCC has an established policy and procedure outlined in the Employee Evaluation Procedure for regular evaluation of faculty, staff, and administrators. Deans evaluate

instructio

3.D - Core Component 3.D

The institution provides support for student learning and effective teaching.

1. The institution provides student support services suited to the needs of its student populations.
2. The institution provides for learning support and preparatory instruction to address the academic needs of its students. It has a process for directing entering students to courses and programs for which the students are adequately prepared.
3. The institution provides academic advising suited to its programs and the needs of its students.
4. The institution provides to students and instructors the infrastructure and resources necessary to support effective teaching and learning (technological infrastructure, scientific laboratories, libra igg

3.D.1. The Portfolio provides ample evidence of campus-wide efforts to identify and address student support needs. The Learning Commons system provides a range of resources to students, including meeting the needs of on-line only students. LCCC has a technology support program and a Center for Excellence in Teaching, both of which provide faculty with structured (e.g., First Year support) and as-needed support.

3.D.2. The College provides numerous non-academic support services to help students succeed including, but not limited to, counseling, a food pantry, housing, on-campus child care, a health clinic, wellness programs, and a new Student Hub – "a single point of contact for current and prospective students to access information on support services available." The multi-disciplinary Campus Assessment Response and Evaluation (CARE) Team is an example of cross-communicative support. This team is responsible for assessing, evaluating, and responding to reports of individuals "who present disruptive or concerning behavior." LCCC uses a variety of processes and methods to deploy non-academic support services. These include enrollment procedures, advising case management, best practices, and literature.

3.D.2. and 3.D.3. Students participate in mandatory orientation and holistic advising, so all students are reached and informed about requirements. The College recently, i.e., in 2018, completed an analysis of student success and found that the two variables, i.e., GPA, ACT and subject-based tests (ALEX for mathematics, McCann for English) are predictive of success and serve students well as guidance for placement. Developmental students in English may take a developmental course along with a college-level composition course thanks to a recently implemented co-requisite model.

3.D.3. Each student meets with his/her advisor prior to registration and a survey is used to assess student satisfaction with that process. Faculty feedback is provided through mid-term grade reporting and reporting on individual student concerns (housing, food insecurity, family issues, etc.) that affect learning. Grades are shared with students and advisors are notified of grades and other issues.

3.D.5. Guidance regarding the ethical use of information is clearly conveyed to students through the Student Code of Conduct and a Student Rights and Responsibilities statement included in all syllabi. Course syllabi also contain statements about academic responsibility and describe both the practices expected of students and the practices that are followed if student performance is called into question. The LCCC library system offers guidance on plagiarism and proper use of sources.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

apprenticeship programs. Examinations, portfolios, demonstrations, and other program-specific methods are used to award PLA credit.

4.A.4. Placement information is communicated to students through mandatory orientation and advisory sessions. The faculty use the MCOR process to specify and evaluate prerequisites for classes, so students, advisors and other faculty are aware of expectations for all courses. Programs with program-specific admission standards convey this information via program brochures, the website, and the catalog. Evidence is provided to show the College documents the competencies and level of achievement of courses and programs. The College is accredited by the National Center for Concurrent Enrollment Partnerships which requires all members to meet standards related to their Partnerships, Faculty, Assessment, Curriculum, Students, and Evaluation.

4.A.5. LCCC appears to have well-established processes for maintaining specialized accreditation. The College currently maintains nine specialized accreditations with six related to health fields. Evidence for this Core Component could be strengthened by stating which programs, if any, have specialized accreditation available but do not hold it.

4.A.6. The College employs a graduation exit survey, an alumni survey, and advisory committees for all programs to monitor the degree to which the curriculum meets the needs of students and employers. For health sciences programs that prepare students for licensure or certification, pass rates are tracked.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4.B - Core Component 4.B

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

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

Rating

Clear

Evidence

4.B.1. Through an established campus-wide and faculty-driven process, LCCC determines common outcomes relatable to the skills required for graduate success. The college has a clear process through which proposed courses are vetted and that process ensures compliance with institutional mission as well as individual programmatic objectives.

4.B.2. The college uses a variety of methods to assess common learning outcomes. Data are collected and analyzed each semester and evidence of student performance is provided at the course level. These results are also aggregated at the institutional level and reported annually by the college. After faculty upload assessment results into the college's learning management system (LMS), IR staff analyze the data and provide course-level evidence to faculty and administrators using Tableau and data aggregated at the institutional level in the college's annual KPI Report Card. The college also gathers indirect measures of student learning outcomes through an annual alumni survey and the Graduate Exit survey

4.B.2. Assessment plans exist for co-curricular programs, but evidence that the College assesses the achievement of the learning outcomes of its co-curricular offerings needs to be provided to confirm the meeting of Core Component 4.B.2.

4.B.3. The program review process has functioned for four years, and faculty are making progress on designing program-specific rubrics to complement institutional competency rubrics.

The College has created an Institutional Effectiveness unit helps ensure that institutional knowledge since its last review. Strong evidence of emulating best practices and garnering wide participation in assessment and curricular review can be seen in the institution's participation in the AACC Guided Pathways 2.0 project.

4.B.4. The Academic Standards Committee (ASC) utilizes the MCOR to make determinations about all courses and alignment from purpose to outcome. The college has a clear process through which proposed courses are vetted and that process ensures compliance with institutional mission as well as individual programmatic objectives.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4.C - Core Component 4.C

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

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

Rating

Clear

Evidence

4.C.1. and 4.C.2. The College uses statistical modeling to determine targets for retention, persistence and completion. The Board of Trustees set a goal of a five percent increase each year through 2022 in the number of credentials the College awards. The Integrated Post-Secondary Educational Data System (IPEDS), National Community College Benchmark Project (NCCBP), CCSSEE, and the Wyoming Community College system are used as sources for external comparisons and benchmarks.

4.C.3. Evidence of LCCC's use of data to inform improvements in persistence and retention is seen in the college's commitment to the AACC's Guided Pathways 2.0 Project. The College has already implemented many of the initiatives of that project including placing a cap on the total number of hours programs require, mandating advising and orientation, ending late registration, and evaluating support services. The IR staff developed a Tableau dashboard providing all stakeholders with a wealth of data on which to inform decisions. Other changes including curriculum overhaul and mandatory holistic advising have helped to contribute to the on-going improvement of student retention and success The College is analyzing its data and asking appropriate questions.

4.C.4. LCCC set specific persistence, retention, and completion measures in their KPI system and uses the Program Annual Analysis (PPA) to determine the health of its academic programs. The KPI system includes "setting of performance indicators and associated measures that focus on institutional-level effectiveness outcomes, including specific persistence/retention and completion measures." The PAA method determines the health of the college's academic programs. The Office of Institutional Research extracts and analyzes the data and communicates results to the College.

5.A.1. Th

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No Interim Monitoring Recommended.

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Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5.D - Core Component 5.D

The institution works systematically to improve its performance.

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

Rating

Clear

Evidence

5.D.1. A culture of disciplined, evidenced-informed decision-making; strategic allocation of resources; and clearly articulated quality improvement processes have been developed since the college's xegh ¶ x   ¶ x   ¶ x   l

Review Dashboard

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Review Summary

Conclusion

No interim monitoring is called for. The College has adequate time to address and strengthen those items of evidence noted as being 'adequate but could be improved.'

While the CQR team makes a recommendation to the Commission regarding a Pathway for the College, the team regards the College as being ready to select either Pathway.

Overall Recommendations

Criteria For Accreditation
Adequate

Sanctions Recommendation
Not Set

Pathways Recommendation
Not Set