In last quarter’s column, I addressed the general issues related to the portfolio of institutional effectiveness standards subsumed under the SACSCOC Comprehensive Standard [CS] 3.3.1. As you will recall, this standard comprises five constituent sub-standards which address institutional effectiveness (IE) in the following preordained areas or units of compliance, viz.:

3.3.1 The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in each of the following areas: (Institutional effectiveness)

3.3.1.1 Educational programs, to include student learning outcomes
3.3.1.2 Administrative support services
3.3.1.3 Academic and student support services
3.3.1.4 Research within its mission, if appropriate
3.3.1.5 Community/public service within its mission, if appropriate.

In this column, I will continue to focus on these standards with a more in-depth examination of bugbear Comprehensive Standard 3.3.1.5.

As with its 3.3.1 compeers, this specific standard appears on the SACSCOC “Top 10 Most Frequently Cited Principles in Reaffirmation Reviews,” to which I alluded in the last column. Also, of all the institutional effectiveness standards (which also includes Core Requirement [CR] 2.5), this is the only such standard for which SU received a SACSCOC on-site review team recommendation. In SACSCOC-speak, we also know that “recommendation” has the following pejorative connotation, which appears on page 120 of the “Resource Manual:”

**Recommendation:** A Recommendation is a formal statement written by an evaluation committee of the Commission indicating an institution’s lack of compliance with a standard or requirement in The Principles of Accreditation. The Candidacy Committee and the Off-Site Reaffirmation Committee are the only SACSCOC committees that do not write Recommendations.
So, ultimately, after an intently studied initial Compliance Certification (CC) submission, its off-site review, a turnabout Focused Report response, and a subsequent on-site review, SU was deemed out of compliance with this lone IE standard.

“How did that happen?” you may ask.

Answer: many universities set themselves up for potential noncompliance with this standard, as well as similarly with CS 3.3.1.4, by referencing one or both in their mission statement. To better illustrate this point, here is a 2011 SACSCOC off-site committee recommendation predicated on an institution simply mentioning the single word “service” in their mission:

“The College indicated that Comprehensive Standard 3.3.1.5 (Institutional Effectiveness: Community/Public Service) is not applicable because “Peace College’s mission does not include community or public service.” However, its mission statement reads: ‘Peace is a baccalaureate college of the arts and sciences that challenges women to an adventure of intellectual and personal discovery, preparing women for graduate and lifelong learning, for meaningful careers, and for ethical lives of purpose, leadership and service.’ The College should demonstrate that it identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results of community/public service with its educational mission.”

I think of these two standards (CS 3.3.1.4 and CS 3.3.1.5) as the Castor and Pollux of the IE standards. [NOTE: In Greek and Roman mythology, Castor and Pollux were twin brothers, who are now better known as Gemini (Latin: “twin brothers”).] These standards are twins in that they are the only two CS 3.3.1 standards that bear the SACSCOC admonition: “… within its mission, if appropriate.” So, if an institution cites “community service” or “research” in its mission (i.e. in CS 2.4 [Institutional Mission]), then it is often “hoisted on its own petard,” because SACSCOC will assume that the institution’s mission validates the “appropriate” application for both of these standards. Relatedly, the SU mission states: “The University promotes a culture of teaching excellence throughout the institution which is augmented by a culture of research at the graduate level, and it also encourages faculty, students, administration, and staff to participate in service activities and projects which enhance the quality of life in the local and surrounding communities.” In which consequent case, an institution will often find itself in the unenviable noncompliance position in which we now find ourselves.

As an experienced reviewer myself, I must say that I anticipated this problem when drafting the narrative for this standard for the CC. To establish compliance, I also wanted to follow
SACSCOC’s own advice for “Avoiding Common Trouble Spots” by paying close attention to:

- Quality of the Response
- Interpretation of the Standards
- Evidence of Implementation of Policies/Procedures
- Technical Issues

(http://www.sacscoc.org/staff/cbaird/ComplianceCertification.pdf)

As a result, I interpreted the standard and attempted to comply with the inherent IE nature of this standard using pro forma assessment playbook strategies to:

a.) identify expected community/public service outcomes;
b.) assess the extent to which SU achieves these community/public service outcomes; and,
c.) provide evidence of improvement based on analysis of the results for community/public service.

Additionally, pursuant to the guidelines articulated in the “Resource Manual,” I generated an SU service mission definition and attempted to gather outcome data, data analyses, data-driven improvements, etc. However, as I am accustomed to say, “there was no putting lipstick on this pig,” because the assessment/IE architectonics (aka “structural design”) did not exist. In other words, no community/public service outcomes and ancillary data existed; some analyses did exist, but no data-driven improvements had been made. Consequently, in fallback mode, I made the case for these activities’ inclusion in the non-IE CS 3.4.2 (continuing education/service programs). In the aggregate, SU’s position - unlike that of many state-supported, public benefits, or religious-based institutions, was that its “community/public service” activities were only very tangentially part of its mission. So, under advisement, the university opted to approach this IE standard as “not applicable.”

Non-applicability of either of the “twin” standards is subjective, a matter of opinion. When participating in SACSCOC off-site or on-site committees, I often see institutions aver that these standards are non-applicable based exclusively upon non-appearance in their mission statement. In those cases, they skate by. But while we argued that CS 3.3.1.5 was not applicable, SACSCOC would not buy our argument, hence: a noncompliance judgment from both the off-site and the on-site committees. So, we did not skate by and will have to address noncompliance by either, a.) retroactively adjusting our mission; or, b.) generating the requisite architectonics (i.e., outcomes, data analyses, improvements, etc.) to support ex post facto compliance. Failing to win its argument for non-applicability, the university will now gain compliance by following example b.). This approach was influenced by the dialectical processes attendant upon SU’s recent on-site review committee interchange. Towards that end, here is another tantalizing PDF from SACSCOC:
And, here are SACSCOC’s own guidelines from its “Resource Manual” (NOTE: imagine attempting to check off each of the little boxes [“□”] below while you draft your compliance narrative and generate supportive evidence):

3.3.1.5 Community/public service within its mission, if appropriate

Note: Community/public service within an institution’s mission normally includes (1) centers and institutes that focus on community needs and (2) units and formal programs that deliver the outreach mission.
Relevant Questions for Consideration
- How does the institution define community/public service?
- Has the institution articulated its community/public service outcomes in relation to its mission?
- How are expected outcomes clearly defined in measurable terms?
- What is the evidence of assessment activities for community/public service?
- How are periodic reviews used for improvements?
- How does the institution’s use of assessment results improve community/public service?
- What assessment instruments were used and why were they selected? Were multiple assessment methods used? If so, describe.
- If the institution used sampling, why were the sampling and findings an appropriate representation of the institution’s community/public service mission?

Documentation

Required Documentation, if applicable
- Definition of institution’s community and public service mission
- Documentation of expected outcomes for its community and public service mission
- Documentation of the evaluation of those outcomes
- Documentation of the use of the findings from assessment to improve the institution
- If sampling is used, (1) how the sampling is representative of the institution’s mission, (2) documentation of a valid cross-section of units, and a (3) case as to why sampling and assessment findings are an appropriate representation of the institution’s community and public service mission

Reference to Commission Documents, if applicable
None noted

Cross References to other related Standards/Requirements, if applicable
Core Requirement 2.5
Comprehensive Standard 3.4.2

At this point, I would like to discuss “expected outcomes” within the context of “S.M.A.R.T” treatment. More and more prevalently, “S.M.A.R.T” is an acronym used to denote the following five desirable characteristics of 3.3.1 expected outcomes:

Specific – “What exactly are we going to do, with or for whom?”
The program states a specific outcome, or a precise outcome to be accomplished.
The outcome is stated in numbers, percentages, frequency, reach, scientific outcome, etc. The outcome is clearly defined.

**Measurable** – “Is this outcome framed in measurable language and can WE measure it?
This means that the outcome can be measured and the measurement source is identified. If the outcome cannot be measured, the question of funding non-measurable activities is discussed and considered relative to the size of the investment. All activities should be measurable at some level.

**Achievable** – “Can this outcome be accomplished in the proposed timeframe/in this political climate with x budget?”
This means that the outcome or expectation of what will be accomplished must be realistic given the market conditions, time period, resources allocated, etc.

**Relevant** – “Will this expected outcome lead to the desired results?”
This means that the outcome or results of the program directly supports the outcomes of the agency or funder’s long range plan or goal, e.g., the selected MOD priority area.

**Time-framed** – “When will we accomplish this expected outcome?”
This means stating clearly when the outcome will be achieved.

All IE standards should likewise accord with the university’s continuous improvement circle:
To tie up any potentially loose ends, I also like to vet standards’ narratives against the AC-CSHE listserv (Accreditation in Southern Higher Education) archives where insightful comments from SACSCOC VPs are often to be found, e.g.:

**CS 3.3.1.5** asks for evidence that the institution’s IE process is being utilized to set expected outcomes, assess the extent to which they have been met, and use the results of the assessment to make improvements in its community/public service programs.

**Three places to look:**

*First, look at the mission to see the extent to which such activity is expected for the institution.*

*Second, Look at CS 3.4.2 to see what types of activities are listed there as being consistent with the mission. It amazes me when an institution says “not applicable” in 3.3.1.5 and then has an expansive narrative of a host of “continuing education, outreach, and service programs ... consistent with the institution’s mission.”*

*Third, ask your CFO what activities are listed on the audit as public service expenditures at your institution. [If “none” that does not mean this is NA, but if there are some, it is harder to imagine this is NA.]*

Also, consider that suggested changes to the Principles will include this change of wording – if approved, this would be effective January 1:

**Current wording:**

3.3.1.5 community/public service within its *educational* mission, if appropriate

**Proposed wording:**

3.3.1.5 community/public service within its mission, if appropriate

This proposal gets at some of the confusion in the two standards, and in my mind at least, strengthens the link of CS 3.3.1.5 to CS 3.4.2. As an example, extensive service learning activities are as likely to be addressed in CS 3.3.1.1 (if driven through the curriculum) or CS 3.3.1.3 (if driven through the co-curriculum) as in the community/public service.
service standard. Such activities may or may not be in 3.4.2. But those art and history museums at colleges are usually in 3.4.2, as are concert series, lecture series, candidate forums, college radio stations, continuing education classes, sports camps, high school science days, noncredit workforce programs, GED programs, TRIO, and the like. I would hope the college would be interested in ensuring these programs are meeting their objectives, and in seeing the programs improve.

I also like to vet them against such off-site committee pre-Focused Report comments, such as the following two (of many, many Googled examples):

**Example One: Findings of the Off-Site Reaffirmation Committee**

*Off-site Committee Comments:*

The University of New Orleans identifies community/public service as central to its mission, describing itself in its mission statement as a “global community asset.” Service is also central to the university’s vision, emphasizing the institution’s aspiration to be “a primary engine of social, economic, intellectual and cultural development in the New Orleans region and beyond.” One of the university’s 2020 strategic goals relates specifically to expanding the institution’s “connection to the community.” The university has also identified five strategies for accomplishing the community/public service component of its strategic plan. Action tables in the university’s strategic plan identify action steps, responsible parties, plans and assessment measures associated with each of the five strategies. The institution identifies the role of external stakeholders, service learning and community service expectations for faculty in the university’s approach to community service. The university also describes existing institutional-level measures of community engagement (i.e. NSSE and FSSE). While institutional-level strategies, relevant units and stakeholders, and institutional-level measures of engagement have been identified, it is unclear how the university currently assesses or plans to assess the extent to which it achieves its expected outcomes related to community/public service. In addition, no evidence of improvement is provided.

**Example Two: Findings of Off-Site Committee**

*For civic service and social enrichment, evidence of specific planning, assessment, and use of results for these activities was missing.*

*Off-site Committee Comments:*
The institution’s narrative indicates the identification of expected outcomes with community/public service. Evidence to support the narrative was found within the PDF document entitled “Division and Departmental Outcomes NTCC.” There was no evidence, though, as to how the Institution “assesses the extent to which it achieves these outcomes” and “provides evidence of improvement based on analysis of the results in community/public service”.

The institution’s narrative did indicate that the outcomes portion of the assessment process is still in development. The first cycle of results are not scheduled to be completed until spring 2012. Therefore, as reflected by the narrative, the institution’s compliance with these areas, upon a review of the DF document entitled “Division and Departmental Outcomes NTCC,” did not cite evidence of these two measures. The areas entitled “Status Reports”, “Actual Results”, and “Use of Results”, where this information should have been placed, were blank.

In both these instances – as with our own, the off-site committee undeniably desires the full IE treatment for 3.3.1.5, without which noncompliance is a certainty.

In conclusion, institutions can and do debate the applicability/non-applicability of this standard to their given situation. However, to the “little birds” comprising its 800+ member institutions, SACSCOC is

The eagle [who] suffers little birds to sing,
And is not careful what they mean thereby,
Knowing that with the shadow of his wings
He can at pleasure stint their melody.

Shakespeare, Titus Andronicus: Act 4, Scene 4

It should be perceived unqualifiedly as what it is: an IE standard which requires the same assessment details as the other CS 3.3.1 standards.

I hope this more fine-grained insight into this particular standard has been helpful. If you have questions, kindly let me know.
Addendum

I provide this addendum to more practically illustrate the institutional effectiveness mandated by the SACSCOC CS 3.3.1 standards: more specifically, this recent example propitiates compliance with CS 3.3.1.2, administrative support services. These IE processes naturally ensue on a regular basis in many departments, which need to continue to document them for later compliance use.

Earlier this quarter, the Academic Council (AC) recommended re-examination of the Faculty Evaluation form: the expected outcome was improvement to the overall form, which was deemed to be too cumbersome, too long, too irrelevant in part, and missing any online and administrator faculty evaluative components. Accordingly, a Faculty Evaluation form improvement (FEFI) committee was assembled. I was on the prior committee that had originally developed the form, so I volunteered for the FEFI committee. The committee met and opted to generate a survey to solicit plenary faculty input. This was done and the input was analyzed and improvements in the form drafted a working model. The model was subsequently resubmitted to the faculty to generate any additional insights and to subserve latter buy-in. Afterwards, the form was submitted to the AC for approval. So, the accreditation process flow is tabularized below.

NOTE: please refer to the Continuous Improvement Circle’s corresponding steps illustrated above.

<table>
<thead>
<tr>
<th>Identify goals and outcomes that coincide with our mission (step 1)</th>
<th>Identify Measurement Instrument(s) (step 2)</th>
<th>Data Gathered / Analyzed (steps 3-4)</th>
<th>Implement Data-driven Improvement Plan (steps 5-6)</th>
<th>Evaluate resultant Improvement(s) (step 7)</th>
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<tbody>
<tr>
<td>Improve the faculty evaluation form.</td>
<td>Survey of all faculty to obtain initial input. Follow-up survey of all faculty to obtain reactions to draft proposal.</td>
<td>Survey analysis indicated faculty thought the form was too cumbersome, too long, too irrelevant in part, and missing any online and administrator faculty evaluative components.</td>
<td>A revised and improved form was developed that addressed deficiencies.</td>
<td>NOTE: Step seven (closing the loop) will have to be accomplished once the new form has been in use for a period of time. So, it is not listed now, but would need to be listed in any subsequent assessment of this process. However, it would say something like this: “As a result of this data-driven improvement, the university recently surveyed faculty, xx% of whom indicated that the new form was better able to evaluate FT/adjuncts, online and administrative faculty.”</td>
</tr>
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