CHAPTER 1: INSTITUTIONAL EFFECTIVENESS

Functional Lead: Vice President for Operations and Plans
Directorate: Institutional Research, Assessment, and Planning

Section 1.a General

1. Introduction. The Vice President for Operations and Plans (VPOP) is responsible for overseeing the design and conduct of an integrated approach to Institutional Effectiveness (IE) across the Marine Corps University (MCU)/Education Command (EDCOM) enterprise. The Director, Institutional Research, Assessment, and Planning (IRAP) executes this responsibility on behalf of VPOP. This chapter provides an overview of the University's IE program – how MCU seeks to integrate data collection, analysis, and decision-making at all levels of the institution.

2. IE Model. The *raison d'être* of an effective IE model is to harness the insights gained through assessments in order to identify improvement opportunities and inform decision-making. The IE model is a continuous cycle of planning, execution, assessment, and improvement that occurs at all levels (Figure 1.1). Critical to this closed loop process is the use of information collected to inform and enact improvement. Key steps and standards associated with implementing this model (i.e., the IE process) are detailed in Section 1.b.
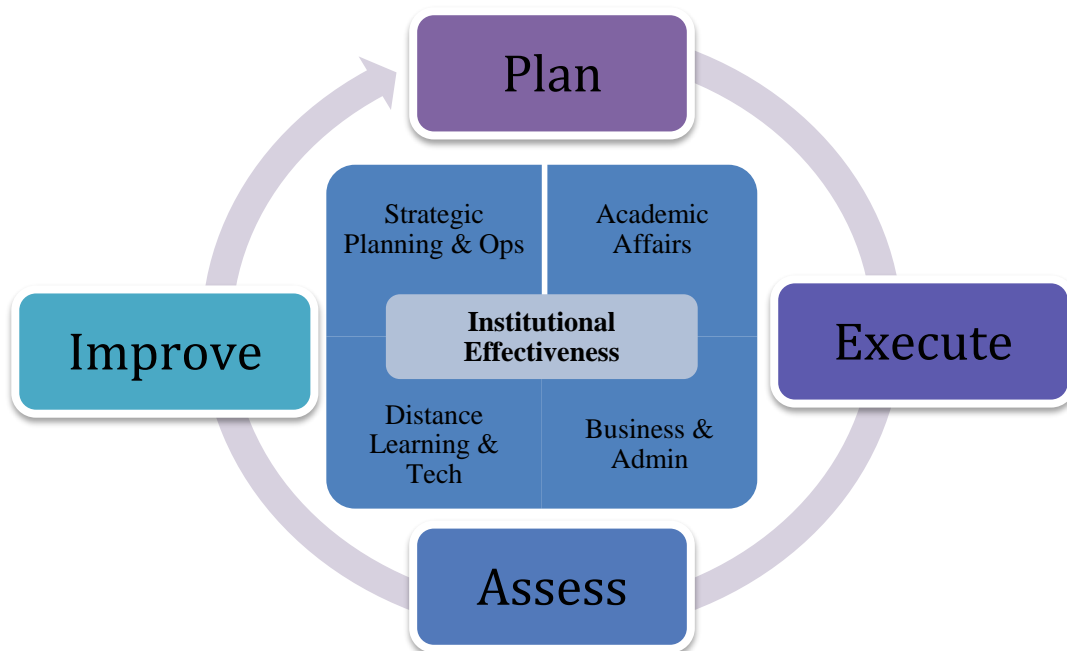

Figure 1.1: MCU Institutional Effectiveness Model

3. Levels of Assessment. The IE model and process are conducted at all levels of the institution (Figure 1.2). Different assessment levels consider different questions about quality and practice that focus on their particular unit of analysis (course, activity, program, etc.). Given the institutional diversity of MCU, activities span not only formal classroom instruction, but informal learning, distance learning, and experiential opportunities (e.g., Museum PMEs and visits, staff rides, wargames). As a nested effort, each level informs the next. Aggregate

performance at the course- or activity-level combines with other indicators to facilitate program/unit assessment. In other words, course performance informs the assessment of an overall academic program, just as a unit considers the quality of all its major functions in order to assess its overall effectiveness. Each level also differs in terms of tempo and governance processes.

	Course/Activity	Program/Unit	Institution
Review & Decision	Course Content Review Boards After Actions	Director's IE Reports (Unit-Specific Outcomes)	President's Planning Council Strategic Plan Review Curriculum Review Board
Areas of Consideration (Examples)	Assignments Engagement Topics/Preparatory Materials Delivery Approaches	Unit Outcome & Mission Achievement Program Design/ Curricular Coverage Key Assignments/ Activities	Institutional Goals & Mission Quality of Teaching & Learning Environment Institutional Policies, Processes & Resourcing Decisions
Authority/ Timing	**Director/ Frequent & Ongoing**		**Commanding General/ Scheduled & Deliberate**

Figure 1.2: Levels of Assessment

4. Organization. The chapter is organized into three additional sections. Section 1.b provides an overview of the policies and procedures that make up the IE review process and that inform decision-making with evidence regarding institutional performance. Section 1.c establishes the policy and procedures for the IE Working Group (IEWG), a cross-cutting body that informs and integrates the needs of MCU stakeholders at all levels into IE practice. Finally, Section 1.d highlights both timing and purpose of these major institutional review cycles and efforts for their integration.

Appendices
1.b.1 MCU Four-Column Matrix Guide
1.b.2 Directors' IE Plan and IE Report Checklists
1.b.3 Common Unit-Level Measures and Metrics
1.b.4 MCU Core Effectiveness Outcomes
1.d.1 Annual Reporting Schedule

Section 1.b Institutional Effectiveness

Functional Lead: Vice President for Operations and Plans
Directorate: Institutional Research, Assessment, and Planning

Reference: (a) [SACSCOC Principles of Accreditation (Principle 7)](#)
          (b) [SACSCOC Principles of Accreditation (Principle 8.1)](#)
          (c) [SACSCOC Principles of Accreditation (Principle 8.2)](#)
          (d) [CJCSI 1801.F Officer Professional Military Education Policy](#)

Appendix: (1) MCU Four-Column Matrix Guide
         (2) Directors' IE Plan and IE Report Checklists
         (3) Common Unit-Level Measures and Metrics
         (4) MCU Core Effectiveness Outcomes

1. <u>Purpose</u>. This document articulates the guidelines and procedures for evaluating Institutional Effectiveness (IE) at Marine Corps University (MCU).

2. <u>Overview</u>. As outlined in references (a) through (c), The Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) has high expectations regarding the quality of institutional planning, effectiveness, and decision-making processes. Specifically:

> Effective institutions demonstrate a commitment to principles of continuous improvement, based on a systematic and documented process of assessing institutional performance with respect to mission in all aspects of the institution. An institutional planning and effectiveness process involves all programs, services, and constituencies; is linked to the decision-making process at all levels; and provides a sound basis for budgetary decisions and resource allocations (The Principles of Accreditation, December 2017, p. 19).

Consistent with these expectations, the MCU IE model integrates assessment and evaluation of institutional performance with planning and budgeting activities at all levels of the organization. It is a continual process of planning, execution, assessment, and improvement. Through this process, IE supports the mission, vision, purposes, and goals of MCU to enhance the quality of education. The information obtained through the IE process is valuable for MCU accountability to higher headquarters, the Board of Visitors (BOV), and accreditation organizations such as SACSCOC, among others. The MCU IE process is also critical to maintaining required certifications within the Chairman of the Joint Chiefs of Staff's Process for Accrediting Joint Education (PAJE) process (reference (d)).
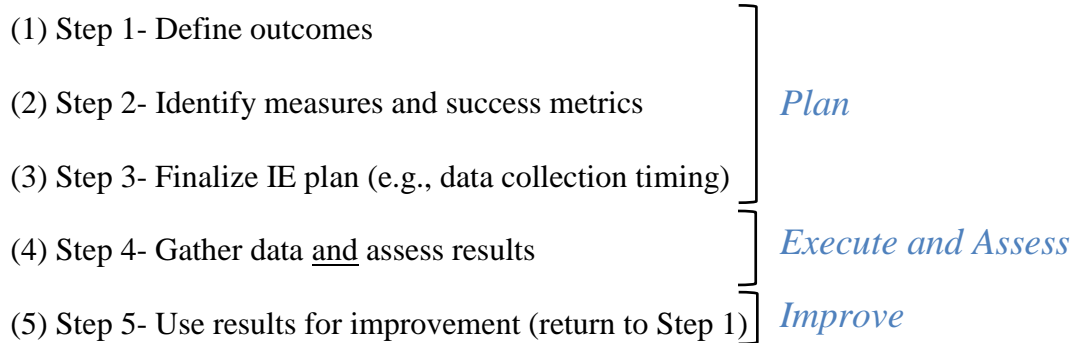
3. <u>Policy</u>

    a. Scope. This policy applies to all units and schoolhouses and is aligned with reporting requirements for MCU's civilian and military accreditation bodies. Consequently, the process supports both educational (e.g., SACSCOC) and professional accreditation requirements (e.g., American Alliance of Museums).

    b. IE Overview. The MCU IE process integrates the methods and approaches for assessment, planning and budgeting - the critical components to achievement of educational goals. Through rigorous documentation, the approach also fulfills the University's commitment

to standards of professional accreditation of academic programs and regional accreditation organizations.

    c.   The IE Model and MCU IE Process. The IE model is a continuous cycle of planning, execution, assessment, and improvement. The model is implemented through a five-step IE process.

        (1) Step 1- Define outcomes

        (2) Step 2- Identify measures and success metrics   *Plan*

        (3) Step 3- Finalize IE plan (e.g., data collection timing)

        (4) Step 4- Gather data <u>and</u> assess results   *Execute and Assess*

        (5) Step 5- Use results for improvement (return to Step 1) *Improve*

This process emphasizes the importance of the planning phase to ensure assessment information is valid and meaningful for decision-making. As data is collected, execution and assessment occur simultaneously. This overlap makes systematic documentation especially critical. Finally, use of results to inform decision-making remains the centerpiece of the MCU IE Process. As depicted in Figure 1.3, this five-step model provides the critical information needed by leaders to evaluate performance and identify areas for improvement.
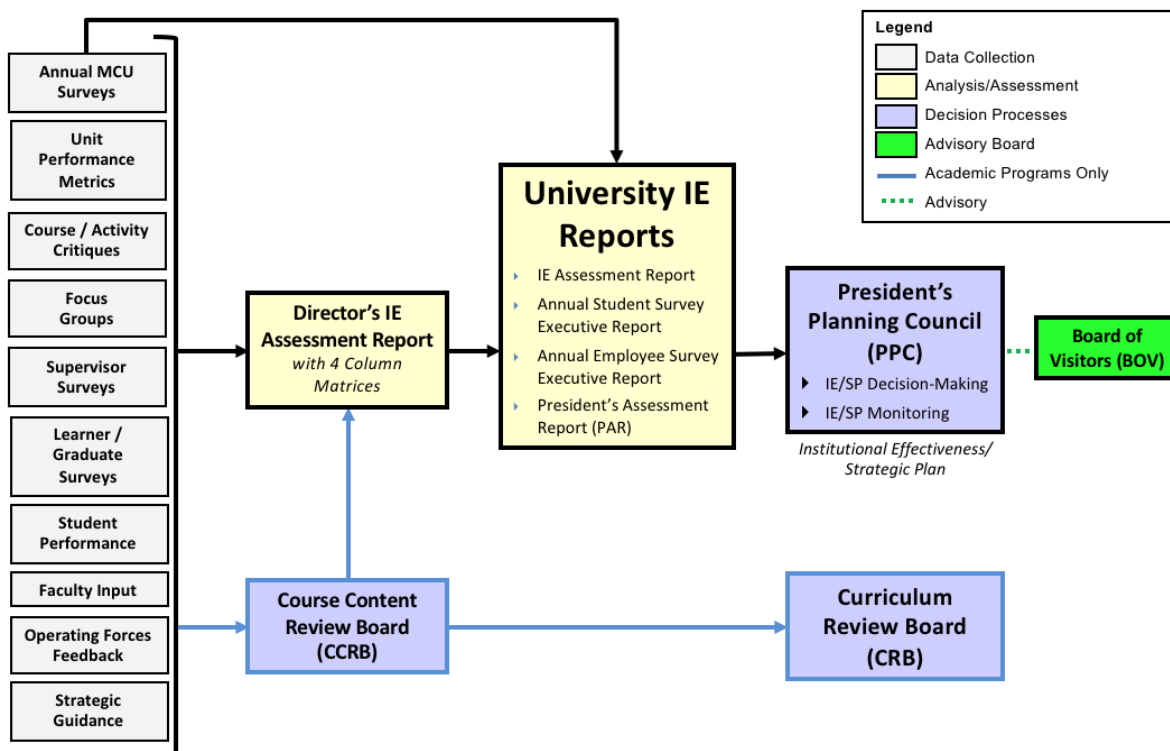

Figure 1.3: MCU Institutional Effectiveness Process

Both unit- and university-level reviews consider a wide range of data sources in their self-evaluations. Data collection and assessment are ongoing at the unit-level throughout the academic year, including evaluation of each component's unique functions, activities, and/or curriculum. Information, results, and recommendations from unit level reviews are documented and used to inform annual and biennial institutional review processes. At the University level, additional data collection and analyses focus on institutional goals and objectives to examine overall effectiveness. Information, results, and recommendations from these unit-level reviews are documented and used to inform annual and biennial institutional reviews. The IE process at the institutional level is also overseen and monitored during the academic year by key university-level groups including the IE Working Group (IEWG) and the President's Planning Council (PPC), the principal governing and decision-making body for those critical topics that impact the command's ability to achieve its vision and accomplish the mission (Chapter 9).

    d.   Unit-Level IE Review

       (1) Reporting Tool. Unit-level IE reviews are conducted using the University's Four-Column Matrix (4CM) reporting tool. The 4CM facilitates planning and provides an effective framework for documenting data analysis and decision-making. IE Planning is documented in Columns 1 (Outcomes) and 2 (Measures). IE reporting, to include data analysis and subsequent decision-making, is then captured at the end of the review period in Columns 3 (Performance Results) and 4 (Use of Results). See Appendix 1.b.1 for the Four-Column Matrix Guide and Appendix 1.b.2 for the Directors' IE Plan and IE Report Checklists. Each unit's 4CM, and subsequent self-evaluation, is tailored to its unique mission and functions.

       (2) Step 1: Define Unit-Level Outcomes (Column 1). A unit's outcomes capture its primary functions, activities, and impacts on MCU and key stakeholders. Depending upon its mission, a unit will have some combination of the following types of outcomes:

       (a) Learning Outcomes: These outcomes describe what learners should be able to think, know, or do as a result of their educational experience. They may also include the affective domain (e.g., attitudes, values, interests). Learning outcomes are required for academic programs and strongly encouraged for other units, as appropriate (e.g., academic and student support services). At a minimum, learning outcomes for formal academic programs are reviewed biennially at Curriculum Review Boards (CRBs) (MCU Academic Regulations: Curriculum Review Process). All other learning outcomes are reviewed as part of the annual outcome review process.

       (b) Performance Outcomes: These outcomes describe the quality of the major functions provided by a unit (customer satisfaction, quality or timeliness of product or process, etc.). They address how well a unit is fulfilling its mission and do not have a yes/no response. These outcomes are reviewed as part of the annual outcome review process (Step 3).

       (c) Task Outcomes: These outcomes describe completion or progress related to a particular action (i.e., task) that supports the broader functions of a unit, but requires particular attention or awareness at the university level. They typically have a yes/no indicator, and should be used sparingly. These outcomes are reviewed as part of the annual outcome review process (Step 3).

       (3) Step 2: Identify Unit-Level Measures and Success Metrics (Column 2).

(a) Unit-Level Measures. Each organization must determine what types of measures will be used to assess their outcomes. Measures should ensure representation of a variety of stakeholders. They should also be chosen and refined to discreetly assess each outcome, using direct and indirect sources. Direct measures are tangible, observable evidence. Direct measures of student learning examine student work, while direct measures of performance examine usage, processing time, and other quantitative elements (e.g., enrollment data). Indirect measures capture perceptions and attitudes. For both learning and performance, indirect measures are gathered through self-reporting methods like surveys, focus groups, and interviews. Wherever possible, IE plans should use multiple measures and a combination of indirect and direct measures to allow for more complete analysis. Learning outcomes should be supported by at least one direct measure. See Appendix 1.b.3 for common unit-level measures and metrics.

(b) Determining a Threshold/Metric for Success. Determining a threshold for satisfactory performance on, or progress toward, an outcome is a critical component of IE. As appropriate, units may use MCU's basic thresholds for certain types of measures. The MCU standard of achievement for learning outcomes is at or above 80% meeting or exceeding satisfactory performance level. The standard of achievement for academic and institutional outcomes in surveys is at or above 80% respond positively (agree or strongly agree). Alternatively, units may benchmark improvement against prior performance on that objective, so long as it is precisely defined. Other benchmarks may be determined by the measure chosen (e.g., test guide), external policy, or particular unit-level expertise. Regardless, the threshold and its underlying justification should be specified in the unit's IE plan (Appendix 1.b.3).

(4) Step 3: Finalize IE Plan

(a) IE Plan elements. MCU units each need a clear plan of action and timeline to execute their IE plans, specifying when and how data collection will occur and by whom. Units submit performance and task outcomes (column 1) and measures (column 2) as an IE Plan to Institutional Research, Assessment, and Planning (IRAP) in August prior to the start of the academic year. Learning outcomes for formal and informal academic programs may be submitted in July as a component of the final IE report. After determining outcomes and measures, the unit must schedule data collection to best coincide with their internal decision-making and the broader University's general reporting schedule (See Section 1.d). Data is gathered throughout the year and often used to inform in-stride adjustments, including adjustments to the IE plan. At the end of the planning phase, IRAP should have a copy of each unit's IE Plan for performance and task outcomes, and a specific timeline for data collection and analysis requirements over the course of the year.

(b) Annual Outcome Review Process and Approvals. All learning outcomes and assessment plans for formal academic programs are reviewed and approved by the MCU President as part of the MCU Curriculum Review process on a biennial basis (MCU Academic Regulations: Curriculum Review Process). All other unit outcomes are reviewed and revised by unit directors annually and documented in the IE Plan. Vice Presidents review and approve IE plans for units within their purview prior to submission to IRAP. Director IRAP then reviews them for consistency with established requirements. These performance and task outcomes are also reviewed by the IEWG as a component of their annual, holistic outcomes review process.

(5) Step 4: Gather data and assess unit-level results. Data collection and analysis should be timed throughout the academic year to inform Course Content Review Boards (CCRBs) and other internal unit review processes. Within academic programs, faculty are responsible for executing the curriculum and learning outcomes approved at the biennial CRB, and for using assessment feedback as it becomes available to improve or revise courses and curriculum delivery. Analytical approaches will vary depending on the type of data collected. IRAP provides quantitative and thematic analyses for surveys and focus groups, but units must review and reflect on both the data and reports to make data actionable. Questions and guidance for framing this analysis are available in Appendix 1.b.2.

(6) Step 5: Reporting Unit IE Improvements. At the unit-level, an IE report is composed of the complete 4CM and a Director's IE Report.

(a) Director's IE Report. The Director's IE Report provides a strategic overview of the strengths, weaknesses, opportunities, and gaps relative to the unit's outcomes and mission. It also serves as the primary vehicle used to record policy changes, curriculum modifications, and other decisions that impact an organization. The Director's Report Template is reviewed annually by the IEWG.

(b) Substantiating Documentation. The 4CM is the basic substantiating documentation for the Director's Report, in which all results and interpretations of all assessment tools are documented and reported. Organizations may enhance IE Reports with additional supporting documents as appropriate to their roles and functions. Documentation of IE proceedings is a critical component of the process, ensuring accountability and utility for decision makers. Accrediting organizations require evidence that the framework of assessment is in place and operating effectively.

e. University-Level IE Review. Information, results, and recommendations from unit-level reviews are documented and used to inform annual and biennial institutional review processes. At the University level, additional data collection and analyses focus on institutional goals and objectives to examine overall effectiveness.

(1) Step 1: Define Institutional Outcomes. The University employs a mixture of learning, performance, and task outcomes to capture student learning (SACSCOC Principle 8.2), student achievement (SACSCOC, Principle 8.1), and other important aspects regarding the quality of the University's educational programs, learning environment, and support services. To this end, the University examines a core set of effectiveness outcomes each year that contribute to a picture of institutional-level IE. Aligned to the MCU Strategic Plan (STRATPLAN) goals, these outcomes are reviewed on an annual basis by the IEWG to ensure they are comprehensive and relevant, as well as compliant with accreditation standards. See the University's core effectiveness outcomes at Appendix 1.b.4.

(2) Step 2: Institutional IE Measures. To the fullest extent possible, the University makes use of assessment data and analyses produced at the unit level to inform its holistic evaluation. This ensures continuity across different decision-making levels, and helps maximize the utility of the data being collected. In addition to examining the common measures used at the unit level in aggregate, University IE particularly relies on the following measures and standards:

(a) Annual MCU Employee Survey. The Annual MCU Employee Survey is a critical mechanism for soliciting feedback on the quality of the MCU environment and support services. The survey examines University performance across eight categories: job satisfaction, organizational strength, professional development, manager/supervisor performance, communication, academic program quality, the Quality Enhancement Plan (QEP), and the quality of support services. Standard: The MCU standard for surveys is 80% positive agreement (agree or strongly agree).

(b) Annual Student Survey. Students provide survey feedback at the end of their program in an Annual Student Survey. The Annual Student Survey examines University performance across five major categories: core learning areas, academic programs, faculty, University experience, and quality of student support services. Standard: The MCU standard for surveys is 80% positive agreement (agree or strongly agree).

(c) Graduate and Supervisor Surveys (Indirect). IRAP administers graduate and supervisor surveys at key intervals after graduation to assess the relevance of the curriculum and graduate preparedness (knowledge and skills) for follow-on assignments. Generally, this occurs 18 months after graduation. Standard: The MCU standard for surveys is 80% positive agreement (agree or strongly agree).

(d) Director's Reports and 4CMs (Direct). Directors' Reports certify the end of the annual unit level IE review process, analyzing the degree to which learning and operational outcomes were achieved. Additionally, each report identifies challenges or opportunities for University awareness and action. These provide both quantitative- and qualitative-based insights into institutional performance. Standard: Outcomes are examined according to the percentage that met the intended threshold. Any areas that do not meet the intended threshold are examined thematically. Rather than compared to a common standard, themes drawn from the Director's narratives are used to inform analysis of other data.

(e) Qualitative Program Evaluation (QPE) (Indirect). Beginning with fiscal year 2021, MCU conducts interviews and focus groups with graduates and their supervisors each year in order to assess the relevance of the curriculum and graduate preparedness (knowledge and skills) for follow-on assignments. Additionally, these engagements revalidate the changing needs of the operating force, helping MCU programs to better meet the needs of today's operators. Standard: Rather than compared to a common standard, themes drawn from interviews are used to inform analysis of other data.

(3) Step 3: Institutional IE Plan of Action. Under the authority of Vice President Operations and Plans (VPOP), Director IRAP is responsible for oversight and management of the institutional IE plan of action and the institutional milestones. This includes design and publication of reporting templates, selection of university-level measures, as well as oversight of the collection of institutional IE data. IRAP maintains all unit and institutional data, and conducts institutional-level analyses. To the greatest extent possible, the institutional IE reporting calendar is harmonized with other reporting processes and key decision points at both the unit and institutional level, including CCRBs, CRBs, and PPC meetings. IE is a collaborative process. IRAP is responsible for engaging all members of the MCU community – students, faculty, staff, administrators, BOV, operating forces – in a participatory IE model supporting the commitment

to continuous improvement. To this end, institutional level IE is also overseen by the PPC (Chapter 9), and is monitored quarterly by the cross-functional IEWG.

(4) Step 4: Institutional IE Assessment. IRAP compiles and analyzes institutional data from annual surveys, enrollment and personnel data, and Director's IE Reports. Results, and associated recommendations, are synthesized into various reports for leadership across the institution. University Annual Reports provide deep dives into results of specific data sources, including trends over time. Each report addresses a particular aspect of IE:

(a) MCU Fact Book. This annual publication documents enrollments, missions, faculty assignments and credentials. The MCU Fact Book is available on the MCU website.

(b) Institutional Effectiveness Assessment Report (IEAR). This report consolidates the Directors' Reports from all units and provides an executive summary of achievements and areas for improvement related to learning and operational outcomes. The report also documents the completion of unit level IE review and identifies key themes for consideration in the President's Assessment Report.

(c) Annual Student Survey Executive Report. This report provides an executive summary of the strengths and weaknesses of MCU academic programs and University support services from the student perspective. The full report provides a quantitative breakdown of program performance, as well as a trend analysis. In addition to analyzing the survey categories, IRAP conducts thematic analyses on particular areas of interest, including high priority initiatives and problem areas highlighted by prior and current survey feedback. The report also identifies key themes for consideration in the President's Assessment Report.

(d) Annual Employee Survey Executive Report. This report provides an executive summary of the strengths and weaknesses of MCU academic programs and institutional support services from the faculty and staff perspective. The full report provides a quantitative breakdown of program performance, as well as a trend analysis. Open-ended responses are summarized thematically. The report also identifies key themes for consideration in the President's Assessment Report (PAR).

(e) President's Assessment Report. The PAR provides a holistic perspective of the feedback received in a given year, synthesizing all annual IE reporting into one document that identifies institutional-level opportunities to foster and effect improvement across the Command. This report also provides a bridge between the IE and Strategic Planning processes by highlighting links between current organizational health and long-term goals. Each theme highlighted by the PAR is accompanied by recommendations for consideration by the MCU President.

(5) Step 5: Institutional Use of IE Results for Improvement (Column 4). The analyses and recommendations contained in the University IE reports are widely released. Following a brief to the MCU President to attain any additional guidance, results are discussed at a STRATPLAN Goal Lead Integration Meeting for incorporation into the annual STRATPLAN Executive Report (SPER) and its associated recommendations for the upcoming year. Both the PAR and the SPER recommendations are then briefed to a Winter PPC meeting. Approved recommendations become tasks which are assigned to the appropriate lead. Task leads provide

progress updates at subsequent PPC meetings. Progress on PAR-related actions is also synthesized in an Annual IE Progress Report that is distributed by Director, IRAP.

    f.   Responsibilities. As IE is an institution-wide process, all MCU stakeholders have some responsibility for participation in IE review; however, IE is ultimately the commander's process. The MCU President oversees the process and issues guidance and makes decisions in response to IE findings and recommendations. At the direction of the MCU President, VPOP leads the IE process for the University, to include monitoring IE execution within the context of the PPC. Particular responsibilities for the design, administration, and management of the IE process are vested in those listed below:

        (1) IRAP. Operating under the authority of VPOP, the Director, IRAP is responsible for the systematic collection, analysis and dissemination of information supporting institutional effectiveness. Per its mission, IRAP serves as a resource for the ongoing collection of information supporting systematic assessment and evaluation of unit and institutional effectiveness. In that capacity, IRAP manages University surveying, as well as IE assessment and reporting processes. Data collection and analysis is a cooperative effort between each unit and IRAP. For indirect measures, IRAP administers and compiles all surveys across the institution, as well as offers support for focus groups. Some measures, due to access or expertise, must be administered at the unit level. Faculty, for example, are the primary evaluators of student performance. In such cases, the data collection, analysis, and reporting will be conducted by each unit with the assistance of IRAP, as needed. In this distributed mode, the Director, IRAP will maintain University oversight to include access to all data, whether generated by IRAP or collected by the units. IRAP will retain copies of all unit- and university-level reports.

        (2) Directors. All MCU units participate in a comprehensive, annual IE review. IRAP works closely with each unit to assist them at each stage of the process. Directors are responsible for the annual evaluation of their unit's effectiveness, as documented in the Director's IE Report and accompanying 4CM. This also includes the review and update of unit outcomes, specifically the annual review and updates of operational outcomes in coordination with IRAP and the biennial update of learning outcomes through the CRB process. Each Director will appoint an IE point of contact to consult with IRAP in the design and execution of the unit's IE Plan and IE Report.

        (3) Vice Presidents. Vice Presidents are responsible for approval and oversight of IE Plans and IE Reports for units within their purview. They also have particular responsibility for implementing actions identified in the PAR, which are developed and approved by CG EDCOM as a result of the university-level IE process.

        (4) IE Working Group. Chaired by the Director IRAP, the IEWG serves as an advisory and consultative body for the University's leadership to inform decision-making. The IEWG's scope includes effectiveness of all functions, structures, and processes of the command. More specifically, the group provides feedback on the quality of institutional assessment processes (templates, timelines, etc.) and highlights issues for command attention. The group is also charged with the holistic annual review of core University IE outcomes and all unit-level outcomes, excepting outcomes addressed in the CRB process, to identify links and gaps. Additional information regarding the IEWG is provided at Section 1.c.

4.   Procedures

   a.   Deadlines. Unit- and University-level IE reporting deadlines are specified in the Annual Reporting Schedule (Section 1.d). IRAP coordinates changes to that schedule in consultation with the IE Working Group and communicates them directly to Directors. IRAP also provides courtesy reminders about upcoming IE reporting requirements.

   b.   IE Plan and Report Submissions. Unit submissions for IE Plans and IE Reports should be made using the annual templates provided by IRAP.   If applicable, units are expected to route IE Plans and IE Reports through their supervising Vice President. Final Director's IE Reports should be signed and scanned to PDF. The IRAP office will issue specific submission guidance each year, leveraging the automation options available through the University's Assessment Management Platform (AMP), TK20.

   c.   IE Report Retention and Publication. IRAP plans and reports are retained in the portal and transparent to University users. Student Achievement data, the University Factbook, and the IE Assessment Report are also published on the MCU website.

   d.   IE Support Requests. Ad hoc requests for data collection and/or analytical support should be sent to the Director, IRAP via email for staffing. Requests should also CC a unit's IEWG representative to ensure visibility. Resources on assessment design and analysis are available on the IRAP portal. All data collection plans must comply with the Survey Policy (Chapter 3) and Human Subjects Research Requirements (see Academic Regulations).

Related Policies and Forms:
Academic Regulations: Curriculum Review Process
Academic Regulations: Research
IE Plan: Four-Column Matrix Template
Director's IE Report Template

Policy Updated: 22-Feb-2021
Procedures Updated: 13-May-2022
Last Reviewed: 13-May-2022

Section 1.c Institutional Effectiveness Working Group (IEWG)

Functional Lead: Vice President for Operations and Plans
Directorate: Institutional Research, Assessment, and Planning

Reference: (a) SACSCOC Principles of Accreditation (Principle 7)
           (b) MCU Strategic Plan 2017-2022

1. Purpose. This section replaces the separate Institutional Effectiveness Working Group (IEWG) Charter established 17 Dec 2018. The sections below outline the policy and operating procedures of the IEWG.

2. Background. The Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) describes institutional effectiveness (IE) as a process that "involves all programs, services, and constituencies; is linked to the decision-making process at all levels; and provides a sound basis for budgetary decisions and resource allocations" (reference (a)). IE efforts are essential to organizational health, fostering a culture of continuous improvement. As a component of improving a culture of self-assessment across the University, the IE Working Group (IEWG) was established per the direction of the Marine Corps University Strategic Plan, dated 11 August 2017 (reference (b)).

3. Policy

    a. Goal and Function. The IEWG provides a forum for discussion of innovations, challenges, policies, and strategies related to institutional effectiveness, including assessment, accreditation, and strategic planning efforts. The IEWG's scope includes effectiveness of all functions, structures, and processes of the institution. As an assembly of IE practitioners, educators, and faculty members, it also serves as an advisory and consultative body for the University's leadership to inform decision-making. More specifically, the group provides feedback on the quality of institutional assessment processes (templates, timelines, etc.) and highlights issues for command attention. The group is also charged with the holistic annual outcome review process for core University IE outcomes and unit-level outcomes to identify links and gaps. Note that learning outcomes for formal academic programs are reviewed through the Curriculum Review Board (CRB) process. Additionally, the group provides an assessment data management function in an effort to synchronize reporting and ensure responsible stewardship of academic data.

    b. Membership. The Director, IRAP serves as Chair of the IEWG. Core membership of the IEWG will consist of at least one representative from each of the following: Provost/VPAA, VPBA, VPDL/CDET, MCWAR, CSC, SAW, EWS, CEME, NMMC, HD, LLI, and MCUP. Members should have expertise in or responsibility for institutional effectiveness and/or assessment data management activities. A diverse, cross-functional membership is essential to fulfilling the group's function. As required, extended members will be asked to participate (e.g., IT/ET representatives, registrar). Due to the broad scope of the participating organization functions, attendance requirements may vary with the meeting agenda; attendance may be discretionary for certain representatives.

c. Schedule. IEWG meetings will occur quarterly, prior to the scheduled President's Planning Council (PPC) meetings and annual institutional effectiveness reporting deadlines. The IEWG can be called into session on an as-needed basis by the Chair, or as requested by the President, MCU. Meetings will generally be open to the MCU community.

d. Subcommittees. From time to time, the IEWG may form subcommittees to address specific needs or concerns. These committees will report findings or recommendations in writing for discussion at the larger IEWG meeting. Such reports will be appended to the IEWG notes and retained as part of the permanent record.

4. Procedures

a. Agenda. The Chair will prepare and disseminate an agenda prior to each meeting. The agenda may be informed by its members as well as requests from University, school, or directorate leadership.

b. Recommendations. A quorum for the IEWG will consist of one half of the members plus one. Recommendations should reflect consensus among members.

c. Minutes and Materials. Following each meeting, the Chair will prepare the minutes for member review. Final minutes will be retained in IRAP archives and will be posted to the IEWG Shared Drive. The Chair presents IEWG concerns and recommendations to governing bodies, such as the PPC, ESC, or Faculty Council, and to individual leaders, such as the Vice Presidents, Deans, or MCU President, as appropriate.

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Policy Updated: 22-Feb-2021
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Section 1.d University Reporting Cycles

Functional Lead: Vice President for Operations and Plans
Directorate: Institutional Research, Assessment, and Planning

Reference: (a) SACSCOC Principles of Accreditation (Principle 7)
           (b) CJCSI 1801.F Officer Professional Military Education Policy

Appendix: (1) Annual Reporting Schedule

1. Purpose. This section outlines the general schedule and tempo for institutional reporting across institutional effectiveness, strategic planning, and known higher headquarters reporting requirements. It also synchronizes these processes within broader academic and budgetary reporting cycles. For more information on budget-related requirements see the MCU Business Regulations (Financial Management).

2. Background. Institutional reporting requirements inform three major planning cycles: five-year, biennial, and annual.

    a. Five-Year. Centered on the MCU mission and strategic vision, the MCU Strategic Plan (STRATPLAN) is a whole-of-university roadmap that operationalizes MCU's strategic goals through measurable objectives, critical tasks, and metrics over a five-year planning window. While the plan is renewed every five years, implementation is evaluated annually. This STRATPLAN cycle mirrors the Marine Corps' budget cycle, within which the University outlines a five-year funding plan across the Future Year Defense Program (FYDP) via the Program Objective Memorandum (POM) process. Finally, the MCU civilian accreditation process through the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) is also based on a five-year reporting cycle that alternates between five-year (interim) and ten-year (full) reaffirmation reporting cycles and requirements. As noted earlier in this chapter, the SACSCOC has high expectations regarding the quality of institutional planning, effectiveness, and decision-making processes (reference (a)).

    b. Biennial. A key component of the MCU Curriculum Review Process, the MCU Curriculum Review Board (CRB) convenes biennially to evaluate the missions, outcomes, and measures for each academic program (MCU Academic Regulations: Curriculum Review Process). Generally, scheduled CRBs occur in even numbered years for officer PME and odd years for enlisted PME. Additionally, MCU programs that are certified to deliver JPME Phase I or Phase II by the CJCS have a biennial reporting requirement (reference (b)).

    c. Annual. Annual reporting cycles include the review and evaluation of unit- and institution-level outcomes through the Institutional Effectiveness (IE) Process (see Section 1.c) and the publication of the MCU Fact Book. Several multi-year reporting cycles also have annual requirements to monitor progress, including reporting related to implementation of the STRATPLAN (Chapter 8) and the University's Quality Enhancement Plan (QEP) for SACSCOC. Curriculum is also reviewed on an ongoing basis at the school level through the Course Content Review Board (CCRB) process. Finally, the University provides annual inputs into the Marine Corps' budgeting process. Each of these topics are addressed, as appropriate, within the President's Planning Council (PPC; Chapter 9).

3. Policy

    a. Intent. Synchronization of the University's reporting and decision-making cycles ensures that these efforts are complementary and integrated. Additionally, it reduces the burden on faculty and staff by making efficient use of their data reporting and evaluation efforts.

    b. IE and STRATPLAN Integration. Reporting integration is particularly important for the IE and STRATPLAN reviews. The former provides insights about current institutional health and performance. The latter tracks progress towards long-term institutional goals and re-validates the relevance and prioritizations of goals and critical tasks. Figure 1.4 below captures the purposeful alignment of data collection and analysis for these two lines of effort, culminating in a sequenced decision-making process that leads to immediate actions to improve current institutional performance and adjustments to longer-term plans to address recurring institutional needs. The two processes culminate in separate, complementary reports containing recommendations for action and improvement for consideration by the President within the context of the PPC. These are the President's Assessment Report (PAR) and the STRATPLAN Executive Report (SPER).
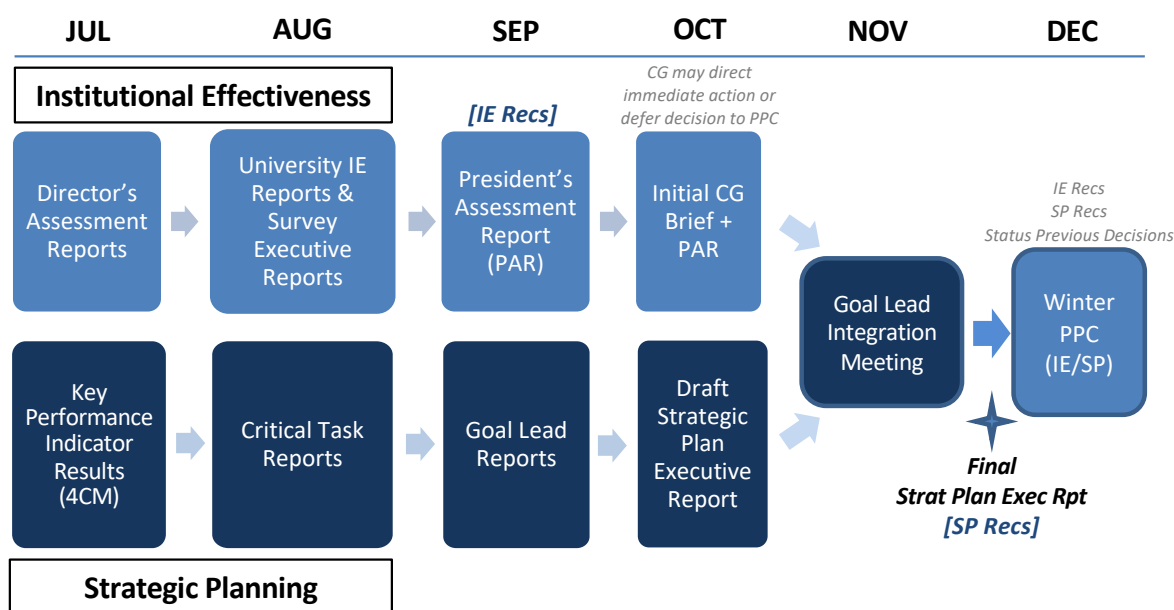

Figure 1.4: IE/STRATPLAN Annual Reporting & Decision-Making

    d. Responsibilities

    (1) Office of Institutional Research, Assessment, and Planning (IRAP). Under the auspices of the Vice President for Operations and Plans (VPOP), IRAP supports all of the processes described above with data collection and analysis, as well as planning and coordination activities throughout the academic year. At best, this has traditionally been a semi-automated process but implementation of a fully automated University Assessment Management Platform (AMP) is ongoing. IRAP's implementation and management of the AMP will facilitate automation of reporting and integration of University assessment data. As unit- and university-level plans are executed throughout the academic year, IRAP facilitates assessments (surveys,

focus groups, etc.) to inform in-stride adjustments at the college and unit level and, ultimately, end-of-year improvements. Additionally, IRAP provides consultations for development and implementation of evaluation and assessment plans. All IRAP coordination is facilitated through designated points of contact in each unit. Collaboration is further facilitated by standing coordination meetings and/or working groups run by VPOP's three subordinate directorates: IRAP, Operations, and Plans.

(2) Vice Presidents. As stewards of other significant institutional planning processes (e.g., curriculum, budget, technology), the University Vice Presidents are responsible for continuing to seek opportunities for integration of planning, reporting, and decision-making cycles. Updates on the status and outcomes of these processes are briefed at the PPC.

(3) Directors. Establish a point of contact within their unit to coordinate evaluation planning, data collection, and reporting within the IE and STRATPLAN processes described in this chapter and in Chapter 8.

4. Procedures

a. Deadlines. IRAP publishes the Annual Reporting Schedule at the beginning of each Academic Year (Appendix 1.d.1) and briefs the PPC and IE Working Group (IEWG) on any modifications.

b. Reporting Requirements. Specific reporting requirements for the IE and STRATPLAN processes are outlined in Section 1.c of this chapter and in Chapter 8, respectively.

Related Policies and Forms:
Business Regulations: Financial Management
Academic Regulations: Curriculum Review Process

Policy Updated: 22-Feb-2021
Procedures Updated: 13-May-2022
Last Reviewed: 13-May-2022

Appendix 1.b.1: MCU Four-Column Matrix Guide

Outcomes (aligned to Strategic Plan)	Assessment Measures	Summary of Results	Analysis & Use
"What is expected?"	**"How do we measure & define our expectations?"**	**"How well did we meet our expectations?"**	**"What do we plan to do with our findings?"**
Learning Outcomes: What students should be able to think, know, or do (CRB-approved) ***Highlight QEP outcomes in red/bold**	For example: Student assignments– exams, essays, etc. Survey results (Students, Fleet, Faculty, & Staff)	Summarize results for each measure and indicate to what extent the measure was met, partially met, or not met.	Provide an overall interpretation of these results and detail the changes and/or recommendations associated with these findings. Compare, as appropriate, with prior year's findings.
Operational outcomes: How well the unit is performing a. **Performance Outcomes:** the quality of a unit's major functions (customer service, etc.) b. **Task Outcomes:** Completion of/progress on particular actions that require awareness at the University level	For example: Usage Data –participation in, demand for, and/or speed of services Survey results (Students, Faculty, & Staff) Inspection & compliance outcomes	Summarize results for each measure and indicate to what extent the measure was met, partially met, or not met.	Provide an overall interpretation of these results and detail the changes and/or recommendations associated with these findings. Compare, as appropriate, with prior year's findings.

Directors' IE Plan Checklist

General

- Are you using the current (AY20) template?

- Have you highlighted any QEP-relevant outcomes/initiatives/tasks in **red and bold**?

Column 1: Institutional/Administrative Outcomes

- Do your outcomes capture your primary functions, activities, and impacts on MCU/major stakeholders?

- Do your outcomes reflect the most important information about your directorate?

- Will your outcomes allow you to identify areas for improvement?

- Do most of your outcomes reflect operational performance (e.g., quality) rather than task-completion?

- Are your outcomes SMART (Specific to your unit, Measurable, Achievable, Results-oriented, and Time-bound)?

Column 2: Measures (*see side 2*)

- Does each outcome have at least two measures? (Preferably a mix of direct and indirect). See common measures on side 2.

- Do the methods clearly capture quality or effectiveness of the outcome (i.e., How *well* you are achieving the outcome)?

- Do your measures incorporate input from relevant stakeholders?

- Are the "who, what and when" clearly specified for each method? That is, can you tell what data will be collected, from what sources, using what methods, by whom, in what approximate timeframe?

- Have you specified the success criteria (i.e., level of performance) for each measure? See common metrics for success on side 2.

SIDE 2: Choosing a Measure

Each organization must determine what types of measures of effectiveness will be used to assess their outcomes. Measures should be chosen and applied to maximize representation of a wide array of stakeholders. Measures should also be chosen and refined to discretely assess each outcome, using direct and indirect sources.

- **Direct measures** are tangible, observable evidence. Direct measures of student learning examine student work, while direct measures of institutional performance examine usage, processing time, and other quantitative elements (e.g., enrollment data).

- **Indirect measures** capture perceptions and attitudes. For both learning and institutional performance, indirect measures are gathered through self-reporting methods like surveys, focus groups, and interviews.

Common Measures

1. **Measures of volume of activity or usage data** (Direct) – Data about demand, utilization, and speed of administrative services.

2. **Measures of efficiency or service quality**

    a. **MCU Annual Student Survey** (Indirect)

    b. **MCU Annual Employee Surveys** (Indirect)

    c. **Focus Groups** (Indirect) – Focus groups provide a less structured way to explore perceptions and attitudes toward their educational/service-related experience.

3. **Compliance with standards/guidelines set by federal, DoD or MCU regulations**

4. **Assessments from external evaluations/audits**

Common Metrics

The MCU standard of achievement for academic and institutional outcomes in surveys is that 80% or more of respondents respond positively (agree or strongly agree). Other metrics should be determined by department in relation to subject-appropriate standards and benchmarks. Some benchmarks can be determined based on desired improvement in performance relative to prior years. Focus Group feedback is often used to inform analysis of other data, rather than compared to a common standard.

Director's IE Report & Four-Column Matrix Checklist

DIRECTOR'S REPORT

- Are you using the current template?

Director's Assessment:
- Did you capture the important successes and challenges relative to your Four-Column Matrix Outcomes?
- Did you close the loop by evaluating the success of changes made from last year?

QEP Assessment:
- Did you capture the important strengths and opportunities of QEP implementation? (Remember, your narrative will inform the QEP Annual Report)

President's Priority Areas:
- Did you discuss how your unit is responding to/covering key areas highlighted by the President?

Core IE Areas:
- How is the University progressing relative to Professional Learning, Faculty & Staff Development, Organizational Strength, Technology & Infrastructure, and Outreach from your unit's perspective?
- What should the University be aware of?

Recommendations/Changes:
- Did you capture recommendations for how the University can assist you in the upcoming year?
- Did you capture important changes that you are implementing in your curriculum as a result of your overall assessment?

FOUR-COLUMN MATRIX

- Are you using the current   version with your updated outcomes/measures?
- Have you highlighted any QEP-relevant outcomes/initiatives in **red and bold**?

Column 3: Results

- Have you provided a summary of results for each measure? Is that summary consistent with your threshold for success (i.e., don't report average grade if % above a certain grade is your threshold)?
- Did you indicate the extent to which each measure was met/not met (or partially met, if applicable)?
- As appropriate, did you include longitudinal data to demonstrate results of last year's improvement plan?

Column 4: Analysis & Use of Data   ***See side 2****

- Does your analysis provide sufficient context to determine whether an overall outcome was met and to interpret those results?
- Does your analysis specifically address changes or recommendations in response to your results? Did you indicate if that result was immediate or pending?
- Is your plan for improvement narrative specific and realistic?
- Are appropriate supporting documents included to substantiate a measure?

SIDE 2: Approaching Analysis

Interpreting Results

Analytical approaches will vary by the type of data collected. IRAP provides quantitative and thematic analyses for surveys and focus groups, but units must review and reflect on both the data and reports to make data actionable. Units should consider the following framing questions during the review and interpretation of their IE data:

- How valid was this measure relative to the intended outcome?
- What does the data say about either the quality of the function provided by the unit or the student's mastery of the subject matter and related skills?
- How does the data compare to the benchmark expectations? Was the goal met?
- Are there areas of particular strength or particular weakness for your unit or your students?
- Are there any red flags or areas for action?
- Are there patterns or discontinuities in the data related to this outcome? (Did results change over time? Did results vary by stakeholder? How did results compare to previous years?)
- Was a change made related to this outcome in the previous year? Did that change create the anticipated/intended impact?

Don't have the data you need?

Work with IRAP to ensure we better align your outcomes and data collection plans. We're here to help!

Common Unit-Level Measures and Metrics

MCU uses a variety of tools to measure learning and operational outcomes. To ensure an accurate assessment of outcomes, a variety of direct and indirect assessment measures should be used. The section below describes the common measures and their standards, but is not an exhaustive list of measures available or applicable.

- **Annual MCU Employee Survey** (Indirect). The Annual MCU Employee Survey is a critical mechanism for soliciting feedback on the quality of the MCU environment and of University support services. **Standard:** The MCU standard for surveys is 80% positive agreement (agree or strongly agree).
- **Enrollment & Personnel Data** (Direct). Enrollment and personnel data are maintained by several MCU organizations for students, faculty and staff. This data provides critical insights into faculty qualifications and staffing, as well as student mix and trajectories. External personnel databases provide additional insight into graduate trajectories (promotion, job assignments, job performance, etc.). **Standard:** The standard of achievement for this category will vary by unit and outcome. In some cases, standards may be determined by external policy.
- **Faculty Feedback** (Direct and Indirect). Faculty observations of student performance as well as perspectives on curriculum design, content, and instructional approaches are solicited formally and informally during Course Content Review Board (CCRB) meetings. **Standard:** Feedback is used to inform analysis of other data, rather than compared to a common MCU standard.
- **Graduate & Supervisor Surveys** (Indirect). IRAP administers graduate and supervisor surveys 18 months after graduation to assess the relevance of the curriculum and graduate preparedness (knowledge and skills) for follow-on assignments. **Standard:** The MCU standard for surveys is 80% positive agreement (agree or strongly agree).
- **Operating Forces Feedback** (Indirect). Feedback from senior leaders, commanders in the operating forces, or in the joint arena may be solicited through telephone conversations or field study visits. These often informal mechanisms provide valuable input regarding program outcomes and objectives, course content, methodologies, overall program effectiveness, and relevancy to graduates' current assignments. When conducted informally, this should be addressed in the Director's Report. **Standard:** Feedback is used to inform analysis of other data, rather than compared to a common standard.
- **Student Focus Groups** (Indirect). Student focus groups provide a less structured way to explore student perceptions and attitudes toward their educational experience. Topics include perceived learning outcomes, reactions to instructional methods, and the quality of support services. **Standard:** Feedback is used to inform analysis of other data, rather than compared to a common standard.

Appendix 1.b.3 Common Unit-Level Measures and Metrics

- **Student Performance Data** (Direct). Student learning outcomes are measured through faculty evaluation of student work - examinations, written assignments (papers, journals, thesis, etc.), seminar contribution, oral defenses, presentations, war gaming, simulations, and planning exercises. As appropriate, student work is also sampled and evaluated to assess University learning outcomes identified in the current QEP. **Standard:** The MCU standard of achievement for learning outcomes is at or above 80% meeting or exceeding satisfactory performance level.
- **Student Surveys** (Indirect). Students provide survey feedback about each course and at the end of their program in an Annual Student Survey. Student course surveys evaluate the content, instruction, and quality of reading and reference materials assigned. The end-of-program Annual Student Survey explores overall satisfaction with educational programs and the institutionally supported learning environment. Topics include perceived learning outcomes, instructional quality, and satisfaction with the administrative and support services. **Standard:** The MCU standard for surveys is 80% positive agreement (agree or strongly agree).
- **Usage Data** (Direct). Data about participation in, demand for, and/or speed of offerings or services provides insights into staffing and procedural performance. **Standard:** MCU standards of achievement for this category may be determined by external policy and are informed by organization-level expertise.

What Do We Need to Know?

Harmonizing Institutional Effectiveness Reporting and the Strategic Plan

The Annual IE Process and the Strategic Plan Process are closely aligned. The Strategic Plan aligns institutional priorities with the mission, and identifies initiatives to further mission accomplishment over a five-year period. The IE process evaluates how well the MCU organization is achieving its mission in a given year. With this in mind, the Strategic Plan progress report examines accomplishment of initiatives in relation to long-term mission-driven objectives, while the IE report looks holistically at the current health and performance of the institution.

Professional Learning

STRATPLAN Goal 1. Conduct education and training to develop professionally competent individuals who think critically and solve complex problems creatively in a dynamic environment.

- Student achievement of MCU President-approved student learning outcomes, including elements related to the QEP (Academic Programs)
- Student satisfaction with academic courses and programs (Academic Programs, IRAP)
- Faculty satisfaction with academic courses and programs (Academic Programs, IRAP)
- Stakeholder satisfaction with graduate's skills/performance (Academic Programs)
- Identification of stakeholder needs and expectations (All Organizations)

Organizational Strength

STRATPLAN Goal 2. Develop and maintain an effective, transparent, collaborative, and responsive organizational structure in order to foster a culture of continuous learning and improvement.

- Organizational climate (IRAP)
- Student, faculty, and staff satisfaction with support and services (IRAP)
- Organizational achievement of approved institutional outcomes (All Organizations)
- Student enrollment and graduate totals (MCU Registrar)
- University is properly staffed to accomplish its mission (MCU Civilian Manpower, G-1)

Infrastructure and Technology

STRATPLAN Goal 3. Provide state-of-the-art facilities and cutting-edge technologies in order to facilitate Marine Corps University's innovative and global learning environment.

- University is properly resourced to accomplish its mission (MCU Finance, Logistics/Supply, Facilities, IT/ET)
- Student, faculty, and staff satisfaction with infrastructure and technology (IRAP)

Faculty and Staff Development

STRATPLAN Goal 4. Strengthen faculty and staff development opportunities in order to promote teaching excellence, scholarship, and the sharing of knowledge.

- Faculty and staff professional development and enrichment programs (All Organizations, MCU Faculty Development and Outreach, Civilian Manpower)
- Faculty and staff satisfaction with development opportunities (IRAP)

University Outreach

STRATPLAN Goal 5. Leverage MCU's scholarship, research, publishing, stewardship, learning opportunities, and conferencing capabilities in order to strengthen the MCU brand and to support the Marine Corps, the broader national security audience, and the public.

- Achievement of outreach related outcomes, including preserving and presenting the history of the USMC (Library/HD/NMMC)
- Faculty, staff, and student contribution to scholarship and research (All Units)
- Quantity and quality indicators of University outreach and engagement activities (MCU Faculty Development & Outreach, Krulak Center)

Appendix 1.d.1: Annual Reporting Schedule

Task	Timeline
Director's Reports (& Four-Column Matrix) Due to IRAP	15 Jul
STRATPLAN: KPI Results to Critical Task Leads	15 Jul
Annual Student Survey Executive Summary & Report Due	30 Jul
IE Working Group Meeting (Qtr 4)	Aug
Institutional Effectiveness Assessment Report Complete	15 Aug
STRATPLAN: Critical Task Lead Report to Goal Lead	15 Aug
Annual Employee Survey Executive Summary & Report Due	30 Aug
QEP Annual Impact Report Due (Internal)	30 Aug
Updated IE Plans Due to IRAP (Performance and Task Outcomes)	30 Aug
MCU Fact Book Inputs Due	1 Sep
IE Plans Consolidated & Reviewed by IEWG	15 Sep
President's Assessment Report Complete	15 Sep
STRATPLAN: Goal Lead Reports Due	15 Sep
Initial CG Brief on PAR	30 Sep
Fall President's Planning Council	Sep/Oct
STRATPLAN: Goal Lead Integration Meeting	1 Oct
STRATPLAN Executive Report Complete	15 Oct
MCU Fact Book Complete	15 Oct
IE Working Group Meeting (Qtr 1)	Nov
Winter President's Planning Council	Dec
QEP: Fall Data Due	31 Jan
IE Working Group Meeting (Qtr 2)	Feb
Annual MCU Employee Survey ● School & Unit reports out within two weeks of closure	Mar-Apr
Graduate and Supervisor Surveys (MCWAR, SAW, CSC, EWS)	Mar-Apr
Annual Solicitation for Research Topics	Mar-Jun
STRATPLAN: Executive Report Addendum (if required)	Apr/May
Annual Student Survey (launch & closure varies by school) ● School and unit reports out within two weeks of closure	Apr/May-Jun
Spring President's Planning Council	May
IE Working Group Meeting (Qtr 3)	May
QEP: Spring Data Due	NLT 7 Jun

Note: When a routine deadline falls on a weekend, deliverables are due the next business day.