Administrative Assessment Handbook

A Step-by-Step Guide for Assessing Administrative Effectiveness

Office of Institutional Effectiveness

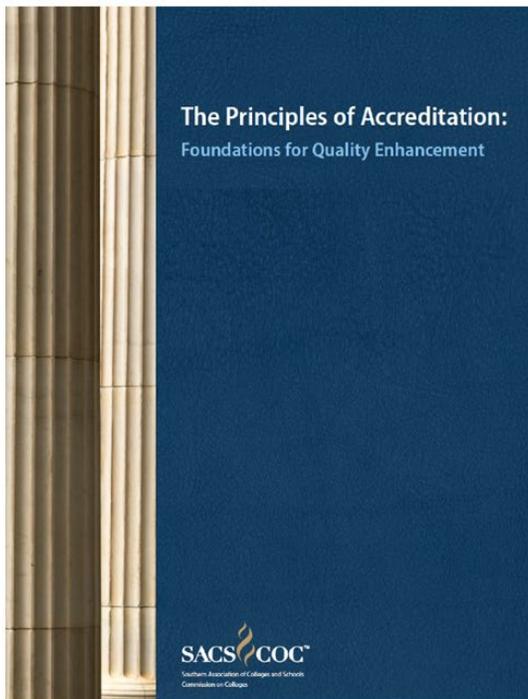Updated August 2022

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What is Assessment?
Why Assess?

Administrative assessment is the systematic examination of division or department effectiveness in achieving its mission. Sweet Briar engages in ongoing, integrated, and institution-wide research-based planning and evaluation processes that result in continuous improvement in institutional quality and demonstrate that we are effectively accomplishing our service mission.

The Principles of Accreditation:
Foundations for Quality Enhancement

SACS COC
Southern Association of Colleges and Schools
Commission on Colleges

7.1 The institution engages in ongoing, comprehensive, and integrated research-based planning and evaluation processes that (a) focus on institutional quality and effectiveness and (b) incorporate a systematic review of institutional goals and outcomes consistent with its mission. (*Institutional planning*) [CR]

7.3 The institution identifies expected outcomes of its administrative support services and demonstrates the extent to which the outcomes are achieved. (*Administrative effectiveness*)

8.2 The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the areas below:

a. Student learning outcomes for each of its educational programs.
(*Student outcomes: educational programs*)

b. Student learning outcomes for collegiate-level general education competencies of its undergraduate degree programs.
(*Student outcomes: general education*)

c. Academic and student services that support student success.
(*Student outcomes: academic and student services*)

Administrative assessment is one of Sweet Briar's three formal evaluation and assessment mechanisms. Assessment provides a comprehensive understanding of the College's effectiveness by reviewing, analyzing, and improving the entire educational experience. Administrative assessment focuses on the administrative and community engagement services provided by the College.

The goals of the assessment process are to identify strengths and weaknesses in the functioning of divisions and units and the services they provide and use that information to improve effectiveness and the Sweet Briar experience for students and others.

ASSESSMENT is a **PROCESS** that involves:
- ✓ Relating your MISSION, RESOURCES, and ACTIVITIES to MEASURABLE OUTCOMES,
- ✓ Systematically COLLECTING and ANALYZING DATA to determine to whether and to what extent outcomes have been achieved,
- ✓ Using the data results to identify STRENGTHS and WEAKNESSES of your department and
- ✓ Implementing IMPROVEMENT strategies.

Why is assessment a good idea?

Assessment offers evidence that helps administrators and staff diagnose what is and isn't working and design processes to improve department effectiveness. Assessment can benefit administrators and staff by:

- Helping to clarify the mission of a division or department and its role in achieving the college's mission, and identifying the key activities that need to occur to achieve the department's mission and goals.
- Providing coherence and direction to the department or unit's work.
- Providing staff with clear expectations that help them understand how their supervisors will evaluate their work.
- Providing administrators and staff with better information about how their services are viewed by their "customers" and what areas need improvement.
- Helping administrators make informed, evidence-based decisions about resource allocation, the need to re-consider, improve, or expand services, and more.
- Ensuring that resources are being allocated in the most effective way possible – where they'll have the greatest impact on helping the college achieve its mission.

Careful planning is necessary. Expected outcomes must be clearly specified, appropriate measures must be selected, data collection must be carefully executed and most importantly results must be shared for improvements to occur.

What do Administrative Units Assess?[1]

Administrative units, including student support services, identify outcomes and measure the extent to which these goals are achieved. These outcomes include goals related to service quality, efficiency, compliance, the volume of unit activity, effectiveness, customer satisfaction, and staff development, as examples.
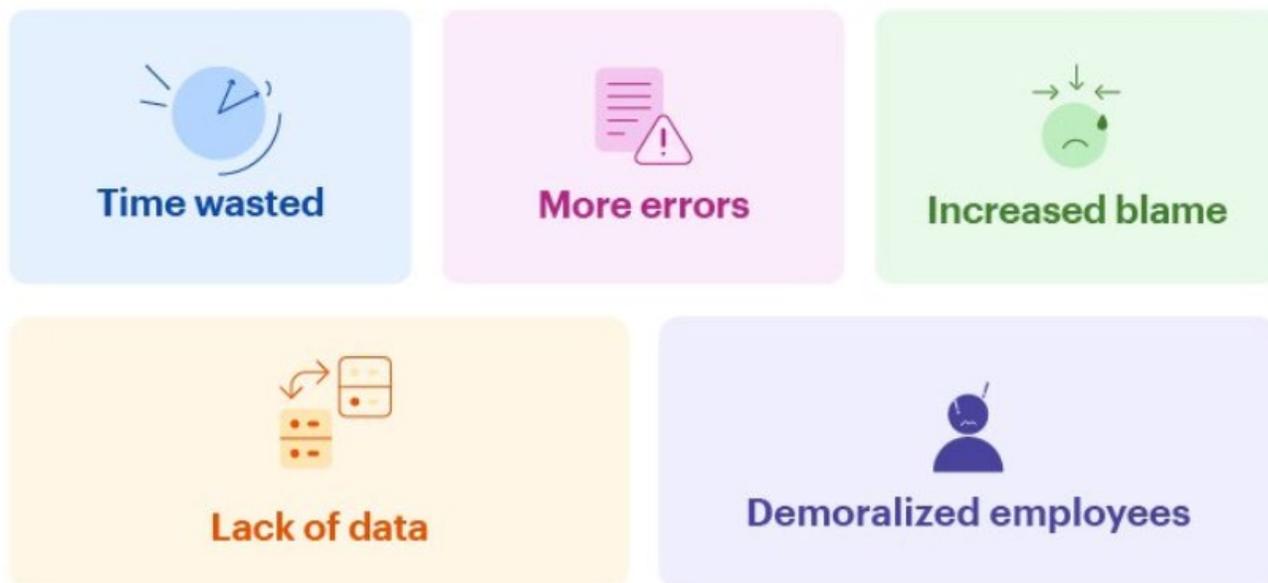
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[1] https://uncw.edu/irp/ie/assessment/administrative.html

These divisions may also measure student learning outcomes. As an example, the Office of Financial Aid may measure students' knowledge of responsible borrowing.

Furthermore, administrative units seek improvement by analyzing data from their assessment of operational and student learning outcomes and develop strategies to improve learning, services, and client/customer satisfaction. The success of these action steps helps to inform the refinement or creation of outcomes for the next assessment cycle. The planning and assessment of administrative outcomes involve all the primary functions of the unit and are aligned to the institutional mission and strategic plan.

How does the Administrative Unit Assessment Process Connect to Individual Performance Evaluations? [2]

Assessment in administrative units can be defined as the systematic and ongoing method of using measured outcomes, gathering, analyzing and using information about an administrative unit, in order to improve outputs, increase efficiencies, and/or enhance customer satisfaction, as examples. The assessment of the unit's outcomes during the time-bound assessment cycle is not meant to serve as the performance evaluation of individuals. People may be assigned to monitor outcomes, measures and/or strategies found within an assessment plan. Yet, the assessment process is not intended to lead to an individual indication of performance. Instead, the unit's progress towards its outcomes and ultimately, its mission should be based on the synthesis of information. The assessment relates to measuring critical administrative functions or processes in order to collect data, which should lead to process improvements. When used along with contextual details, patterns, and trends from historical data or other relevant data sets, the assessment findings provide information about how the unit is meeting stakeholders' needs and expectations, and not the sole individual within the unit.

Time wasted   More errors   Increased blame   Lack of data   Demoralized employees

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[2] https://uncw.edu/irp/ie/assessment/administrative.html

How does the Administrative Unit Assessment Process Impact Budget Decisions or Resource Allocations? [3]

Institutions of higher education are required to conduct assessments within their administrative support units in order to meet accreditation standards. However, making evidenced-based decisions is the best practice for any organization that is seeking to improve. The need to know how each unit contributes to the institutional strategic plan and the unit's success in achieving its own targets will improve overall strategic planning efforts, decision support, resource allocation, budget priorities, and operational excellence, which are all motivators for conducting outcomes assessment.

Planning for Assessment Success

In order to improve, careful planning is necessary. Performance targets and desired outcomes must be clearly specified, appropriate measures must be selected, data collection must be carefully executed and most importantly results must be shared for improvements to occur. Planning, specifically coordinated and collaborative planning, can break cycles of hurried assessment; allowing administrators to be more intentional with their work, establishing goals and outcomes, collecting data, analyzing and interpreting results, and recommending improvements. Any format that includes each step in the assessment process is acceptable. The Assessment Committee provides a template for planning and reporting assessments.

Assessment Plan/Report Template

SWEET BRIAR COLLEGE	**Assessment of Administrative Effectiveness 2022-23**		☒PLAN ☐REPORT DATE: 8/4/2022
	Department:	**Submitted by:**	

College Mission
Sweet Briar College challenges and inspires women, forging ethical leaders with the skill, compassion, and vision to create a more just and sustainable world.
Department Mission

SACSCOC Standard 7.3: Administrative Effectiveness
The institution identifies expected outcomes of its administrative support services and demonstrates the extent to which the outcomes are achieved. It is critical that administrative support services are provided effectively in order for the institution to attain its strategic goals and operational efficiency. *EXPECTED OUTCOMES* for administrative units typically include outcomes such as efficiency and quality of service targets (e.g., energy usage, response times, error rates, "clean report" targets, satisfaction rates); monetary targets (e.g., fund-raising targets, research grant targets, auxiliary income targets).

Effectiveness Goal	**Expected Outcomes**	**Performance Indicators & Criteria for Success**	**Observed Outcomes & Results**	**Evidence of Seeking Improvement**
*Select a **PRIMARY FUNCTION** of the department, and state an effectiveness goal for that function.* *How can this function be **DONE MORE EFFECTIVELY**?*	*What **ACTIONS** must be taken to achieve the goal, and what are the **EXPECTED OUTCOMES**?*	*What **METRICS** or **ARTIFACTS** will show the **DEGREE** to which outcomes will be **ACHIEVED**?* *What are the **CRITERIA** for **SUCCESS**?* ***WHAT** will be accomplished?* ***HOW MUCH** will be accomplished?* ***WHEN** will it be accomplished?*	***WHAT WORKED, WHAT DIDN'T**?* *How far did the department get toward accomplishing the outcome?* *Was the outcome achieved on time?*	*What will the department **KEEP, IMPROVE, START** or **STOP** doing, and how will these steps be included in **NEXT YEAR'S PLAN**?*

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How to Assess Administrative Effectiveness[4]

1: Define your mission

Your mission serves as the foundation of your assessment plan. The mission statement should reflect the mission of the college and describe the purpose of your division or unit. Mission statements should be not more than three or four lines of text and should clearly and concisely communicate WHAT you do, WHY you do it, and HOW you do it.

One way of formatting your mission statement is along these lines: "The mission of (name of your division or unit) is to (your primary purpose) by providing (your primary functions or activities) to (your stakeholders). These (services, products, etc.) contribute to Sweet Briar's mission by (describe how)."

Example:

> The Physical Plant Department supports the overall educational and administrative missions of Sweet Briar by providing facilities and technical support to all College departments. The mission of the Physical Plant Department is to operate, maintain, repair, modify, alter, and improve the buildings, grounds, utilities, and associated real property assets of the College.

Once you've written the mission statement, go through this checklist:

- Is the statement brief and memorable? Is it distinctive?
- Does it clearly state the purpose of the division or unit?
- Does it indicate the primary function or activities of the division or unit?
- Does it indicate who the stakeholders are?
- Does it clearly support the college's mission?

2: Establish Effectiveness Goals

We gauge effectiveness by measuring to what degree a department reaches the goals it sets out to achieve. This is the most traditional way of measuring administrative effectiveness. Goals can include product or service quality and quantity, financial goals, stakeholder value, societal impact, or all of these. At minimum, goals should encompass the primary functions of the department. Goals typically measure outputs but can be written to provide information about inputs or the processes. Goals should not reflect what the office does, but how it can do what it does *effectively*.

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[4] https://marymount.edu/marymount.edu/media/Planning-Institutional-Effectiveness/Assessment/Resources/2017-2018-Administrative-Assessment-Guide.pdf

3: Identify Expected Outcomes

There are three types of outcomes used in administrative assessment.

Operational Outcomes:

These outcomes are the end result for (or impact on) a customer/client/stakeholder or the institution that is a consequence of the work of your unit. Outcomes are directly related to the mission and key functional responsibilities of the department, and units should identify at least one outcome for each of their functional responsibilities.

Examples:

> *Faculty, staff, and students will be able to identify EO/AA laws, policies, and procedures and know how and where to seek assistance.*

> *Eligible employees have the information they need to make appropriate decisions regarding employee benefits packages.*

> *All inquiries from the news media will be answered in a timely and appropriate manner.*

> *College administrators have the financial information they need to make decisions effectively.*

Because they flow from the unit's mission and missions tend to be stable, these outcomes generally remain the same over a number of years, unless the unit mission or scope of operations changes. If your outcome has a shorter time span, it is probably a strategic outcome rather than an operational one

Strategic Outcomes:

These outcomes reflect future expected results of the unit, based on a planned activity. Strategic outcomes are generally assessed as part of the planning process to ensure strategic initiatives have the intended or positive results. Accordingly, strategic outcomes typically are written in future tense, are closely tied to division and college goals, and are consistent with a unit's operational outcomes.

Examples:

> *Over the next year, the Registrar's Office will improve student access to services by expanding hours of operation.*

> *Over the next year, OIE will ensure that college data are consistent, reliable, and integrated by establishing data policies and procedures.*

Learning Outcomes:

In addition, student-facing administrative areas will want to include outcomes that relate to student learning, if that is part of their mission. Learning outcomes are statements that describe the key knowledge, skills, or abilities that students have attained as a result of a learning experience. Like all outcomes, they must be measurable and observable and are generally worded in the following way: "Upon successful completion of ----, students will <action verb>."

Examples:

> *Students will identify correct academic requirements for their major.*

> *Students will demonstrate awareness of appropriate accommodations available for equal access to college resources and programs.*

> *Students will be able to access course descriptions and degree requirements using the online catalog.*

Determining which type of outcomes to use is driven by a number of factors. The goal, which also can be either operational or strategic, may dictate the type of outcomes. Current activity within the

department also affects the outcomes used. Departments undergoing substantial change often use short-term strategic outcomes because they help to ensure growth occurs in a systematic and beneficial approach. At the same time, departments that are more stable in their responsibilities and projects are more likely to use operational outcomes to ensure the effectiveness of services offered. departments, particularly those in student affairs, may include learning outcomes along with their strategic and/or operational outcomes. Most often the strongest approach is a combination of different types of outcomes. Together, they can provide a more comprehensive view of the department's effectiveness by examining both the effectiveness of daily operations and how well you are achieving your plan.

Once you've written the outcomes, go through this checklist:
- Are they aligned with the mission statement?
- Are they important to the college/division and reflect key results of the division or unit?
- Is it possible to collect accurate and reliable data for each outcome with available resources?
- Is each outcome stated so that a single measurement method can measure the entire outcome statement (i.e., the outcome doesn't include more than one observable result)?
- Can they be used to identify areas to improve?

4: Performance Indicators & Criteria for Success
Develop Indicators (Measures)
Once you've identified expected outcomes, the next step of the process is to identify measures to evaluate the unit's effectiveness. Measures come in a wide variety of forms and from a wide variety sources. Sometimes measures require the development and implementation of new tools, but often measures rely on secondary analysis of data that are already collected by the unit, division, or College. Although coming from many different sources, strong measures share three key attributes. They are:

- Related to the outcome being assessed directly and clearly (i.e. the results will answer the questions: "How effectively did the unit meet this outcome?")
- Objective and avoid structural bias (e.g. the results of the measure are not determined by how its tool is written or implemented).
- The process for evaluating the measure is documented, impartial, and systematic.

Start by taking an inventory of the kinds of tools your department is already using. What information are you already collecting? What kinds of indicators are you already using or are already familiar with? What kinds of indicators are recommended by your profession? Assessment methods can be direct or indirect, quantitative or qualitative, and objective or subjective.

Direct vs. Indirect Measures:
Direct measures examine actual results. Indirect measures examine perceptions relative to the outcome. Typically measures that are based on surveys, focus groups, and other methods to gather opinion through samples of respondents are considered to be indirect. Measures that are based on a complete or comprehensive data source that reflect the results of the outcome are considered to be direct. In the following example, both the qualitative and quantitative measure would be considered direct measures because they are drawn from the actual results of the outcomes.

However, the same outcome could be assessed using indirect measures. The Registrar's Office could survey students and ask them to indicate their agreement with a statement such as "My transcript is

always correct" or conduct a focus group of office staff members on accuracy issues. Using student or staff perceptions of accuracy would provide serve as an indirect measure.

Example: *The Registrar's Office maintains accurate student records*.

	DIRECT	INDIRECT
QUANTITATIVE	Compile and count the number of errors on transcripts reported by students.	Survey students on their perceptions of record accuracy.
QUALITATIVE	Review the policies used to maintain and update student records.	Conduct a focus group of Registrar office staff on accuracy issues.

Multiple measures should be used to assess each outcome, and at least one of those measures should be a direct observation of the end result. Varying the types of measures applied to an outcome provides a fuller picture of overall effectiveness by generating more material for the analysis. It also ensures available data in case one of measures is not collected. ***An inventory of administrative effectiveness measures is provided on page 21 of this guide.***

Set Targets

Targets are the specific values for each measure that you would like to reach. What is the minimum result/target/benchmark/value that will represent success at achieving this outcome? For example, your success target might be one of the following:

- 100% of reports are submitted by the first Monday of each month.
- Less than 5% of reports are returned for corrections
- Participation increases by 10%
- The number of new donors increases by 10%
- 90% of students report they are satisfied with this service
- Zero material findings in external audit
- 85% of students respond positively to questions related to this outcome.

Your targets should be challenging but realistic. If you easily meet your success target, you need to raise the bar or modify the measure in order to improve your effectiveness related to that outcome. Units that achieved 100% of a target need to identify improvements to "raise the bar" and/or or examine the outcome from additional perspectives to ensure that the target is accurately measuring performance.

Collect Data

Data collection can be time-intensive, so make sure that the data you collect relates to the outcome you are assessing. You may want to collect data continuously or take a snapshot at regular intervals, but it should represent the work your unit does throughout the year.

Useful tips:
1. Look first at the data you already collect to see if it can be used to measure your outcomes.
2. Plan. The key to collecting data is planning. One of the biggest challenges that units face when writing their results is realizing that the measure was not implemented. This often results in a scramble for data that may only loosely tie to the outcome. Once you've completing identifying the outcomes and assessment measures, simply mapping roles and responsibilities provides an easy tracking system and helps ensure that high quality data are available.

Measure	What Needs To Be Done?	Who Is Responsible?	What Is The Timeframe?
Compile and count the number of errors on transcripts reported by students.	Develop an Excel spreadsheet to enter all errors, date identified, and solution.	Assistant Registrar will create and monitor spreadsheet. All staff will have access to enter data.	Start in Spring Semester and run through June.
Review the policies used to maintain and update student records.	Pull together all office procedures on updating records. Review for: inconsistencies, errors, and holes.	Registrar will conduct the analysis.	Review to be completed in June.
Survey students on their perceptions of record accuracy.	Participate in SBC Student Satisfaction Survey. Make sure students are asked about their perception of record accuracy.	Registrar will work with OIE to draft appropriate question.	Survey questions due by Feb 1. Results available by May 15.
Conduct a focus group of Registrar office staff on accuracy issues.	Focus group to be held as part of staff meeting.	Registrar will work with OIE to develop questions. Dir OIE will conduct focus group.	Focus group in March or April depending on other agenda items. Review of comments in July.

Regardless of what types of outcomes are used, all outcomes must be measurable so that its achievement can be observed and verified with evidence.

5: Observed Outcomes & Results

Once the data have been collected and you know whether or not you've met your targets, the next phase of the administrative assessment process is to analyze results. What do they mean for your division or department?

- Why did you meet/not meet your target?
- What does this tell you about your strengths as a division or unit? Your weaknesses? What worked well, and what needs to be improved?
- Which strategies were successful? Which were not?
- What will you do differently going forward?

The purpose of outcomes assessment is to provide you with meaningful information about the effectiveness of your operations, not to evaluate individual achievement or to reward or punish staff. Meaningful, effective assessment can only happen from a place of safety, where staff members feel empowered to examine, analyze, and report the unit's results honestly. Results that show 100% of targets met are not generally helpful, since they likely indicate that targets were set too low, or that the assessment process is not truly effective.

6: Evidence of Seeking Improvement

The most important part of the assessment cycle is the discussion of how observed outcomes and results will be used to enhance future performance and how those ideas will be articulated in the unit's and division's plans for the next year.

Each problem or issue that is identified needs to have an action to improve performance. Every outcome for which 100% of the target was achieved represents an opportunity to further improve and requires an action which demonstrates this. Sometimes the results will point you in a direction to look further, showing you trends or directions that may require additional investigation. For future actions, you should include when you foresee those actions taking place, who will be responsible, and what resources are needed.

The Assessment Toolbox

Improving the effectiveness of your administrative operations should be considered a continuous process. You can use the process improvement tools summarized in this section to help you write effectiveness into the core of your administrative mission.

After Action Review[5]

Organizational learning requires that departments continuously assess their performance to identify and learn from successes and failures. The After Action Review (AAR) is a simple but powerful tool to help do this. Conducting an AAR at the end of a project, program or event can help your department learn from your efforts. Furthermore, sharing the results from your AAR can help future teams learn your successful strategies and avoid pitfalls you have worked to overcome.
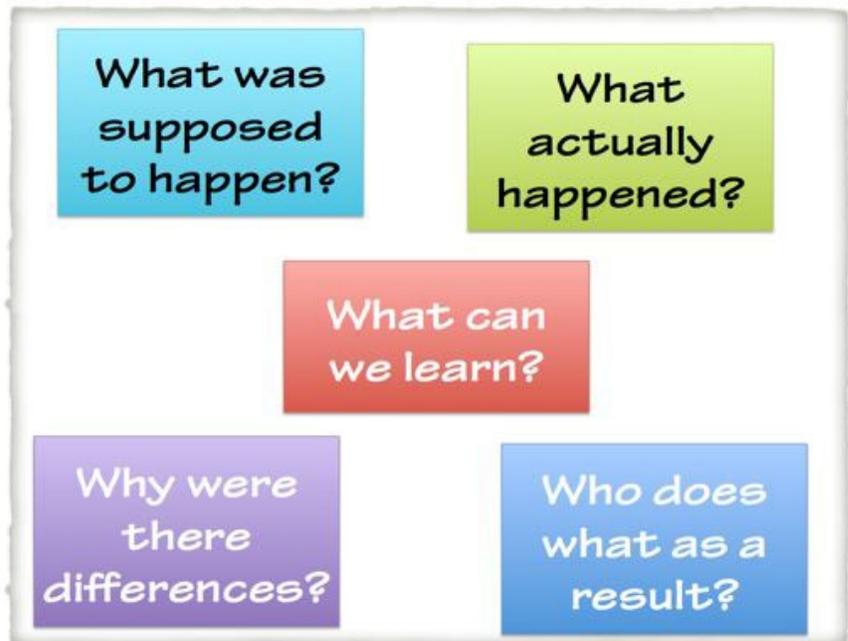
First used by the Army on combat missions, the AAR is a structured approach for reflecting on the work of a group and identifying strengths, weaknesses, and areas for improvement. It is routinely used by project teams in the VA's Emergency Management program and by corporations such as GE, British Petroleum and Motorola. An AAR conducted after hurricane Katrina led to new systems for communications during natural disasters.

An After-Action Review template can be found in Attachment A. A fillable **After-Action Review Form** is available in the Assessment Committee's Google Drive.

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[5] https://www.cebma.org/wp-content/uploads/Guide-to-the-after_action_review.pdf

Process Mapping[6]

Process mapping is a management tool used to visually depict the flow of work and the steps and people involved in an administrative process. These maps are also commonly referred to as flowcharts or workflow diagrams. Organizations use this tool to gain a better understanding of a process and to improve its efficiency. By creating easy to follow diagrams, stakeholders can identify aspects of a process that can be improved. This includes identifying bottlenecks in workflows and other inefficiencies like repetitive tasks that are ideal for automaton.

The benefits of creating a process map

Process mapping offers many benefits. We mentioned several benefits at an abstract level – understanding a process better and improving efficiency. More specific benefits of creating a process map include:

Boosting job satisfaction. Employees know what to expect, what their responsibilities are, and appreciate the transparency that a process map provides.

Improve employee performance. Employees that understand their roles and where to find help when they need it are more productive.

User friendly. Administrative process maps are simple to follow and are ideal for tasks like employee training and brainstorming sessions. BPM software makes it easy to design and test processes, as well as share them with the team.

Certifications. Help organizations obtain and maintain industry certifications like ISO 9000 and 9001.

Problem solving. An administrative process map allows organizations to test hypotheticals and what-ifs making it easier to identify problems and potential solutions.

There are many different types of process maps. Which one you use depends largely on the type of process that you want to map and what your administrative objectives are.
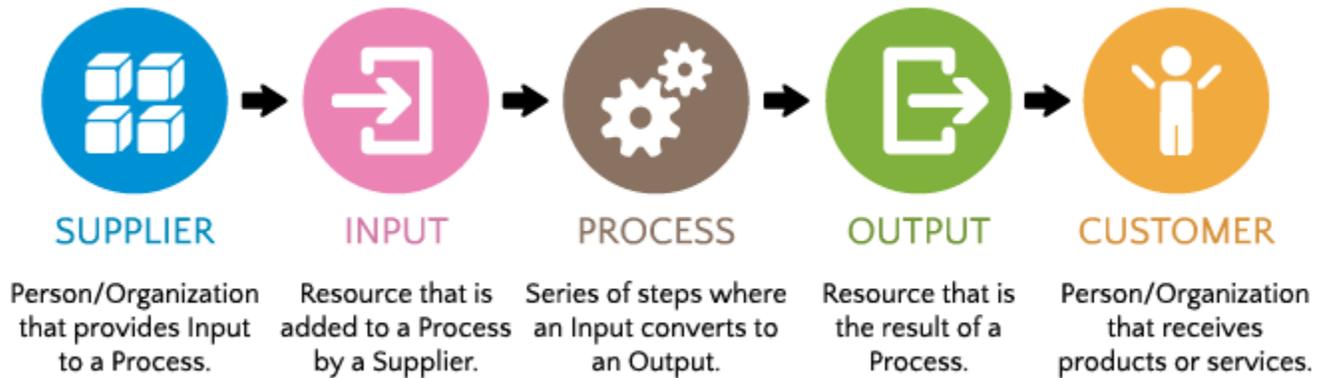
SIPOC Diagram

SIPOC is an acronym for Suppliers, Inputs, Processes, Outputs, and Customers. The methodology acts as a tool to identify the inputs and outputs of target administrative processes, to determine the process owner, customers, suppliers, and to establish clear boundaries for the process. Use the SIPOC methodology during the measure phase of DMAIC, to analyze different processes in a working system. The SIPOC methodology gives an overall system perspective by answering the following questions:

- What are the start and the endpoints of the work system?
- What are the essential steps of the work system?
- What are the main inputs and outputs?

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[6] https://www.processmaker.com/blog/an-introduction-to-the-basics-of-process-mapping/

- Who are the key customers (internal and external)?
- Who are the key suppliers (internal and external)?
- What are the customers' demands?

With this information, you can easily identify effectiveness problems or weaknesses.

SUPPLIER → **INPUT** → **PROCESS** → **OUTPUT** → **CUSTOMER**

| SUPPLIER	INPUT	PROCESS	OUTPUT	CUSTOMER
Person/Organization that provides Input to a Process.	Resource that is added to a Process by a Supplier.	Series of steps where an Input converts to an Output.	Resource that is the result of a Process.	Person/Organization that receives products or services.

Kanban Boards

Kanban is a work management system used to identify where work gets stuck or blocked. It's a lean methodology used to communicate what, when and how much of something is needed to be produced via using Kanban boards and task cards. Kanban is an effective method to drive efficiency improvements in a department and reduce waste – when thinking about resource use, you can see how the implementation of Kanban can improve administrative effectiveness. There a 5 main steps to implementing Kanban, which include:

- Visualizing your current workflow – Use a Kanban card to represent each process task. Use Kanban columns to organize these card tasks, e.g. work-in-progress tasks, to do tasks, and done tasks.
- Applying Work-in-Process (WIP) limits – limit the number of work-in-progress tasks.
- Visualize your work – Take all the current and upcoming task items and visualize them via the Kanban board.
- Managing and measuring flow – Flow is a measure of how smoothly work moves through your system. You don't want work stopping and starting frequently. Create a smooth flow by changing the task order on the Kanban board.
- Optimizing iteratively with data – Your Kanban practices should be ever-evolving. Be flexible and stay open to improvements.

Kanban Board
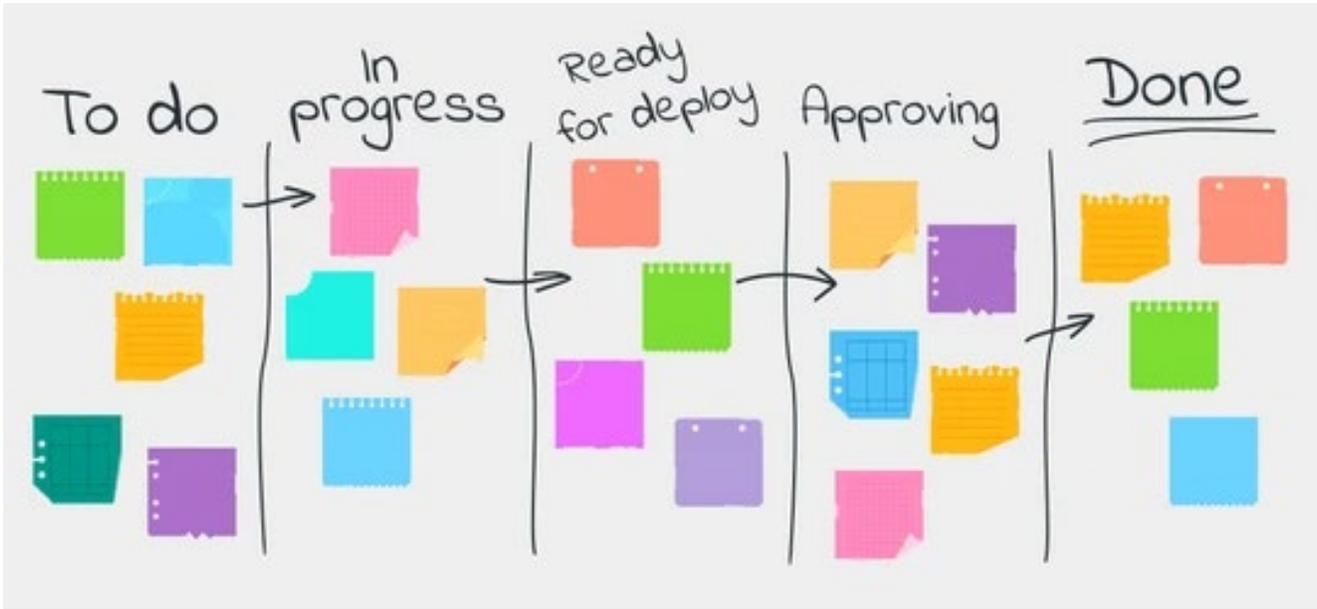
Other Tools For Examining Administrative Effectiveness[7]

Gap Analysis

Gap analysis examines and assesses performance to identify the difference between your current administrative state and where you'd like to be. To complete a gap analysis, you'll need to define:
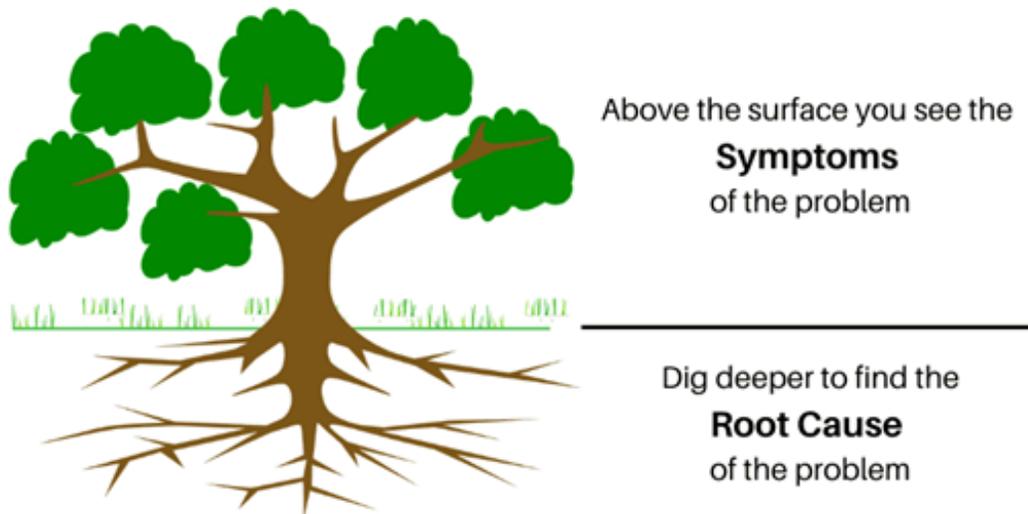
- The current situation, or performance.
- The ideal situation, or potential.
- What needs to be done to get from performance to potential, otherwise known as bridging the gap.

Root-Cause Analysis

Root-Cause analysis helps you understand the causal focus underlying the issues behind your biggest administrative effectiveness pain points. This is a great process improvement tool to use alongside gap analysis. I.e. What's preventing you from reaching your potential state? Root-Cause Analysis acknowledges root cause issues as not-so-obvious problems.

Above the surface you see the
Symptoms
of the problem

Dig deeper to find the
Root Cause
of the problem

A common method to implement Root-Cause Analysis is via the Fishbone Diagram (Ishikawa diagram) – as presented below.

To produce a fishbone diagram, complete the following steps:
- Identify the problem.
- Brainstorm causal factors.
- Construct your fishbone diagram: Begin by recording your main problem at the center of your diagram (the fish spine), e.g. to reduce plastic waste.
- Write down the various potential causal factors. Arrange these around the central problem in branches (the fish rib bones), with the first branch beginning with very broad ideas.
- As you continue down the fish spine, further branches will move on to smaller, more specific categories, until you eventually reach your root cause.
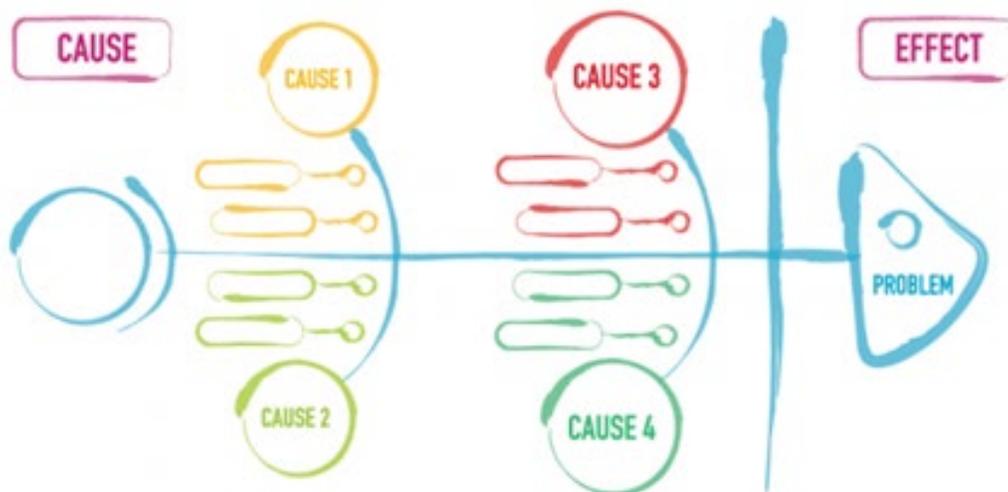
PDCA cycle

The PDCA cycle stands for Plan, Do, Check and Act. It's a process improvement tool detailing 4 steps for implementing effectiveness improvements, as follows:

- Plan: The project team determines what they're planning to change.
- Do: Improvements are made.
- Check: The improved process is compared with the old process, determining whether the changes made were improvements at all.
- Act: Everyone involved in the process plays their part in driving effectiveness improvements.
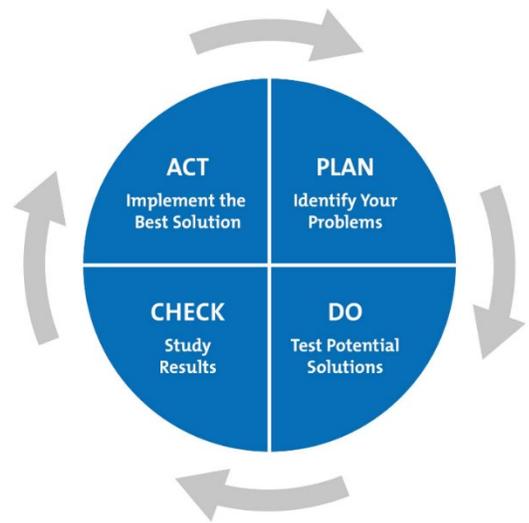
The PDCA cycle centers around the idea that more can always be done. The concept is a cycle, meaning organizations will continuously assess where they lie on the effectiveness agenda and act/make process changes accordingly.

Force Field Analysis

Lewin's Force Field Model gives a problem overview and splits factors into forces for (driving forces) and against (restraining forces) organizational change. When these forces are balanced, there's no change. To introduce organizational change, driving forces need to be boosted and restraining forces need to be alleviated. To accomplish this, the model splits the process of implementing change into 3 stages:
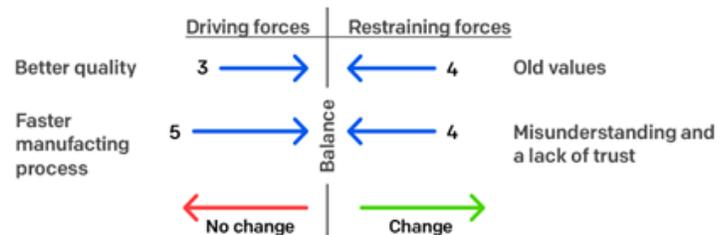
Stage 1, unfreeze: The change needed and the administrative operations affected by this change are defined.

Stage 2, make the changes: During the change phase, fresh practices and ideas are exercised. However, the model encourages the user to acknowledge negative emotions that'll arise during change – e.g. overload, confusion, and disorientation – meeting these emotions with patience and tolerance.

Stage 3, refreeze to new status quo: Once the changes have been deployed, measured, communicated across the team, and feedback has been obtained and acted on, then organizational change is consolidated.

Lean Six Sigma (DMAIC)

Lean Six Sigma gives a structured approach to scrutinize operations, looking at data and processes to uncover and remove waste. You can implement the lean Six Sigma process improvement tool through the 5-stepped model, DMAIC, as follows:

DEFINE what administrative operations need to be improved. g. What operations produce the most waste? Where can you save energy?

MEASURE current process performance. Just like you have done during gap analysis.

ANALYZE data to determine how the administrative operation needs to be improved.

IMPROVE your process continuously. You can implement the PDCA cycle to make continuous improvements.

CONTROL your processes for ongoing effectiveness and optimized performance. Create a system or process to monitor results.

Using the DMAIC methodology will deliver continuous improvements, to help you establish effective administrative operations.
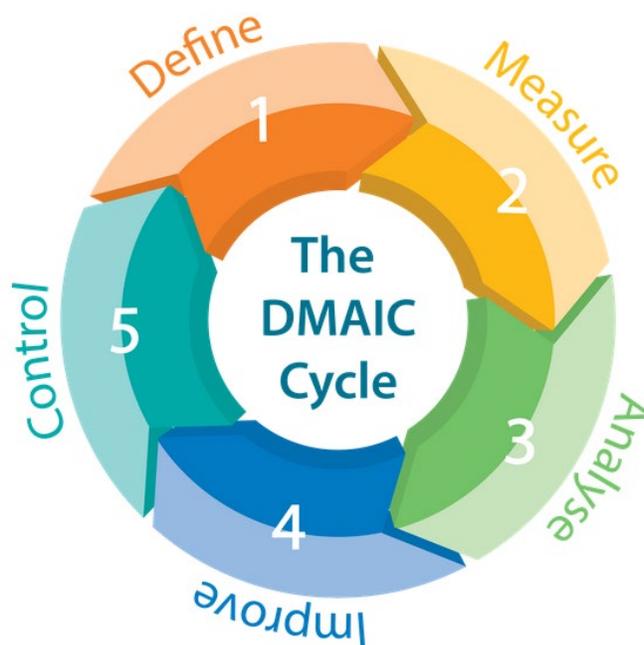
Prioritization Matrix

Prioritization matrix analysis is a task analysis method used to identify and depict relationships between concepts. Effectiveness-related issues are complex and are defined as wicked problems. Wicked in the sense that the issues are interconnected, have many feedback loops – meaning improvements in one area can degrade another area – and require cross-sector collaboration. Deciphering the appropriate administrative resolutions can therefore feel overwhelming – where do you start? The prioritization matrix helps you order your priorities, grouping process solutions into four separate categories of importance.

To complete a prioritization matrix, follow the below steps:
- List your options: These could be tasks, projects, service/product features – basically whatever you want to try and figure out how to prioritize.
- Evaluate your options: Determine the consequences and benefits for each option and decide what's most/least important and what's most/least urgent.

- View your completed matrix: Options of high importance and urgency are to be completed now. Options of high importance but low urgency are to be completed next. Options that are of low importance and high urgency are to be completed last. Low important and low urgent options are grouped into "never do" category.
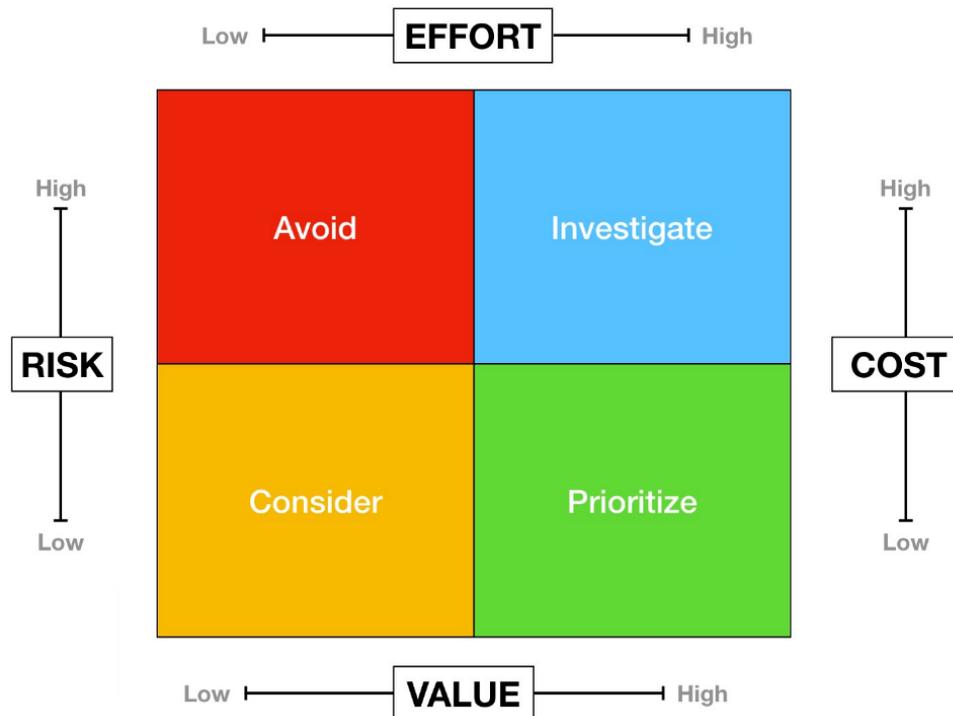
Program Logic Model

A program logic model sets out the resources and activities that comprise a program, and the changes that are expected to result from them. It visually represents the relationships between the program inputs, goals and activities, its operational and organizational resources, the techniques and practices, and the expected outputs and effects.
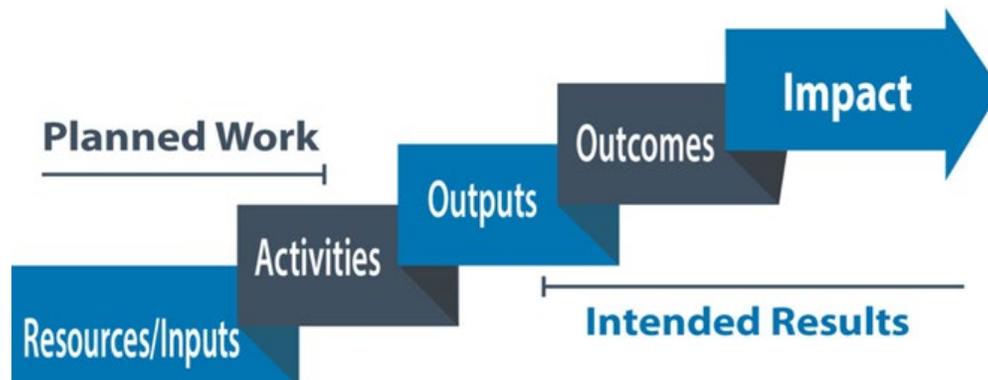
Vision (impact, long-term outcome, goal) Your vision statement is a reflection of the purpose and spirit behind your actions. All activities and outcomes should contribute to the achievement of your vision. A truly inspired vision statement may not be measurable in the short-term, and your program doesn't necessarily have to be responsible for single-handedly achieving it. Rather, your program may be *contributing* to its achievement.

Population and Population Needs   A description of the population you are targeting and the specific needs you intend to address through your services.

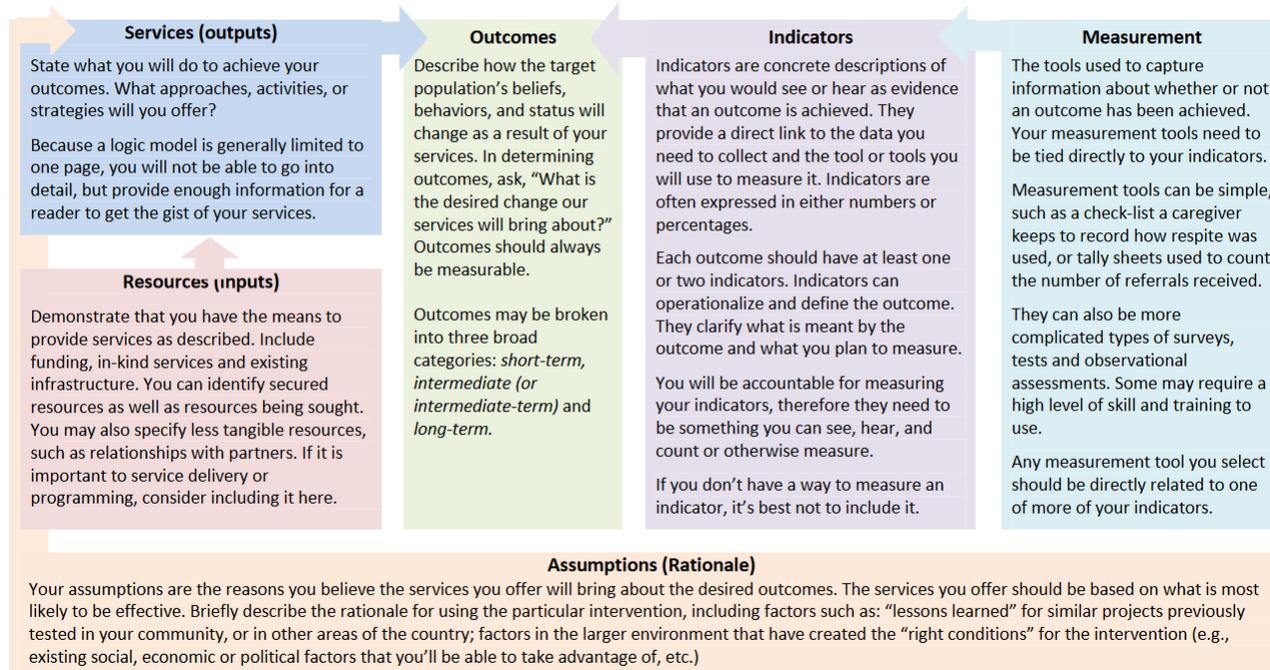| Services (outputs)	Outcomes	Indicators	Measurement
State what you will do to achieve your outcomes. What approaches, activities, or strategies will you offer? Because a logic model is generally limited to one page, you will not be able to go into detail, but provide enough information for a reader to get the gist of your services.	Describe how the target population's beliefs, behaviors, and status will change as a result of your services. In determining outcomes, ask, "What is the desired change our services will bring about?" Outcomes should always be measurable. Outcomes may be broken into three broad categories: *short-term, intermediate (or intermediate-term)* and *long-term.*	Indicators are concrete descriptions of what you would see or hear as evidence that an outcome is achieved. They provide a direct link to the data you need to collect and the tool or tools you will use to measure it. Indicators are often expressed in either numbers or percentages. Each outcome should have at least one or two indicators. Indicators can operationalize and define the outcome. They clarify what is meant by the outcome and what you plan to measure. You will be accountable for measuring your indicators, therefore they need to be something you can see, hear, and count or otherwise measure. If you don't have a way to measure an indicator, it's best not to include it.	The tools used to capture information about whether or not an outcome has been achieved. Your measurement tools need to be tied directly to your indicators. Measurement tools can be simple, such as a check-list a caregiver keeps to record how respite was used, or tally sheets used to count the number of referrals received. They can also be more complicated types of surveys, tests and observational assessments. Some may require a high level of skill and training to use. Any measurement tool you select should be directly related to one of more of your indicators.

Resources (inputs)

Demonstrate that you have the means to provide services as described. Include funding, in-kind services and existing infrastructure. You can identify secured resources as well as resources being sought. You may also specify less tangible resources, such as relationships with partners. If it is important to service delivery or programming, consider including it here.

Assumptions (Rationale)

Your assumptions are the reasons you believe the services you offer will bring about the desired outcomes. The services you offer should be based on what is most likely to be effective. Briefly describe the rationale for using the particular intervention, including factors such as: "lessons learned" for similar projects previously tested in your community, or in other areas of the country; factors in the larger environment that have created the "right conditions" for the intervention (e.g., existing social, economic or political factors that you'll be able to take advantage of, etc.)

https://friendsnrc.org/wp-content/uploads/2020/02/Annotated-Logic-Model.pdf

A logic model presents a picture of how your department is supposed to work. It explains why your strategy is a good solution to the problem at hand. Effective logic models make an explicit, often visual, statement of the activities that will bring about change and the results you expect to see for the college and its stakeholders. A logic model keeps participants in the effort moving in the same direction by providing a common language and point of reference. More than an observer's tool, logic models become part of the work itself. They energize and rally support by declaring precisely what you're trying to accomplish and how.

When can a logic model be used?

Logic models are useful for both new and existing departments, programs and initiatives. Planners, program managers, trainers, evaluators, advocates and other stakeholders can use a logic model in several ways. Here are examples of the various times that a logic model could be used:

During planning to:
- clarify department strategy
- identify appropriate outcome targets (and avoid over-promising)
- align your efforts with those of the college
- write a grant proposal or a request for budget allocations
- assess the potential effectiveness of an approach
- set priorities for allocating resources
- estimate timelines
- identify necessary partnerships
- negotiate roles and responsibilities
- focus discussions and make planning time more efficient

During implementation to:

- provide an inventory of what you have and what you need to operate the department effectively
- develop a management plan
- incorporate findings from research and demonstration projects
- make mid-course adjustments
- reduce or avoid unintended effects

During staff and stakeholder orientation to:
- explain how the overall department works
- show how different people work together
- define what each person is expected to do
- indicate how one would know if the department is effective

During assessment to:
- document accomplishments
- organize evidence about the department
- identify differences between ideal processes and its real operations
- determine which concepts will (and will not) be measured
- frame questions about attribution (of cause and effect) and contribution (of initiative components to the outcomes)
- specify the nature of questions being asked
- prepare reports and other media
- tell the story of the department

During advocacy to:
- showcase the contributions of the department
- explain how resource will be used effectively

Suggested Administrative Effectiveness Measures

This section provides an inventory of administrative effectiveness assessment measures.

Finance and Administration:

Quantitative Measures:
- Business plan surplus or deficit
- Endowment growth/shrinkage
- Bond Rating
- Financial Ratios:
  - Operating Margin
  - Operating Margin excluding Gifts
  - Operating Cash Flow Margin
  - Direct Debt Service Coverage
  - Return on Financial Resources
- Contribution Ratios:
  - Tuition and Auxiliary Income as a % of Revenue
  - Investment Income as a % of Revenue
  - Gifts as a % of Revenue
  - Grants & Contracts as a % of Revenue
  - State Appropriations as a % of Revenue
  - Liquidity Ratio
- Select Financial Trends:
  - Administrative Costs (Institutional Support Services)
  - General Administrative Costs
  - General Institutional Services Costs
  - Maintenance & Operations Costs
  - Indirect Cost Recovery Ratios

Financial Responsibility Standards:
- Primary Reserve
- Equity Ratio
- Net Income Ratio
- Composite Score

Admissions:

Quantitative Measures:
- Number of inquiries, applications, interviews, and confirmations by program
- Inquiries, applications, interviews, and confirmations vs. enrollment management goals
- Acceptance rates by program
- Yield rates by program
- Student diversity
- Open House attendance and contribution of marketing efforts
- Costs related to the admissions process

Qualitative Measures:
- Applicant satisfaction surveys
- Admissions Process Satisfaction
- Usage of online application tracking/status tools
- Perceived access to and helpfulness of the Admissions staff

Registrar:

Quantitative Measures:
- Time to issuance of transcripts
- Time to issuance of grades
- Time to issuance of academic status letters
- Time required to complete the registration process
- Time involved with adding/dropping classes
- Time required for leave of absence
- Time required for withdrawal validations
- Incidents of (Family Educational Rights & Privacy Act (FERPA) noncompliance
- Incidents of incorrect status reporting

Qualitative Measures:
- Student satisfaction with the availability of courses
- Student satisfaction with registration procedures

Financial Aid:

Quantitative Measures:
- Number of applications processed
- Time from application receipt to disbursement
- Scholarship dollars awarded
- Number of students working for pay on campus
- Annual median student debt
- Staff-to-enrollment ratio
- A-133 audits

Qualitative Measures:
- Student satisfaction with financial aid services
- Perceived usefulness of financial counseling

Bursar:

Quantitative Measures:
- Receipts per academic term
- Percentage of errors on bills per academic term and/or academic year
- Outstanding student receivables by term (aging of accounts)
- Amount of student receivables written down/off

Qualitative Measures:
- Student satisfaction with billing and payment procedures

Alumni Relations and Development:

Quantitative Measures:
- Total voluntary support
- Number of unrestricted dollars raised vs. goals
- Number of restricted dollars raised vs. goals
- Number of alumni events and attendees
- Number of development events and attendees
- Cost per dollar raised

Qualitative Measures:
- Alumni and/or donor satisfaction surveys
- Donor participation in "cultivating" events
- Donor participation on development committees
- Awareness and perceived clarity of development mission statement(s)
- Student satisfaction with alumni services

Library:

Quantitative Measures:
- Library budget or expenditures
- Collection size
- Collection use
- Services delivered
- Staff-to-student ratio

Qualitative Measures:
- Student satisfaction with the library collection
- Student satisfaction with the library services
- Student satisfaction with the library facilities

Research and Sponsored Programs:

Quantitative Measures:
- Amount of extramural (contracts & grants) funding (and by category: federal, state, city, and private)
- Amount of internal funding
- Scores on peer reviewed research grant applications
- Number of research publications, presentations, posters, intra-program and inter-institutional collaborations
- Number of students participating in research via formal course registrations
- Number (proportion) of faculty involved in research and scholarly activity
- Number of students participating in research via volunteer efforts
- Number of square feet available for faculty research and related offices
- Number of regulatory submissions
- Number of favorable and unfavorable federal compliance reports
- A-133 audits

Qualitative Measures:
- Satisfaction surveys regarding research resources and opportunities
- Perceived satisfaction with regulatory review committee processes
- Perceived ease of access to research related forms and policies
- Faculty review of research dissertation quality
- Student demonstrations of scientific inquiry by designing, conducting, presenting, or interpreting research in their field of study

Information Technology (IT) Services:

Quantitative Measures:
- Number of security breaches
- Percentage of up time for each critical system
- Percentage of software of the latest version
- Percentage of software not at latest version upgraded during the academic year
- Number of help desk calls
- Response to help desk calls
- Number of computers, servers, switches upgraded
- Percentage of bandwidth utilized during peak periods
- Percentage of students using lecture capture and mean/standard deviation of time on system
- Number of software, workflow, wireless, bandwidth upgrades/modifications

- Number of late software, workflow upgrades/modifications
- Number and severity of audit findings
- Overall cost of operations by year and students served
- Number of hits and mean/standard deviation of time on site

Qualitative Measures:
- Student satisfaction with campus computers in general
- Student satisfaction with computer lab hours
- Student satisfaction with lab availability
- Student satisfaction with computer availability
- Student satisfaction with wireless Internet availability
- Student satisfaction with academic system availability
- Student satisfaction with off campus access to technology services e.g. the Help Desk
- Frequency of College-related technology use

Student Affairs:

Quantitative Measures:
- Proportion of admitted students asking questions about orientation information
- Proportion of students accessing Student Affairs offices for:
    1) All purposes
    2) Student activities
    3) Personal Counseling
    4) Career services/mentorships
    5) Community service
- Number of complaints about an absence of professionalism

Qualitative Measures:
- Exit survey of graduating seniors
- Perceived accessibility to administration
- Student satisfaction with career planning and placement
- Student satisfaction with student participation on key committees
- Student satisfaction with personal counseling
- Student participation in student activities
- Student participation in internships
- Student volunteer work
- Student satisfaction with the overall social experience
- Student satisfaction with athletic facilities
- Student satisfaction with intramural athletic offerings
- Student satisfaction with student health services
- Student satisfaction with child care services
- Student satisfaction with services for students with disabilities
- Student satisfaction with services for international students
- Student satisfaction with services for veteran students
- Student satisfaction with the women's center
- Student satisfaction with student organizations
- Student satisfaction with the cafeteria/food services
- Student satisfaction with the leadership development program

Human Resources:

Quantitative Measures:
- Longevity of employees by years
- Costs of benefits by benefit type (health care, retirement, vacation, tuition remission, life insurance)
- Median time to fill open positions by job category and in total
- Number of internally- and externally-filed grievances and complaints
- Number of employees accessing special services
- Number of outreach sessions: harassment and diversity training, benefits fairs, retirement fairs, wellness events, employee appreciation events

- Median salary for each job category compared to peer group
- Number of upward salary adjustments made after market comparisons
- Number of career ladders defined by job categories
- Number of performance management evaluations with overall ratings of meets or exceeds expectations
- Number of promotions by job category
- Percent employee turnover by year

Qualitative Measures:
- Employee satisfaction with staff, benefits, hiring practices, training sessions, outreach sessions, employee appreciation events
- Academic Standards & Evaluation:
- Quantitative Measures:
- Number of students served
- Mean wait time for appointments

Qualitative Measures:
- Student expectations concerning adequate academic advisement
- Student satisfaction with academic advising
- Student satisfaction with online advisement (e.g., DegreeWorks)
- Student evaluation of academic advising

Public Safety:

Quantitative Measures:
- U.S. Department of Education crime statistics (CLERY reports)
- State crime statistics
- Safety-related activities (fire drills, student and employee orientations, etc.)
- Expenditures for security-related agendas: lighting, emergency phones, signs, sprinklers, etc.

Qualitative Measures:
- Student satisfaction with campus security
- Perception of security staff responsiveness

Campus Planning & Facilities:

Quantitative Measures:
- Size of capital budget
- Percentage of capital projects completed on time and on budget
- Comparison of electricity and fuel usage and cost by academic year
- Cost of deferred maintenance projects
- Cleaning budgets
- Square footage of additional facilities completed in the academic year
- Days to completion of maintenance requests

Qualitative Measures:
- Student satisfaction with the condition of buildings and grounds
- Cleanliness satisfaction surveys
- Housekeeping staff interactions surveys
- Temperature satisfaction surveys
- Maintenance request satisfaction surveys
- Facilities rating surveys

Media Relations:

Quantitative Measures:
- Number of clicks from online ads to the homepage during the academic year
- Comparisons of inquiries and applications
- Google Analytics data on the website
- Number of clips/media hits

Qualitative Measures:
- Student survey on how they learned about the college/what advertising they had seen
- Review of marketing materials to assure representation of diverse populations
- Evaluation of new outlets for cost/impact

Performing Arts:

Quantitative Measures:
- Number of productions
- Number of tickets sold (total and for each production)
- Attendance as a % of capacity (total and for each production)
- Financial data
- Development data (funding from corporations, trusts, foundations, individuals, etc.)
- Number of news stories on productions/the Performing Arts Center

Qualitative Measures:
- Students who attended an art exhibit, play, dance, music, theatre or other performance

Role of the Assessment Committee

Sweet Briar College has a codified system for identifying expected outcomes for each of its educational programs, assessing the extent to which its programs achieve these outcomes, and documents opportunities for improvement based on analysis of the results.

The Assessment Committee provides oversight and coordination for the College's assessment activities. The Faculty Rulings (XIV.H.1, p. 26-27) describe the assessment committee as follows:

The Assessment Committee, in consultation with the Faculty, develops and implements means to assess the degree to which the College is fulfilling its stated educational Mission. Membership consists of four full-time members of the Faculty appointed for staggered three-year terms and four full-time staff members appointed for staggered three-year terms (a member of the Student Life Office; a member of the Dean's Office; a member of the Finance and Administration Office or the Admissions Office; and a member of the Alumnae and Development Office, the Communications Office, or Computer Services). Serving ex officio (voting) is the Associate Dean of Academic Affairs; serving ex officio (non-voting) is the Dean of the College, the Dean of Student Life, the Coordinator of the Leadership Core, and a representative of the Office of Institutional Effectiveness. Members may serve consecutive terms. (Ruling XIV.H.1, p. 26-27).

The College adopted the five-column assessment model to organize program assessment efforts. Using this framework, annual assessment reports document each administrative department's assessment activities. Reports contain five elements (columns):

1. Department Mission
2. Effectiveness Goals
3. Desired Outcomes
4. Performance Indicators & Criteria for Success
5. Assessment Results
6. Use of Results for Improvement

In 2009-10, the assessment committee adopted evaluative criteria by which each program's assessment efforts are evaluated. The Assessment Planning and Reporting Guidelines describe the criteria in detail and categorizes each criterion into three levels: established, developing or undeveloped. A fully-established assessment program would meet the criteria shown below:

I. Mission Statement

Exemplary □	Acceptable □	Developing □
• Clear and concise • Identifies stakeholders • Specific to the unit (identifies what it does that separates it from other units) • Aligned and consistent with Sweet Briar's mission	• Clear statement of the unit's purpose • Identifies stakeholders • Aligned and consistent with the University and college/division mission statements (if available)	• General statement of the intent of the unit • Does not identify stakeholders • Fails to demonstrate clear alignment with University and college/division mission statements • Does not encompass the entire work of the unit

II. Implemented Improvements from Previous Year

Exemplary □	Acceptable □	Developing □
• Provides concrete evidence of how improvements from previous assessment activity were implemented. • Appropriate action taken on all issues.	• Provides concrete evidence of how improvements from previous assessment activity were implemented • Gives explanation for not implementing planned improvements	• Evidence insufficient or not provided • Not all issues were addressed, without explanation of the delay • Actions taken were not relevant to the issue

III. Outcomes

Exemplary □	Acceptable □	Developing □
• At least two outcomes are listed. • Each outcome is observable and measurable • Each outcome is directly related to mission • Each outcome uses action verbs • Each outcome is directly related to mission • Each outcome describes end result of activities (operational), future expected results (strategic) and/or student learning • Each outcome reflects key results of unit and are tied to strategic goals	• At least two outcomes are listed. • Each outcome is observable and measurable • Each is directly related to mission • Each is tied to strategic goals • Language in at least one of the outcomes may be vague or need revision	• Only one outcome listed • Not clear how outcome could be measured • Fails to demonstrate alignment with university or division mission and/or strategic goals • Does not address key results or functional responsibilities • Not worded so that a single method can measure the entire outcome statement • Not worded as operational, strategic, or learning outcomes, or language needs substantial revision

IV. Assessment Measures and Targets

Exemplary □	Acceptable □	Developing □
• Multiple measures for all outcomes • Direct and indirect measures used, with at least one direct measure for each outcome • Assessment tools clearly described (and attached, as appropriate) and are appropriately designed • Targets are clearly defined for each measure and are sufficiently challenging	• At least two measures for each outcome • Direct and indirect measures are used to assess each outcome • Assessment tools and methodology are described and are relevant to the outcome • Targets are defined for each measure	• Not all outcomes have at least two measures • Few direct measures used • Assessment tools vague or not defined • Targets not defined for each measure

V. Analysis of Results and Implications

Exemplary ☐	Acceptable ☐	Developing ☐
• Clear, complete, and well-organized discussion of results for all outcomes • Clear and substantial evidence that targets were met, partially met, or not met for all measures • Discussion of implications for unit of the results of all assessment measures • Compares results to findings from previous years, if available • Includes supporting documentation (tables, charts, surveys, rubrics, etc.)	• For each outcome, effectively uses tables, graphs, and/or charts to summarize results, if applicable • Clear and well-organized discussion of results for all outcomes; some data might be incomplete or not yet available • Clear and substantial evidence that targets were met, partially met, or not met for all measures • Includes supporting documentation	• Does not discuss results of each assessment measure • Details not given in the analysis • Results are too general to prove whether or not targets were met • Supporting documentation not included

VI. Use of Assessment to Improve Effectiveness

Exemplary ☐	Acceptable ☐	Developing ☐
• Reflects on the assessment process and any needed changes • Demonstrates strong understanding of results, and implications are directly supported by results • Identifies key areas that need attention and defines next steps, including for those outcomes with targets that were fully met. • Improvements reflect what was learned during the assessment process	• Demonstrates understanding of results, and implications are directly supported by results • Identifies key areas that need attention and defines next steps, including for those outcomes with targets that were fully met	• Does not describe what was learned during the assessment process • Does not identify key areas for improvement or describe next steps

After-Action Review	
Project:	**Date:**
My Project	*2022-08-04*
What was supposed to happen? *Summarize purpose and objectives, initial timeline, others involved, outcomes and outputs intended, deliverables.* • .	
What actually happened? *What went really well in the project?* • .	
Where did the process break down? *What was the root cause of the problem?* • .	
What corrective actions were taken? • .	
What worked? What didn't? *What could have been done better? What can be done differently in similar situations in the future to ensure success?* • .	
What will you keep, improve, start, or stop doing? • .	
Provide a clear summary of concrete and actionable recommendations that will improve the process. • .	
Identify tasks and topics requiring leadership attention. • .	
Additional notes? • .	