

Administrative and Educational Support Report

Office Institutional Research and Effectiveness

**Annual Action Plan
Annual Assessment Report**

June 2007 – May 2008



Annual Action Plan: June 1, 2007–May 31, 2008

Unit: Office of Institutional Research and Effectiveness

UTPA Mission: The University of Texas-Pan American (UTPA) serves the higher education needs of a rapidly growing, international, multicultural population in the South Texas Region. The University preserves, transmits and creates knowledge to serve the cultural, civic, and economic advancement of the region and the state. The University provides students advanced instruction in academic programs offered through innovative delivery systems that lead to professional certification, and baccalaureate, master’s and doctoral degrees. Through teaching, research, creative activity and public service, UTPA prepares students for lifelong learning and leadership roles in the state, nation and world community.

Division: Office of the President

Unit Head: Susan Griffith

Unit Mission: The Office of Institutional Research and Effectiveness at The University of Texas-Pan American extracts and transforms data into information for analysis; conducts policy analysis, institutional research and executive management studies to support informed decision making at the university; assures that institutional policies and procedures are in compliance with all appropriate rules and regulations; directs and coordinates institutional planning, assessment and evaluation; acts as a repository for institutional data; serves as a reporting official for mandated state and federal agencies; responds to internal and external surveys and requests for data; and acts as liaison between UTPA and the UT System for institutional research, accountability and planning.

University Goal: Provide students with a quality educational experience that enables them to complete their educational goals in a timely manner.

Division Objective: Support efforts to become a major research institution.

Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
Provide reliable institutional statistics/data to University offices and programs so they can improve the quality of the educational experience.	Enhance relationships with stakeholders to meet their information needs.	Customers are satisfied with OIRE data and reports. Requests for services from OIRE increase annually.	100% of the customers rate data and reports as satisfactory or better on a locally designed survey. Annual comparison of data requests shows an increase (FY06 as base year).	None.

Annual Action Plan June 1, 2007–May 31, 2008

Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
		Determine baseline for customer access to OIRE website.	Baseline established for web page visits to OIRE website by May 31, 2008.	
	Document the processes in detail for production of CB, LBB, IPEDS and other external reports and surveys by working with programmers for accurate programming.	All the CB, LBB and IPEDS programs and other external reports and surveys are accurate, produce accurate reports with minimal errors, and allow for timely submission of these reports.	100% of the output is accurate when compared with other sources of data on campus, e.g., data from SIS matches that from Oracle, and dates of report submission matches those required by requesting agency.	None.
	Continue dialogue with owners of Student Information System (SIS) data.	Accuracy of the data from the Student Information System (SIS) that populates our frozen data is improved.	The number of changes made in the SIS to improve the accuracy of the data are reduced each year.	None.

University Goal:
Division Objective:

Collaborate with P-12 schools to enlarge the pool of applicants who are personally prepared and academically qualified for higher education.
Support P-12 on-campus initiatives and collaborations with RGV educational entities.

Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
Provide data to University entities tasked with improving the competency of the P-12 pool.	Consult with the chair of the P-16 Council for their data needs on UTPA students to feed back to high schools. Supply data and reports as	Data and reports submitted to the P-16 council meet their needs.	100% of the P-16 Council leadership rates data and reports as satisfactory or better at meeting their needs. This will be done by using a locally designed survey.	None.

Annual Action Plan June 1, 2007–May 31, 2008

Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
	needed. Attend local and state P-16 meetings as appropriate.			

University Goal:
Division Objective:

Optimize institutional effectiveness and efficiency consistent with high quality organizational standards.
Improve data-based decision making in the division.

Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
Improve OIRE visibility throughout the university community.	Enhance relationships with stakeholders to meet their information needs.	Customers are satisfied with OIRE data and reports. Requests for services from OIRE increase annually. Determine baseline for customer access to OIRE website.	100% of the customers rate data and reports as satisfactory or better on a locally designed survey. Annual comparison of data requests shows an increase (FY06 as base year). Baseline established for web page visits to OIRE website by May 31, 2008.	None.
	Expand the online fact book to meet the standards set by our aspirant peer – Texas State University San Marcos.	UTPA's online Fact Book compares favorably with that at TSUSM.	Review of online factbook website. Comparison of elements in online Fact Book at UTPA with the online Fact Book at TSUSM shows congruence. (FY07 base year).	None.
	Make presentations on	More individuals are	At least 6 presentations are made	None.

Annual Action Plan June 1, 2007–May 31, 2008

Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
	results of institution-wide surveys to different divisions on campus.	aware of various university wide survey results conducted on campus.	each year. Evaluation forms are collected from attendees to make improvements in future presentations and to keep count of individuals who attended the presentations.	
Systematize institutional data extraction, programming and reporting processes for routine external reports and internal data requests.	Document the processes in detail for production of the CB, LBB, IPEDS and other external reports and surveys by working with programmers for accurate programming.	All the CB, LBB and IPEDS programs and other external reports and surveys are accurate, produce accurate reports with minimal errors, and allow for timely submission of these reports.	100% of the output is accurate when compared with other sources of data on campus, e.g., data from SIS matches that from Oracle, and dates of report submission matched those required by requesting agency.	None.
	Continue dialogue with owners of SIS data.	Accuracy of the data from the Student Information System (SIS) that populates our frozen data is improved.	The number of changes made in the SIS to improve the accuracy of the data are reduced each year.	None.
	Involve stakeholders in all areas of reporting processes through the Data Accuracy, Timeliness and Availability (DATA) Team.	Meetings with DATA Team are held to address reporting concerns.	100% of DATA Team reporting concerns are addressed to their satisfaction as reflected in meeting minutes.	None.

University Goal:
Division Objective:

Optimize institutional effectiveness and efficiency consistent with high quality organizational standards.
Institute high quality organizational standards and processes.

Improve the <i>Handbook</i>	Document the processes	Flowcharts and process	100% of the major stakeholders	None.
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Annual Action Plan June 1, 2007–May 31, 2008

of Operating Procedures (HOP).	for academic and administrative policy development.	narratives are developed.	agree that the documentation reflects process improvements as reflected in meeting minutes.	
	Receive approval from Executive Committee for HOP processes.	Processes are approved.	EC consensus achieved as documented in minutes.	None.
	Implement approved processes.	Approved processes are used.	100% of the major stakeholders rate the system as satisfactory or better as documented in the meeting minutes.	None.

University Goal:
Division Objective:

Optimize institutional effectiveness and efficiency consistent with high quality organizational standards.
Establish a Stewardship Team to monitor this goal with leadership from the Executive Committee and membership from all stakeholder groups.

Coordinate institutional assessment and planning processes.	Monitor the Outcome Directed Planning (ODP) Process with the Institutional Planning and Assessment Committee (IPAC).	Units modify their ODPs during the 5 year cycle.	By 2012, 100% of the ODP maps reflect changes.	None.
	Collect annual action plans and assessment reports from all UTPA units and post them on the Institutional Effectiveness web site.	TracDat software is live.	Units post FY09 annual action plans using TracDat.	None.
	Monitor the Stewardship Model with IPAC.	Modified stewardship model is approved by EC.	Modified stewardship model is implemented by units.	None.

Annual Action Plan June 1, 2007–May 31, 2008

**University
Goal:
Division
Objective:**

Optimize institutional effectiveness and efficiency consistent with high quality organizational standards.

Improve data-based decision making in the division.

Support executive decision making.	Support the institution's enrollment projections process.	As a secondary supplier of data to the Enrollment Management Councils (EMC), OIRE supplies 100% of the requested data to Associate VP for Admissions.	The Associate VP is satisfied with the data provided by OIRE.	None.
	Develop custom reports and processes for customers.	<ul style="list-style-type: none"> • New Carnegie peers are identified using the new system. • "Virtual Department" model is designed in consultation with Provost and Deans. • Study on students at risk of losing financial aid is produced. • Key Performance Indicators (KPI) report is improved with input from Executive Committee. • Major Migration Report is designed. • Environmental scanning process 	<ul style="list-style-type: none"> • Revised set of peers is approved by Executive Committee. • "Virtual Departments" model is used by Provost and Deans in decision making. • List of indicators of students at risk of losing financial aid is used by the Financial Aid Office to develop interventions as documented. • KPI report is rated as satisfactory or better by 100% of the Executive Committee. • The deans use the major migration report in decision making as documented. • Environmental scanning data is used by appropriate bodies for 	None.

Annual Action Plan June 1, 2007–May 31, 2008

		<p>based on best practices is in place.</p> <ul style="list-style-type: none"> • Data warehouse is developed. • OIRE has a standard format for the online survey instrument it implements. 	<p>decision making and during planning cycles</p> <ul style="list-style-type: none"> • Data warehouse is used for decision making by EC. • Format is being used and samples are on file. 	
	<p>Support with data and information the task forces appointed to develop recommendations to achieve the objectives in the President's ODP maps.</p>	<p>Reports to the task forces appointed to implement the President's ODP maps are completed.</p>	<p>Reports are rated as satisfactory or better by 100% of the task force members.</p>	<p>None.</p>
<p>Improve OIRE processes.</p>	<p>Implement continuous quality improvement.</p>	<p>Implement changes based on July 07 Peer Review.</p>	<p>Compare the Peer Review suggestions with actual implementation of changes made.</p>	<p>None.</p>

FY08 AES Assessment Results Report

UTPA

Admin - Institutional Research and Effectiveness

Unit Mission: The Office of Institutional Research and Effectiveness at The University of Texas-Pan American extracts and transforms data into information for analysis; conducts policy analysis, institutional research and executive management studies to support informed decision making at the university; assures that institutional policies and procedures are in compliance with all appropriate rules and regulations; directs and coordinates institutional planning, assessment and evaluation; acts as a repository for institutional data; serves as a reporting official for mandated state and federal agencies; responds to internal and external surveys and requests for data; and acts as liaison between UTPA and the UT System for institutional research, accountability and planning.

Unit Head: Susan Griffith

Division: Division of the President

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
<p>Admin - Institutional Research and Effectiveness - Assist P-16 council with data needs. - We will provide data to University entities tasked with improving the competency of the P-12 pool.</p> <p>Outcome Types: Administrative - Fiscal Year 2008</p> <p>Start Date: 06/01/2007</p> <p>End Date: 05/31/2008</p> <p>Outcome Status: No Longer Desired</p> <p>Strategies: 1. Consult with the chair of the P-16 Council for their data needs on UTPA students to feed back to high schools. 2. Supply data and reports as needed. 3. Attend local and state P-16 meetings as appropriate.</p>	<p>Assessment Method: Locally designed survey administered to P-16 Council leadership.</p> <p>Criterion for Success: 100% of data and reports submitted to the P-16 council meet their needs as shown by rating of data and reports as satisfactory or better.</p>	<p>05/16/2008 - Survey was not administered. However, at P-16 Council presentations, participants voiced satisfaction with data.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Continue Current Strategy(s)</p>	<p>06/10/2008 - Design and administer survey in 2009.</p>
<p>Admin - Institutional Research and Effectiveness - Reliable Data - We will provide reliable institutional statistics/data to University offices and programs so they can improve the quality of the educational experience.</p>	<p>Assessment Method: Online Survey conducted by OIRE.</p> <p>Criterion for Success: 100% of the customers rate data and reports as satisfactory or better on a locally designed survey</p> <p>Related Documents:</p>	<p>05/16/2008 - 100% were satisfied with services received.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - Revise survey instrument to provide better alignment and more options for responses.</p>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
Outcome Types: Administrative - Fiscal Year 2008 Start Date: 06/01/2007 End Date: 09/05/2008	Service Request FY 2008.xls	05/16/2008 - 100% were satisfied with services received. Result Type: Criterion Met Next Step: Add New Strategy	05/16/2008 - Revise survey instrument to provide better alignment and more options for responses.
Outcome Status: No Longer Desired Strategies: 1. Enhance relationships with stakeholders to meet their information needs. 2. Document the processes in detail for production of CB, LBB, IPEDS and other external reports and surveys by working with programmers for accurate programming.	Assessment Method: Going over the log of customer requests completed. Criterion for Success: Requests will increase over previous year	09/04/2008 - According to the Customer Service Log, 278 requests were completed for FY08. Result Type: Criterion Not Met Next Step: Continue Current Strategy(s) Related Documents: Service Request FY 2008.xls	08/31/2008 - We will set as 278 requests for our baseline.
3. Continue dialogue with owners of Student Information System (SIS) data. 4. Write a report summarizing the analysis, synthesis and evaluation of data.	Assessment Method: Number of web page visits to OIRE website from June 1, 2007 to May 31, 2008. Criterion for Success: Customer access to OIRE website baseline is established.	05/16/2008 - Baseline established at 6,337 (OIRE) and 1,956 (IE). Result Type: Criterion Met Next Step: Continue Current Strategy(s)	05/16/2008 - Continue to track for next year.
	Assessment Method: OIRE data matches all other sources of data on campus, e.g., data from SIS matches that from Oracle, and dates of report submission matches those required by requesting agency. Criterion for Success: 100% of the CB, LBB and IPEDS programs and other external reports and surveys are accurate, produce accurate reports with minimal errors, and allow for timely submission of these reports.	05/16/2008 - Reports were accepted with accurate data and on time. CBM00N was begun to assure that CB retention and internal retention match. Result Type: Criterion Met Next Step: Add New Strategy	06/11/2008 - Document 06/10/2008 - Change criterion for success to: CB, IPEDS & LBB accepts our reports and certifies them against their criteria and these are submitted on time.
	Assessment Method: The number of changes made in the SIS to improve the accuracy of the data are reduced each year. Criterion for Success: Accuracy of the data from the Student	05/16/2008 - 50% improvement in # changes necessary. Result Type: Criterion Not Met Next Step: Add New Strategy	05/16/2008 - Banner will reduce errors and make change process easier.

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
	Information System (SIS) that populates our frozen data is improved.	05/16/2008 - 50% improvement in # changes necessary. Result Type: Criterion Not Met Next Step: Add New Strategy	05/16/2008 - Banner will reduce errors and make change process easier.
Admin - Institutional Research and Effectiveness - Improve OIRE visibility. - We will improve OIRE visibility throughout the university community. Outcome Types: Administrative - Fiscal Year 2008	Assessment Method: Locally designed survey. Criterion for Success: 100% of the customers rate data and reports as satisfactory or better.	05/16/2008 - 100% of the customers rated the services provided by OIRE as satisfactory. Result Type: Criterion Met Next Step: Add New Strategy	05/16/2008 - Revise survey instrument to provide better alignment and more options for responses.
Start Date: 06/01/2007 End Date: 09/01/2008 Outcome Status: Complete Strategies: 1. Enhance relationships with stakeholders to meet their information needs. 2. Expand the online fact book to meet the standards set by our aspirant peer - Texas State University San Marcos. 3. Make presentations on results of institution-wide surveys to different divisions on campus.	Assessment Method: Annual comparison of data requests. Criterion for Success: Requests for services from OIRE increase annually.	10/03/2008 - In FY2008, there were 277 service requests completed by OIRE staff. Result Type: Inconclusive Next Step: Continue Current Strategy(s) Related Documents: Service Request FY 2008.xls	08/31/2008 - We will set as 278 requests for our baseline.
	Assessment Method: Number of web page visits to OIRE website from June 1, 2007 to May 31, 2008. Criterion for Success: Customer access to OIRE website baseline is established.	05/16/2008 - Baseline established at 6,337 (OIRE) and 1,956 (IE). Result Type: Criterion Met Next Step: Continue Current Strategy(s)	05/16/2008 - Continue to track for next year.
	Assessment Method: Review of online factbook website and comparison with Texas State University - San Marcos. Criterion for Success: UTPA's online factbook compares favorably with that at TSUSM.	05/16/2008 - Online Fact Book went live May 2008 with 3 variables. Result Type: Criterion Not Met Next Step: Add New Strategy	05/16/2008 - OIRE will canvas customers for additional data needs.
	Assessment Method: Evaluation forms are collected from attendees.	05/16/2008 - 12 presentations made and attendees satisfied. Result Type:	05/16/2008 - Reevaluate target and assess method.

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
	<p>Criterion for Success: At least 6 presentations are made each year.</p>	<p>Criterion Met Next Step: Add New Strategy</p>	
<p>Admin - Institutional Research and Effectiveness - Systematize institutional data extraction - We will systematize institutional data extraction, programming and reporting processes for routine external reports and internal data requests.</p> <p>Outcome Types: Administrative - Fiscal Year 2008</p> <p>Start Date: 06/01/2007</p> <p>End Date: 09/01/2008</p> <p>Outcome Status: Complete</p> <p>Strategies: 1. Document the processes in detail for production of the CB, LBB, IPEDS and other external reports and surveys by working with programmers for accurate programming. 2. Continue dialogue with owners of SIS data. 3. Involve stakeholders in all areas of reporting processes through the Data Accuracy, Timeliness and Availability (DATA) Team.</p>	<p>Assessment Method: OIRE data matches all other sources of data on campus, e.g., data from SIS matches that from Oracle, and dates of report submission matches those required by requesting agency.</p> <p>Criterion for Success: 100% of the CB, LBB and IPEDS programs and other external reports and surveys are accurate, produce accurate reports with minimal errors, and allow for timely submission of these reports.</p>	<p>05/16/2008 - Reports were accepted with accurate data and on time. CBM00N was begun to assure that CB retention and internal retention match.</p> <p>Result Type: Criterion Met Next Step: Add New Strategy</p>	<p>06/10/2008 - Change criterion for success to: CB, IPEDS & LBB accepts our reports and certifies them against their criteria and these are submitted on time.</p>
	<p>Assessment Method: The number of changes made in the SIS to improve the accuracy of the data are reduced each year.</p> <p>Criterion for Success: Accuracy of the data from the Student Information System (SIS) that populates our frozen data is improved.</p>	<p>05/16/2008 - 50% improvement in # changes necessary.</p> <p>Result Type: Criterion Not Met Next Step: Add New Strategy</p>	<p>05/16/2008 - Banner will reduce errors and make change process easier.</p>
	<p>Assessment Method: Review Data Team meeting minutes.</p> <p>Criterion for Success: 100% of DATA Team reporting concerns are addressed to their satisfaction as reflected in meeting minutes.</p>	<p>05/16/2008 - Data Team has been replaced by Banner meetings and future SIS monthly meetings.</p> <p>Result Type: Criterion Met Next Step: Add New Strategy</p>	<p>05/16/2008 - Remove this criterion for success since no longer needed.</p>
<p>Admin - Institutional Research and Effectiveness - Improve the Handbook of Operating Procedures (HOP). - Improve the Handbook of Operating Procedures (HOP).</p> <p>Outcome Types: Administrative - Fiscal Year 2008</p>	<p>Assessment Method: HOP Committee meeting minutes.</p> <p>Criterion for Success: 100% of the major stakeholders agree that the flowcharts and process narratives reflect process improvement.</p>	<p>05/16/2008 - Meeting minutes show that major stakeholders agree that process improvement has been accomplished through implementation of HOP 1.1.1. Flowcharts and process narratives still need to be developed.</p> <p>Result Type:</p>	<p>05/16/2008 - Continue working on flowcharts and process narratives for HOP Review website.</p>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
<p>Start Date: 06/01/2007</p> <p>End Date: 05/31/2008</p> <p>Outcome Status: No Longer Desired</p> <p>Strategies: 1. Document the processes for academic and administrative policy development. 2. Receive approval from Executive Committee for HOP processes. 3. Implement approved processes.</p>		<p>Criterion Met</p> <p>Next Step: Continue Current Strategy(s)</p>	
	<p>Assessment Method: Executive Committee (EC) meeting minutes.</p> <p>Criterion for Success: Processes are approved in the EC minutes.</p>	<p>09/28/2007 - HOP 1.1.1 was submitted by the HOP Committee to the President for approval. The President approved and forwarded to UT System. Approved by UT System and entered in HOP.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as No Longer Desired</p>	<p>10/02/2008 - New HOP 1.1.1 has improved the policy review process on campus and we will now monitor if the new process will lessen the time that it takes to review policies on campus.</p>
	<p>Assessment Method: HOP Committee meeting minutes.</p> <p>Criterion for Success: Approved processes are used by 100% of the major stakeholders.</p>	<p>05/16/2008 - Majority of the major stakeholders are using approved processes established in new HOP 1.1.1.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Add New Strategy</p>	<p>05/21/2008 - Track how long it takes for proposed or revised HOP to be approved on campus.</p>
		<p>05/16/2008 - HOP Committee approved processes in new HOP 1.1.1.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - Criterion for success no longer needed.</p>
<p>Admin - Institutional Research and Effectiveness - Coordinate institutional assessment and planning processes. - We will coordinate institutional assessment and planning processes.</p> <p>Outcome Types: Administrative - Fiscal Year 2008 Administrative - Fiscal Years 2009 - 2011</p>	<p>Assessment Method: Review old and new ODP maps</p> <p>Criterion for Success: By 2012, 100% of the ODP maps reflect changes.</p>	<p>05/16/2008 - Academic Affairs and a few other offices have revised ODP maps.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - SCC will address ODP updates in 2009.</p> <p>Not institutional priority.</p>
<p>Start Date: 06/01/2007</p> <p>Outcome Status: Active/Ongoing</p>	<p>Assessment Method: TracDat software is live.</p> <p>Criterion for Success: Units post FY09 annual action plans using TracDat.</p>	<p>08/31/2008 - All Administrative FY08 annual action plans were entered into TracDat.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Continue Current Strategy(s)</p>	<p>10/03/2008 - We will continue to use TracDat to make the Academic and Educational Support (AES) planning and assessment process more efficient.</p>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
	<p>Assessment Method: Modification of stewardship model.</p> <p>Criterion for Success: Modified stewardship model is approved by EC and implemented by units.</p>	<p>05/16/2008 - SCC was implemented in Fall 2007 and process streamilined.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - Continous improvment and futher interpretation of budget process.</p>
<p>Admin - Institutional Research and Effectiveness - Institutional and executive decision making. - We will support institutional and executive decision making.</p> <p>Outcome Types: Administrative - Fiscal Year 2008 Administrative - Fiscal Years 2009 - 2011</p>	<p>Assessment Method: Provide relevant data to Associate VP for Admissions.</p> <p>Criterion for Success: The Associate VP for Admissions receives 100% of the requested data and is satisfied.</p>	<p>05/16/2008 - Everything Associate VP for Admissions asks for is submitted as requested.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - Reconsider criterion.</p>
<p>Start Date: 06/01/2007</p> <p>Outcome Status: Active/Ongoing</p>	<p>Assessment Method: Use the new system to identify new Carnegie peers.</p> <p>Criterion for Success: Revised set of peers is approved by Executive Committee.</p>	<p>05/16/2008 - Discussion delayed until May 2008 by Provost. Plan in place to have peers sets by January 2009.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - Monitor plan.</p>
	<p>Assessment Method: Consult with Provost and Deans in designing "Virtual Department" model.</p> <p>Criterion for Success: "Virtual Departments" used by Provost and decision making.</p>	<p>05/21/2008 - Provost is using.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - Remove criterion - no longer needed.</p>
	<p>Assessment Method: Provide a model to project students at risk of losing financial aid.</p> <p>Criterion for Success: List of indicators of students at risk of losing financial aid is used by the Financial Aid Office to develop interventions as documented.</p>	<p>05/16/2008 - Data has been gathered.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - Report must be written by Summer 2008.</p>
	<p>Assessment Method: Key Performance Indicators (KPI) report is</p>	<p>05/16/2008 - PDF of KPI is posted on OIRE website. Draft of automated KPI in office.</p>	<p>05/16/2008 - Implement automated</p>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
	<p>improved with input from Executive Committee.</p> <p>Criterion for Success: KPI report is rated as satisfactory or better by 100% of the Executive Committee.</p>	<p>Result Type: Criterion Not Met</p> <p>Next Step: Add New Strategy</p>	<p>KPI for Fall 2008 data.</p>
	<p>Assessment Method: Design Major Migration Report.</p> <p>Criterion for Success: The deans use the major migration report in decision making as documented.</p>	<p>05/16/2008 - Provost is happy with Fall 2007 report. (Check Feb. report)</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - RTA Fall 2009.</p>
	<p>Assessment Method: Environmental scanning process based on best practices is in place.</p> <p>Criterion for Success: Environmental scanning data is used by appropriate bodies for decision making and during planning cycles.</p>	<p>05/16/2008 - Provost asked OIRE to prepare UTPA SWOTS.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - Ask UT System for help.</p>
	<p>Assessment Method: Data warehouse is developed.</p> <p>Criterion for Success: Data warehouse is used for decision making by EC.</p>	<p>05/16/2008 - Provost is happy with data supplied.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - RTA Fall 2009 after Banner implementation.</p>
	<p>Assessment Method: OIRE implements a standard format for the online survey instrument.</p> <p>Criterion for Success: Format is being used and samples are on file.</p>	<p>05/16/2008 - Online survey format is being used and samples are on file.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - Remove criterion.</p>
	<p>Assessment Method: Provide relevant reports to the task forces appointed to implement the President's ODP maps.</p> <p>Criterion for Success: Reports are rated as satisfactory or better by 100% of the task force members.</p>	<p>05/16/2008 - No task forces established by President.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Add New Strategy</p>	<p>05/16/2008 - Discuss criterion with President.</p>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
	<p>Assessment Method: OIRE will maintain a log of special projects.</p> <p>Criterion for Success: Special projects assigned by Executive Committee are 100% completed.</p> <hr/> <p>Assessment Method: OIRE will keep a log of satisfaction with special projects.</p> <p>Criterion for Success: Executive Committee is 100% satisfied with special projects.</p> <hr/> <p>Assessment Method: Discuss with process stakeholders.</p> <p>Criterion for Success: OIRE process for posting committees and councils is developed and piloted by August 31, 2009.</p>		
<p>Admin - Institutional Research and Effectiveness - Improve OIRE processes. - We will improve OIRE processes.</p> <p>Outcome Types: Administrative - Fiscal Year 2008</p> <p>Start Date: 06/01/2007</p> <p>End Date: 05/31/2008</p> <p>Outcome Status: Complete</p> <p>Strategies: 1. Implement continuous quality improvement.</p>	<p>Assessment Method: Compare the Peer Review suggestions with actual implementation of changes made.</p> <p>Criterion for Success: Implement changes based on July 07 Peer Review.</p>	<p>09/16/2008 - Of the 35 recommendations made by the Peer Review Team in 2007, OIRE has implemented 26, 1 is on hold, and 8 have been tabled as they are out of our scope.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as Complete</p>	<p>09/17/2008 - We will continue using peer review as a way of improving our services and processes and will have another peer review in 2010.</p> <hr/>
<p>Admin - Institutional Research and Effectiveness - Learning of TracDat - All individuals responsible for entering information into TracDat know how it works.</p> <p>Outcome Types: Administrative - Fiscal Year 2008</p>	<p>Assessment Method: A log will be kept on unit heads trained in TracDat.</p> <p>Criterion for Success: 100% of the unit heads responsible for action plans and assessment reports will be trained on using TracDat.</p>	<p>10/02/2008 - 95% of unit the unit heads responsible for action plans and assessment reports were trained using TracDat.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as Complete</p>	<p>10/02/2008 - We will continue to train unit heads in TracDat as necessary and as new functions are introduced into TracDat.</p> <hr/>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
Start Date: 06/01/2007 End Date: 09/08/2008 Outcome Status: No Longer Desired			