



**Handbook
Of
Institutional Effectiveness**

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Table of Contents

I.	<u>Introduction to Institutional Effectiveness (IE)</u>	1
II.	<u>The Characteristics of an IE Plan</u>	1
III.	<u>The IE Assessment Continuum and Feedback Loop</u>	2
IV.	<u>Defining the Components of the IE Assessment Plan Cycle</u>	3
V.	<u>The IE Assessment Timeline</u>	5
VI.	<u>Oversight of the IE Assessment Process</u>	6
VII.	<u>Electronic Management of the IE Assessment Process</u>	6
VIII.	<u>The IE Assessment Plan Template</u>	7
IX.	<u>IE Assessment Plan/Report Example</u>	8

[Acronyms](#)

[Glossary of Terms](#)

[Inventory of Direct Assessment Measures](#)

[Inventory of Indirect Assessment Measures](#)

[References](#)

I. Introduction to Institutional Effectiveness

Defining Institutional Effectiveness for Campus Services

Institutional Effectiveness (IE) is a set of ongoing practices and processes used by the department of Campus Services, across all of its units, to demonstrate how well the units are accomplishing their missions, goals and objectives and supporting the strategic plan of the Georgia Institute of Technology and the Campus Services imperatives. In order to implement a process of institutional effectiveness, a unit “defines expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on an analysis of the results” (SACSCOC, 2012, p. 27). Planning and assessment for the department is based on the fifth goal of the Institute’s strategic plan “relentlessly focusing on institutional effectiveness.”

The Value of an Institutional Effectiveness Assessment Process

The implementation of an assessment process serves many purposes for the organization. First, the results of the process provide information to units on how they can continuously improve their services, operational outcomes and student learning/development. Second, the results celebrate the accomplishments of the units in meeting their goals and the goals of the Institute. Third, the process provides information and evidence for making decisions, implementing policies, providing future organizational direction, and efficiently allocating resources. Lastly, the process satisfies reporting on accountability measures for any internal and external entities such as accreditors and the Institute.

The Institutional Effectiveness Process

Although the model presented in this handbook identifies the common elements of the planning and assessment processes for the Campus Services department, the model is not static. As the processes mature and as the needs and priorities of the Campus Services department change, the model and its elements may also evolve to better serve the department. The assessment of institutional effectiveness is cyclical, evidence-based, documented, occurs on an annual basis, and is part of the routine operational culture of the Campus Services department. It should be noted, however, that the assessment process is neither anecdotal, nor comparative (i.e. the results of one unit are not compared to another). Further, the process should not rely on a single measure for the purpose of drawing conclusions. The results of assessment provide evidence to answer the question: how well are the Campus Services units achieving their missions, goals and objectives and what are they doing to improve?

II. The Characteristics of an Institutional Effectiveness Assessment Plan

The Campus Services department consists of the following units: Auxiliary Operations, Community Health and Well-being, Housing, Human Resources (GTHR), the Information Technology Group (ITG), Parking and Transportation (PTS), and Procurement and Business Services. Some of these departments are further divided into sub-units depending on their organizational structure. Each unit, in coordination with relevant stakeholders, is responsible for

creating strategic and assessment plans. The content of the plans should meet the unique needs of each unit, but include the following common elements:

The Strategic/Assessment Plan

1. A **mission** statement which describes the purpose and functions of the unit, identifies the stakeholders it serves, and demonstrates how the unit supports the strategic plan of the Institute and the Campus Services imperatives.
2. Three to five long-term **goals** which focus the efforts of the unit and align with the strategic goals of the Institute and the imperatives of Campus Services.
3. One to three short-term, measurable **objectives** to operationalize each goal and identify a responsible employee to champion the objective.
4. An assessment **measure** for each objective with accompanying quantitative or qualitative data to provide evidence if the objective is being achieved.
5. An aspiring, yet achievable **benchmark** for each assessment measure that serves as the criteria for success.

The Assessment Report

6. An analysis of the **results** of the assessment measures compared to their benchmarks to inform plans for improvement and demonstrate that results are shared with relevant stakeholders.
7. The development and implementation of specific **action plans (projects) for improvement** that also identify budget and resource needs, an implementation timeline, and the responsible person(s).
8. The posting of semi-annual reports on the **progress** of the action plans that include (a) the status of the plan's implementation and progress, (b) the effectiveness of the plan at improving results, and (c) data analysis and corresponding electronic data file.

The outcomes of the annual assessment process are reflective of the performance of individual and/or multiple employees of a department/unit and are often impacted by internal and external forces over which the department may not have control. Therefore, the results of assessment are intended to be interpreted by leadership as a means to help departments identify priorities, determine resource allocation, and promote discussion for further improvement. The planning and assessment process is not intended to be punitive.

III. The IE Assessment Continuum and the Feedback Loop

The planning and assessment process is cyclical in nature. Once the structure of the assessment plan is organized, units annually analyze and report on the results of their assessment measures. This information, in turn, is used to implement changes and improvements as warranted. Typically, the mission and goals of the department remain stable over the timeframe of the plan. The objectives, measures and benchmarks may be modified annually, as needed, to meet changes in the unit's needs and priorities. The Campus Services assessment cycle is illustrated in the figure on the following page.

Institutional Effectiveness Continuum and Feedback Loop



IV. Defining the Components of the IE Assessment Plan Cycle

The following sections provide an in-depth description of the key elements of the planning and assessment processes to guide the development of plans and manage the reporting requirements for the Campus Services units. (See template on p. 7 for the elements of the assessment plan and report).

1. **Organize**-Identify key personnel, committees or organizational structures that will be responsible for or contribute to the strategic/assessment plan. The greater the level of employee participation and involvement in the development of the plan, the more ownership employees will have of the process, the plan, its outcomes and developing action plans for improvement. The organization should include identifying who will participate in strategic planning (formulating mission, goals, objectives, measurement methods and benchmarks), and who will be responsible for assessment reporting (responsible for collecting data, entering results, formulating and entering action plans, and entering action plan progress).

Also, each unit will define the unit structure for the assessment plan. The structure may be:

- a. Comprehensive: one plan that encompasses the unit and any sub units, or
- b. Individual: each sub unit has a unique plan (this structure is recommended for sub-units with missions and goals that may differ significantly from that of the over-arching unit).

Each unit should forward the name of an assessment liaison to the Director of Unit Plan and Assessment for Campus Services. The liaison should be an employee with a significant role in the planning and assessment processes and some responsibility for data entry into the assessment management system.

2. **Mission**-The mission of the unit is a clearly defined broad statement of its purpose(s) and function(s). The mission identifies the services, programs and/or contributions the unit makes to support the institution and serve its stakeholders. The mission also differentiates the unit from other units in the Campus Services department.
3. **Goals**-The goal statements capture the intended purposes of the unit and demonstrate support for the unit's mission and the goals of the Institute and Campus Services imperatives. Goals describe broad, over-arching areas of focus for the unit and are typically stable over time. Goals should reflect the input of various stakeholders involved in unit planning. The goals also serve as a link between the higher level strategic plans and the unit's objectives. Some professional associations (see #4 below for an acronym list) suggest goals for various campus services departments. Goals should be operational- and, if applicable, student learning-oriented (units that employ a significant number of students should consider setting a goal related to student learning, engagement, development and/or workplace professionalism). Each unit should identify three to five goals.
4. **Objectives**-The term objectives is used interchangeably with outcomes. An objective or outcome is a more precise and measurable statement that operationalizes the unit's goals. The objective describes an intended quality or expectation of key functions, operations, services or student learning provided by the unit that can reasonably be achieved within an expected timeframe. Objectives should measure something useful and meaningful to the unit. An objective should use an action verb which can be measured by the assessment method. Each objective should identify an employee of the unit who is the owner* or champion of the objective. Some areas that objectives may address are: productivity, efficiency, revenue generation, processes, effectiveness, quality, service satisfaction, student learning/engagement/development, or behavioral intent to change. Units may also refer to their respective professional associations for ideas on goals, objectives and measurement methods such as: AASHE, ACHA, ACUHO-I, CAS, CUPA-HR, NACAS, NACS, NACUBO, NACUFS, NACURH, NASPA, NIRSA, and SHRM. Lastly, units may also derive goals and objectives from any comprehensive external/peer evaluator review recommendations that may have been conducted for their unit.

*Owner responsibilities may include annual data collection (including frequency), analysis and dissemination of results, the development and implementation of action plans (in coordination with colleagues as needed) and reporting on action plan progress.

5. **Assessment measures/methods**-The measures and methods are defined as evidence used to determine if the unit is achieving its expected results.
 - a. Units should inventory existing data that may be useful for measuring the objectives. Data may be unit specific, originate as part of Campus Services'

- annual data collection (e.g. satisfaction survey, energy usage, dashboards) or originate from the Institute (e.g. NSSE or CIRP).
- b. The use of **multiple** methods to measure each objective is considered best practices so subsequent actions for improvement on not based on a single data point.
 - c. Measurements are classified as either direct or indirect methods:
 - i. **Direct** methods are considered quantitative (numerical) and objective
 - ii. **Indirect** methods are considered qualitative and subject to bias. They typically ask for opinions, perceptions or self-reports (e.g. health behaviors).
 - d. Methods should be valid (actually measure the objective) and the data should be reliable (consistent, trustworthy, and useful for decision-making).
6. **Benchmarks/Targets**-An achievement target is set for each assessment measure. The target determines an acceptable, yet aspirational, level of performance to determine if the objective is successfully being accomplished. Benchmarks may be set based on internal and external standards. Internal standards include a unit's past performance, future projections, trend analyses, extrapolation, and input from employees. External standards include comparing a unit's results to accepted professional standards or identified peer performance. Benchmarks may be longitudinal, longitudinal with interim targets, or short-term (e.g. annually). Targets should identify specific results to determine the level of accomplishment.
7. **Results**-The results of assessment represent the description of the outcome(s) from the evidence collected and an analysis of related data. The data file should be attached to the result. The analysis should help the department or unit draw conclusions and make informed professional judgments based on the evidence. The findings may identify patterns of consistency, long-term trends, year-over-year changes, areas of strengths and weaknesses, gaps in services or programs, and internal and external influences on the results. The results description should also demonstrate dissemination to ensure the results are communicated to relevant stakeholders and those stakeholders have input on the analysis and any future action plans. The data and their analyses logically inform any improvements and changes the unit plans to implement.
8. **Action/Project Plans**-Based on the conclusions drawn from the analysis of the results, an action plan for improvement should be developed if the benchmark was not or partially met. Action plans may also be created for benchmarks which met their criteria for success as evidence of continuous improvement. The action plan should describe a specific activity or project designed with input from relevant stakeholders. The action plan also identifies any monetary and non-monetary resources needed, an implementation timeline and responsible person(s). For action plans with monetary requirements, the monies may need to be acquired from the current fiscal year's budget. This may necessitate a line item transfer from an existing source. For action plans with greater resource implications, the timeline for the action plan may need to encompass more than one year, with the year action plan reflecting the budget proposal, and if approved, the subsequent year's action plan representing the implementation of the plan/project.

9. **Action Plan/Project Progress**—Once action plans/projects have been implemented, progress is reported semi-annually. The progress on the action plans describes first, the status of the action plan’s implementation, and second, the effectiveness of the action plan. In order to determine if an action plan is effective, the objective owners should examine their data evidence to identify if there has been a change. Depending on the timeframe to collect evidence, the effectiveness of an action plan may not be determined until the end of the fiscal year cycle, or if the action plan/project encompasses multiple years, effectiveness may not be measureable until the plan/project has been completed. If there has been no progress on the action plan, this should be noted in the progress report with a short explanation of why not.

V. The IE Assessment Timeline

The cycle of assessment is based on the fiscal year (July 1-June 30). Units complete their annual assessment reports in July based on the fiscal year’s results ending in June. Action plans/projects for continuous improvement are developed and implemented for the next fiscal year, and the cycle repeats. Unit reports are reviewed by appropriate senior/executive directors as applicable to the unique organizational structure of each department. The Director of Unit Plan and Assessment for Campus Services then provides an executive summary to the vice-president of Campus Services (September-October) and also feedback to the units on the assessment process.

VI. Oversight of the IE Assessment Process

The oversight for the IE assessment process in the Campus Services department is the primary responsibility of the Director of Unit Plan and Assessment, in coordination with the input of the leadership and employees of each department. Each unit also identifies an assessment liaison(s) with whom the Director periodically meets. The Director assists with strategic planning, the development of assessment plans, data collection and reporting. The Director also serves as a resource for members of the Campus Services Department and as the Campus Services liaison for assessment activities at the Institute.

VII. Electronic Management of the IE Assessment Process

The assessment process is managed electronically for the purposes of creating an assessment plans and reporting. Assessment plans and reports are tracked in an assessment management system, Compliance Assist. Periodically, the tool is reviewed for its effectiveness with managing the assessment process and changes may be made as needed.

VIII. The IE Assessment Plan Template

Unit Mission: Broad statement of the department’s purpose and functions, relevant stakeholders and support of Institute’s strategic plan.

Goals	Goal Relationships	Objectives [Responsible person(s)]	Measurement Method (see inventory beginning p. 14)	Benchmark/Target	Results/Data Evidence	Action Plans/Projects	Action Plan Progress (2)
3-5 per department (more if needed)	Aligned with the strategic goals of GaTech and the strategic imperatives of Campus Services	1-3 per goal (more if needed)	Direct (preferred)- processing times, increases/decreases, learning (pre/post), behavioral change, percent changes, supervisor evaluations of students	Aspirational but attainable and justifiable (look at historical or trend data, may compare to internal or external (e.g. equivalent peers) benchmarks	Reported annually. Electronic data file accompanies result.	Based on results, action plans/projects identify what will be done to try to improve/change the results.	Semi-Annually (January and July) The progress identifies what has been completed on the action plan to-date. It may also describe whether or not the plan was effective in changing the results.
Address (as applicable) 1. Service/support to campus constituents 2. Student learning/ engagement/development 3. Revenue 4. Sustainability 5. Personnel/relations 6. Facilities 7. Communication 8. Partnerships 9. Other	Must be evidence-based (i.e. can you provide “proof”) in order for the alignment to be valid	Measurable statements that describe the desired qualities of key functions and services of the department. Objectives are outcomes that are more precise and specific than goals and are aligned with key processes and functions of the department.	Indirect-perceptions (i.e. survey results), focus groups, interviews	The benchmark indicates the desired performance level.	Result should include an analysis, not just a reporting of the statistics. Analyses may examine strengths/weaknesses, long- and short-term trends, year- over-year changes, and internal or external influences.	Stated action should be specific and logical based on the analysis of the results.	End-of-Year (July- August) The progress describes the implementation status of the action plan/project, <u>AND</u> the effectiveness of the action plan/project.
Broad statements that describe the overarching long-range intended outcomes, typically not measurable		Qualities = timeliness, accuracy, responsiveness, student learning, student engagement, efficiencies (expenses, savings, time), effectiveness, satisfaction, delivery, competitiveness, improvements, reach, access, usage, compliance, quality assurance, productivity, value	Identify data/information already being collected by the department and determine if it is usable. A single data method may serve more than one objective.	Criteria for success-may be time oriented with interim targets (e.g. By 2020, increase revenue by 10% with a 2.5% annual increase)	Results should include evidence that the information is shared with employees and/or supervisors for input.	Action plans should include budget needs (amount and purpose), implementation and timeline, and responsible person(s).	Effectiveness of the action plan is determined by the data results. The data will indicate whether or not there was a change and if the benchmark was met or if further action is still needed.
Identify key functions or services within the department that contribute to supporting higher level strategic planning		The objective identifies who (person) will be the responsible/champion for reporting, monitoring and creating action plans based on results.	Ensure validity (does the data measure the objective) and reliability (data quality and consistency). The data should be useful for decision-making.			Action plans/projects may be developed even if results met the benchmark to demonstrate continuous improvement.	If there has been no progress on the action plan, this should be noted with a brief explanation of why not.

IX. The IE Assessment Plan/Report Example

Area: Human Resources

Mission: The mission of the Department of Human Resources is to develop and support a diverse and highly skilled community in order to create a positive workplace that helps the [Institute] attract and retain the talent necessary to accomplish its goals. The department delivers best practice human resources consultation and expertise with professionalism, confidentiality, integrity, and respect, while contributing in meaningful ways to the mission of the [Institute] (from <http://www.swarthmore.edu/assessment/human-resources>).

Goals	Goal Relationships	Objectives [Responsible person(s)]	Measurement Method	Benchmark/Target	Results/Data Evidence	Action Plan(s)	Action Plan Progress (2)
Develop leading strategies in human resources employment functions (i.e. recruiting, retaining, and compensating employees) to ensure fair and ethical practices, meet market demands, and deliver superior customer service.	GaTech-5 CS-2	Ensure median salaries for all employee classifications are market competitive. Responsible Person [XXX]	CUPA-HR Salary Survey for faculty, administrators and non-exempt staff	GaTech median salary will be equal to or better than the CUPA-HR median salary for research institutions for <u>each</u> employee classification	Benchmark partially met. Data indicate that the median for GaTech salaries for faculty and administrators was equivalent to the CUPA-HR median for research institutions. The median salary salaries for the comparison groups were \$XX and \$XX. The median salary comparison for non-exempt staff was significantly lower than the CUPA-HR median. The results were discussed with the members of the compensation unit and the unit believes the difference may be attributable to the fact that the last non-exempt compensation review was conducted over 5 years ago and salary ranges have not been adjusted since that time.	Conduct a peer compensation review for non-exempt staff and adjust salary scales as needed. Cost: \$20K for peer study Implementation and Timeline: Fall 16-Secure funding for the study. Spring 17-Conduct study and analyze results Responsible person(s): [XXX]	Mid-Year: Budget request submitted and approved for project funding. The project will begin January 2018. End-of-Year: The peer study was conducted and results are were analyzed. The action plan was completed. The results indicate that the salary scales for non-exempt staff need to be adjusted by \$XX for the Institute to be at the peer median. Given the significant budget implications involved with an adjustment, HR will develop an implementation schedule for leadership review and approval. Based on the data, the benchmark was not met. This objective will be rolled-over to the next fiscal year to allow time for salary adjustments.

Acronyms

Acronym	Designation
AASHE	The Association for the Advancement of Sustainability in Higher Education
ACHA	American College Health Association
ACUHO-I	Association of College and University Housing Officers-International
ADA	Americans with Disabilities Act
CAS	Council for the Advancement of Standards in Higher Education
CIRP	Cooperative Institution Research Program
CUPA-HR	College and University Professional Association for Human Resources
EBI	Educational Benchmarking, Inc. (currently called Skyfactor)
FTEs	Full-Time Equivalent Students
GPA	Grade Point Average
GSF	Gross Square Footage
HEOA	Higher Education Opportunity Act
NACAS	National Association of College Auxiliary Services
NACS	National Association of College Stores
NACUBO	National Association of College and University Business Officers
NACUFS	National Association of College and University Food Services
NACURH	National Association of College and University Residence Halls
NAEP	National Association of Educational Procurement Professionals
NASF	Net Assignable Square Footage
NASPA	National Association for Student Personnel Administrators
NIRSA	National Intramural-Recreational Sports Association
NSSE	National Survey of Student Engagement
RA	Resident Advisor
RD	Resident Director
SACSCOC	Southern Association of Colleges and Schools Commission on Colleges
SHRM	Society for Human Resource Management

Glossary of IE Assessment Terms

Accreditation-An earned designation of the institution from a regional accrediting body based on the characteristics the accreditor identifies for its member institutions. Once initially earned, accreditation is typically reaffirmed after a designated period of time based on an institution's self-study and peer evaluation. Regional accreditation ensures the institution is in compliance with federal expectations and is continuously eligible to receive federal funding to support research and student financial aid.

Analysis of Results-The process of interpreting what the data results or evidence means. The examination of the results support any action plans for improvement. The results should be disseminated to relevant stakeholders who may also have input into the development of any action plans indicated by the results.

Assessment- Assessment is the systematic collection, review, and use of information for the purpose of improvement.

Assessment Management System-The institution's technology solution to managing the assessment process electronically.

Assessment Measures-Performance indicators.

Benchmark-A specific target against which success is determined to achieve an objective.

Criterion-Referenced Measurement-A framework that compares assessment results against an established domain of performance or a set standard (e.g. all Campus Service departments that utilize the satisfaction survey will achieve an average overall rating of 4.0 or higher).

Direct Assessment Measure-A measurement instrument that uses data derived from objective sources such as productivity/service/incidence counts, tracking counts, turn-around-times, revenue, inventory, efficiency, effectiveness, quality, and compliance.

Effectiveness-The degree to which the department is achieving its intended results based on action plans implemented for improvement.

Goal-A broad statement about the department's focus area to help it accomplish its mission.

Indirect Assessment Measure- A measurement instrument that uses subjective information (e.g. opinions and perceptions) from relevant stakeholders such as surveys, ratings, focus groups, and interviews.

Institutional Effectiveness-The process to determine how well an institution is achieving its mission, goals and objectives, and engages in continuous improvement.

Learning Outcomes-The knowledge, skills, attitudes, and habits of mind that result from a student learning experience or student experiential opportunity (e.g. on-campus employment, internship, co-operative, study abroad, and living-learning community participation).

Linkages-Linkages (a.k.a. goal relationships) represent the alignment or the match among goals at different levels of the institution, its departments and units or any external entities as applicable.

Objectives-Statements describing specific and measurable outcomes to operationalize the goals and mission of an organizational unit.

Mission Statement-A description of the primary functions or purposes of an organizational unit, how the unit supports the mission at higher levels of the organization and the relevant stakeholders the unit serves.

Norm-referenced Measurement-A framework for interpreting results by comparing the result with a norm group using the same measurement (e.g. NSSE survey results compared to national or peer institution results).

Qualitative Assessment-Assessment methods that are flexible and naturalistic and are analyzed by looking for recurring patterns and themes such as surveys, interviews, focus groups, observations and judgments.

Quantitative Assessment-Quantitative assessment methods are represented as numerical measurements and can be summarized into meaningful data and analyzed statistically.

Reliability-Reliability is the extent to which measurement data present the same results, regardless of when measurement occurs or who performs it. Reliability is typically characterized by the consistency and trustworthiness of the data.

Responsible Person-A designated champion of a department's objective(s) who is responsible for data collection (including frequency), analysis, dissemination, action plan development and implementation (in coordination with colleagues as needed)

Rubric-A scoring guide that describes: 1) criteria used for evaluations and 2) the performance levels to demonstrate achievement. Rubrics may use both numeric and word descriptor values. Four major formats of a scoring guide include: 1) a **checklist** (the evaluation criteria is present or not, 2) a **rating scale** (the degree to which the evaluation criteria is present), 3) a **holistic rubric** (short, comprehensive, narrative descriptions of performance levels), and 4) an **analytic/descriptive rubric** (defines each criterion and provides a detailed description of expected performance at each performance level).

Southern Association of Colleges and Schools-Commission on College (SACS-COC)-The regional accrediting agency for institutions of higher education in the following states: Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, and Virginia. SACS-COC is recognized the Council for Higher Education Accreditation.

Target-see Benchmark

Validity-The extent to which a performance indicator actually measures what it is intended to measure.

Inventory of Direct Assessment Measures

Bookstore

- Total Sales (per student/square foot)
- Textbook Sales (and by category: New, Used, Digital, and Rented)
- Textbook Costs
- Textbook Usage by Students
- Customer Counts
- Percent of Faculty Adoptions Submitted by Deadline/Early
- Percent of Adoptions On-Time on Shelf
- Non-Textbook Sales
- Secret Shopper Scores
- Inventory Management (Dead Stock, Time on Shelf)
- Revenue from Space Lease Operations
- HEOA Posting Compliance
- Personnel Costs
- Freight Costs

Bursar

- Receipts per Academic Term
- Percentage of Errors on Bills
- Outstanding Student Receivables
- Amount of Student Receivables Written Down/Off

Campus Recreation

- Participation in Programming/Events
- Supervisor Evaluations of Student Employees (Learning)
- Number of Events/Programming Offered
- Facility NASF per FTE
- Student Outcomes (e.g. Retention, GPA, learning, development) correlated to Participation

Communication (also Marketing)

- Web Page Analytics (e.g. hits, time spent, and views)
- Social Media (e.g. “likes”, “followers”, “re-tweets”, and blog comments)
- Audience Perceptions (surveys, focus groups)
- Email “Opens” and “Forwards”
- Number of Subscribers (e.g. newsletters, RSS feeds, contests, mailing lists, downloads)
- Number of Submissions (e.g. story content for a newsletter)
- Conversions (“click-through rate” for purchases, registrations, donations, participation)
- Coupon Usage

Dining Services

- Comparative Cost of Meal Plans (peers)
- Voluntary Meal Plan Enrollments
- Meal Plan Participation (usage)
- Gross Sales or Revenue (and by category: meal plans, catering, vending, and restaurant)
- Customer Counts
- Wait-Times in Check-out Lines at Peak Periods
- Secret Shopper Scores
- Personnel Costs
- Percent with Dining Plans with Refunds/Rollovers
- Percent/Dollars of Retail Dining Revenue (increase/decrease)
- Percent of Retail Space Occupancy

Finance

- Audit Findings/Management Letter Findings
- Surplus/Deficit
- Financial Ratios
 - Operating Margin (total unrestricted revenue less operating expenses divided by total unrestricted revenues)
 - Operating Cash Flow Margin (increase in net assets plus depreciation plus interest divided by operating revenue)
 - Direct Debt Service Coverage (annual operating surplus (deficit) plus interest and depreciation divided by actual principal and interest payments)
 - Return on Financial Resources (increase (decrease) in total net assets less net investment in plant, property and equipment, net, divided by average financial resources (sum of beginning and ending divided by two))
- Contribution Ratios
 - Fees as a Percent of Total Revenue
 - Investment as a Percent of Total Revenue
 - Contracts as a Percent of Total Revenue
 - State Appropriations as a Percent of Total Revenue
 - Liquidity Ratio (unrestricted fund balance plus long term debt minus plant, property and equipment divided total outstanding principal)
- Select Financial Trends
 - Administrative Costs
 - Maintenance and Operations Costs
- Financial Responsibility Standards
 - Primary Reserve (expendable net assets/unrestricted expenditures)
 - Equity Ratio (net assets divided by total assets)
 - Net Income Ratio (change in unrestricted net assets/total unrestricted income)
 - Composite Score (weighted average of the above ratios for financial responsible institutions should have a composite score of 1.5 or greater)

Facilities

- Capital Budget-Increase/Decrease
- Percentage of Capital Projects Completed On Time and On Budget
- Cost of Deferred Maintenance Projects
- Percent of Budget or Backlog of Deferred Maintenance
- Custodial Efficiency Audits
- GSF Increase
- GSF/FTE
- Facilities Expenditure by GSF (including operations, maintenance, custodial, planned maintenance, and administration)
- Turn-Around Times for Maintenance Requests
- Maintenance and/or Custodial Coverage Ratios
- Percent of Buildings at Age Threshold/Renovation Age/Planned Renewal
- Space vs. Enrollment Growth

Information Technology Services

- Number of Security Breaches
- Percentage of Time Up for Critical System(s)
- Percentage of Software (latest version/upgraded)
- Percentage of "IT" Moved to Cloud
- Number of Help Desk Calls
- Response to Help Desk Calls (Time to Problem Solved)
- Number of Computers, Servers, Switches Upgraded
- Percentage of Bandwidth Utilized During Peak Periods
- Number of Software, Workflow, Wireless, Bandwidth Upgrades/Modifications
- Number of Late Software, Workflow, Wireless, Bandwidth Upgrades/Modifications
- Number and Severity of Audit Findings
- Overall Cost of Operations/People Served
- Number of Hits and Mean/Standard Deviation of Time on Site

Health Initiatives/Services

- Indicators of Advanced Health
- Cost Efficiency
- Number of Visits
- Wait-Times
- Insurance Coverage/Options
- Immunization Compliance
- Ratio of Providers to FTEs
- Participation in Screenings/Immunizations
- Pre/Post of Health Programming
- Number of Programs/Services Offered

Housing

- Percent Occupancy
- Deferred Maintenance
- Maintenance Response Times
- Revenue

Human Resources

- Employee Retention-Longevity by Years
- Cost of Benefits by Benefit Type (health care, retirement, life insurance, etc.)
- 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 Employee Development Trainings (sexual harassment, diversity, benefits fairs, wellness events, employee appreciation, etc.)
- Median/Market Competitive Salaries Compared to Peer Group
- Number of Upward Salary Adjustments Made After Market Comparisons
- Number/Percent of Voluntary Separations and Reason for Leaving
- Number of Promotions by Job Category
- Percent Employee Turnover by Year
- Number/Percent of Performance Evaluations with High Ratings
- Benefits Claims Analyses
- Employee Learning Post-test after Training

Parking and Transportation

- Revenue
- Compliance with ADA requirements
- Spaces per FTEs
- On-Time Transportation Arrivals
- Usage Counts
- Alternative Transportation Usage
 - Number of Car Poolers

Procurement/Purchasing

- Contract monitoring
- Audit findings (may use random samples)
- Employee training (post-test)
- Usage/participation
- Vendor relations (surveys)
- Vendor management (qualification processes, registration, approval)
- Inventory Discrepancies-reduction in lost/stolen inventory
- Tests of controls-acquisition and payment
- Requisition to delivery turn-around times
- Requisition processing times
- Approval turn-around times
- Compliance regulation
- Inventory surplus (storage, disposal of surplus)
- Inventory Management

Residence Life

- Student outcomes (e.g. retention, GPA) Correlated with Participation in Learning Communities
- Student Pre/Post Tests for Educational Programming Knowledge Tests
- Rubric Scoring of Various Programming
- Number of Behavioral Violations/Judicial
- RA Pre/Post Professional Development
- RD Evaluations of RAs

Student Center

- Attendance (building or Information Desk traffic)
- Operations (reservations, occupancy)
- Number of Events
- Number of Student Programs in Facility
- Ticket Sales
- Revenue per NASF

Student Learning/Development

- Employer/Supervisor Ratings
- Rubric Ratings
- Pre/Post Scores
- Student Group Compared to Student Outcomes (e.g. retention, GPA)
- Commitment to Change

Sustainability

Campus Carbon Calculator (Sightlines™ Database-compare to similar type higher education institutions)

Fossil Fuel Emissions and Consumption

Purchased Electric Emissions and Consumption

Comparison of Electricity and Fuel Usage

Comparison of Utility Cost Differences/GSF

Percent of Energy Efficient Facilities/Maintenance Updates

Energy Use Intensity (EUI)-compare to EPA and/or GaTech department means

Count or Effectiveness of Measures in place to:

- Avoid-Steps taken to avoid carbon intensive activities
- Reduce-Activities, facilities, equipment and fuel consumption improvements
- Replace-Replace high carbon energy sources with low-carbon energy sources
 - (e.g. shift to natural gas from other fuels such as oil and coal)
- Offset-e.g. land use/management, destruction of industrial refrigerants

Space vs. Enrollment Growth

LEED Certification

Capital Dollars Spent on

- Space Renewal and Safety Code
- Envelope (outer shell) and Building Systems (HVAC, electrical)
- Infrastructure (utility systems)

Percent/# Using Alternate Transportation

- Carpool, campus transportation, public transportation, Zim Ride, Zip Car, bicycle

Waste Reduction/Recycle

- By Volume: Cardboard, Composting, Biodigesters, Food (including trayless efforts)

Alternative Fuels (# or percent of vehicles converted)

EV Chargers (cumulative usage)

Percentage of total meals served using local food sources

Green Cleaning-percent of total clean products used

Water Efficiency

- Waste reduction, bottle filling station volume

Inventory of Indirect Assessment Measures

Surveys

Institution/Department Originated (e.g. the Campus Services Satisfaction Survey)

National (e.g. CIRP, NSSE)

Exit (employees, students)

Benchmarking (e.g. EBI studies)

NASPA Assessment & Knowledge Consortium Survey Rotation (available through Campus Labs-Baseline at no additional cost) as per the following schedule (survey must be conducted 9/1-5/31):

2015-2016

Student Union and Campus Programming

Campus Recreation and Wellness

Mental Health and Counseling

2016-2017

Orientation

Fraternity and Sorority Life

Residence Life

2017-2018

Student Conduct

Campus Activities

Career and Professional Aspirations

Participation Rates

Attendance Rates

Satisfaction

Perceptions

Awards

Reference

Southern Association of Colleges and Schools Commission on Colleges (SACSCOC). (2012). The principles of accreditation: Foundations for quality enhancement. Retrieved from <http://www.sacscoc.org/pdf/2012PrinciplesOfAcreditation.pdf>.