Administrative Services

2019 ANNUAL REPORT OF PROGRAM DATA

University of Hawai'i
KAU'A'I COMMUNITY COLLEGE
At a minimum, each program or unit Annual Program Review Update shall include measures described in UHCCP 5.202. Additional measures may also be used for program or unit assessment.

1. Program Description

Program or Unit Mission Statement

To provide the College with the financial, technology, physical, and human resources it needs to fulfill its mission.

Part I. Program Description

<table>
<thead>
<tr>
<th>Date of Last Comprehensive Review</th>
<th>2105</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Website Last Reviewed/Updated</td>
<td>Click or tap to enter a date.</td>
</tr>
<tr>
<td>Target Student Population</td>
<td>N/A</td>
</tr>
<tr>
<td>External Factor(s) that Affected the Program or Unit</td>
<td>Interim Vice Chancellor spring 2019, two vacant positions in the Business Office, and froze HR Assistant and O&amp;M Assistant positions. There was also a high turnover of Security Officers.</td>
</tr>
</tbody>
</table>

2. Analysis of the Program

Strengths and weaknesses in terms of demand, efficiency, and effectiveness based on an analysis of the Quantitative Indicators. CTE programs must include an analysis of Perkins Core indicators for which the program did not meet the performance level. Include Significant Program Actions (new certificates, stop outs, gain/loss of positions, results of prior year’s action plan).

Include the Annual Review of Program Data (ARPD; all Instructional programs and Academic Support programs - Library, Technology Resources, Testing Center, Tutoring, and Financial Aid), program-developed metrics (Institutional Effectiveness programs, Office of Continuing Education and Training, campus committees), or metrics required by UHCCP 5.202 that are not provided as ARPD (Administrative Service programs and some Student Support programs) under review in table format below (EP 5.202 and UHCCP 5.202).

The Overall Program Health is NA
Describe and discuss demand, efficiency, effectiveness, and overall health categories. What has been the trend over the past three years in each of these categories? What factors (internal or external) may have contributed to the program or unit health categories? For Career and Technical Education (CTE) programs, provide a discussion on any unmet Perkins Core Indicator that includes contributing factors (UHCCP 5.202).

Based on this analysis, what are the program’s strengths and areas to improve regarding demand, efficiency, and effectiveness?

Describe any significant program actions that occurred in the prior year (e.g., new certificate(s), stop outs, gain/loss of position(s), reduction in funding, new or completed grant(s), etc.).

Career and Technical (CTE) programs should provide an analysis for any unmet Perkins Core Indicators.

### HUMAN RESOURCES METRICS

1. Number of PNF Transactions Processed 616
2. Numbers of New Appts and Transfers on PNF 71
3. Number of Form 6 Transactions Processed 446
4. Number of New Appointments on Form 6 219
5. On-Line Leave System – Corrections Processed 1
6. Number of HireNet Postings 34
7. Number of NeoGov/WorkatUH Postings 29
8a. Number of New Grievances/Investigations Filed 5
8b. Number of Existing Grievances/Investigations 2
9. Human Resources FTE 2
10. Total Employee Headcount 274
   a. Executive/Managerial 5
   b. Faculty 75
   c. APT 27
   d. Civil Service 49
   e. Lecturers 32
   f. Casual Hires 86
11. Student Employee Headcount 87
12. Student Employee Transactions 244
13. Employees to HRO Staff Comparison (Employee Ratio) 137
14a. Number of New/Reopened Workers’ Compensation Claims Filed 9
14b. Number of Existing Workers’ Compensation Claims 0
15a. Number of New Temporary Disability Benefits Claims Filed 0
15b. Number of Existing Temporary Disability Benefits Claims 0
16. Professional Credentials 98%
17. Personnel Evaluations – Executive/Managerial 100%
18. Personnel Evaluations – Faculty Tenure and Promotion 100%
19. Personnel Evaluations – Faculty Five Year Review 8%
20. Percentage of APTs Evaluated 61%
21. Percentage of Civil Service Employees Evaluated 35%
22. Staffing Sufficiency 92%

**CAMPUS SECURITY METRICS**
23. # security training classes attended by officers and administrators 4
24. Number of campus personnel NIMS/ICS certified in emergency preparedness 3
25. # campus exercises conducted to support campus emergency readiness efforts 5
26. # workshops attended in developing and implementing policies and procedures 0
27. Number of Clery Act report revisions and improvements made 0

**BUSINESS OFFICE METRICS**
28. Number of UH Purchase Orders issued 477
29. Average number of workdays required to issue UH Purchase Order 2.38

**SURVEY RESULTS - OPERATIONS AND MAINTENANCE**
30. KCC’s facilities are clean and well maintained 92%
31. KCC’s physical facilities support an effective learning and working environment 77%

**SURVEY RESULTS - CAMPUS SECURITY**
32. I feel safe at KCC 89%
33. I know what to do in the event of an emergency on campus 77%
34. I know where to find KCC’s Annual Security Report 38%

**SURVEY RESULTS - IT**
35. The computers on campus meet my needs 80%
36. KCC’s classrooms are sufficiently equipped with instructional technology 76%
37. The coverage and speed of WIFI on campus meets my needs 75%
38. KCC uses tech. to effectively support communications and sharing of information across campus 73%
39. The IT help desk provides me with technical support I need 66%

**SURVEY - HUMAN RESOURCES**
HR provides me with accurate information regarding my employment and/or benefits 67%
HR provides me with timely information regarding my employment and/or benefits 57%

**SURVEY - EEO**
40. KCC is an equal opportunity workplace that supports diversity 76%
41. KCC is an equal opportunity workplace that supports cultural sensitivity 76%
42. KCC is an equal opportunity workplace that supports gender equity 75%
2019 Kaua‘i Community College ARPD
Program: Administrative Services

SURVEY - FISCAL
43. I understand how KCCs mission and goals drive resource allocation through the APRU process 69%
44. Financial resources are effectively allocated and used to support student success 63%
45. KCC distributes technology resources effectively to develop/maintain/enhance programs/services 63%
46. I am informed of the budgeting process for the College 47%

SURVEY - TECHNOLOGY
47. KCCs technology resources meet the needs of its distance education courses 60%
48. KCCs technology planning is integrated with its institutional planning 51%

SURVEY - ACCURATE SERVICE AND INFORMATION
49. Campus Safety 83%
50. Operations and Maintenance 81%
51. Business Office 80%
52. Human Resources 72%
53. IT 83%

SURVEY - COURTEOUS SERVICE
54. Campus Safety 78%
55. Operations and Maintenance 83%
56. Business Office 71%
57. Human Resources 74%
58. IT 77%

SURVEY - PROMPT SERVICE
59. Campus Safety 83%
60. Operations and Maintenance 70%
61. Business Office 73%
62. Human Resources 60%
63. IT 72%

Human Resource metrics suggest stability from 2017-2018, as the number of payroll notification forms declined 7.5%. The number of new hires also declined, with the majority being from lecturer and civil service categories. The number of employees is up by 10 from 2017-2018. Executive Management, APT, and Faculty positions remain relatively consistent. The increase has mainly been in casual hires. Evaluations were 100% for faculty and EMs, whereas improvement is needed in APT and especially Civil Service bargaining units.

Campus safety has had turnover yet remains committed to providing training to the campus and ensuring employees receive training. Currently, three individuals on campus are NIMS certified. Employee trainings included Golf Cart Safety, Hazardous Material Refresher, Title IX, and
Sexual Harassment/Discrimination. Campus Emergency Preparedness exercises included campus wide electronic lock test, internal and external PA check, and CCMT readiness exercises (knowledge of systems/processes, assault rifle tabletop, and political protest tabletop). Where deficiencies were found, correction measures were developed and/or implemented.

The Business Office was understaffed for this review period and the Fiscal Administrator was new. However, the office was still able to process UH POs in less than three working days.

The survey administered to the campus in spring 2019 revealed strengths and weaknesses in the unit. The campus feels proud of the grounds and noted a safe atmosphere. Administrative Services is working with each unit (e.g., IT, Human Resources, Operations and Maintenance, Campus Safety, and Business Office) to develop and implement strategies to improve on areas that scored less than 70%.

### 3. Program Student Learning Outcomes

- a) List of the Program Student Learning Outcomes
- b) Program Student Learning Outcomes that have been assessed in the year of the Annual Review of Program Data.
- c) Assessment Results
- d) Changes that have been made as a result of the assessments.

Report on PSLO assessment for the prior year.

1. List of the PSLOs.
2. Indicate PLSOs that were assessed in the year of this APRU.
3. Assessment findings.
4. Changes that have been made as a result of the assessment findings.
5. Next planned assessment date.

<table>
<thead>
<tr>
<th>PSLO</th>
<th>Assessed During this APRU Cycle (Y or N)</th>
<th>Findings</th>
<th>Improvements Implemented</th>
<th>Next Assessment Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being developed AY 19-20</td>
<td>N</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
4. Action Plan

Include how the actions within the plan support the college’s mission. In addition to the overall action plan for the program, include specific action plans for any Perkins Core Indicator for which the program did not meet the performance level.

<table>
<thead>
<tr>
<th>Action Plan</th>
<th>Anticipated Outcome</th>
<th>Actual Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>HI2 Strategy 1</td>
<td>Develop interim policy or procedures to support research.</td>
<td>Not completed.</td>
</tr>
<tr>
<td>HI2 Strategy 2</td>
<td>Develop interim policy or procedures to support entrepreneurship and commerce</td>
<td>Being developed by the UH System</td>
</tr>
<tr>
<td>Write written emergency response guidelines for the campus</td>
<td>Document created</td>
<td>Document created</td>
</tr>
<tr>
<td>Improve process for electronic facility and IT work orders</td>
<td>Increased transparency and efficiency of work order process</td>
<td>Still in progress working on implementation</td>
</tr>
</tbody>
</table>

List any additional significant actions that impacted your program (e.g., new certificate, loss or gain of faculty or staff, stop outs, etc.).

Personnel changes or vacancies.

Analysis of Alignment with CPR

List the goals that were identified to be initiated, continued, or completed during this APRU cycle, in your last CPR, and if they were achieved. Be sure to include the benchmark, desired outcome, actual outcome, and unit of measure. If you completed your last CPR prior to 2018, please refer to * in this section.

<table>
<thead>
<tr>
<th>Goal/Strategic Goal or Priority**</th>
<th>Achieved (Y or N)?</th>
<th>Benchmark</th>
<th>Desired Outcome</th>
<th>Actual Outcome</th>
<th>Unit of Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Click or tap here to enter text.</td>
<td>Choose an item.</td>
<td>Click or tap here to enter text.</td>
<td>Click or tap here to enter text.</td>
<td>Click or tap here to enter text.</td>
<td>Click or tap here to enter text.</td>
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**All Strategic Goals and Priorities are Aligned to the College Mission.

Describe any impacts these goals had on your health indicator(s).
Based on findings in Parts I – IV, develop an action plan for your program or unit from now until your next CPR date. This should include goals that align with the College Mission, measurable outcomes, benchmarks, and alignment to the College’s Strategic Priorities, and/or Strategic Goals. Be sure to focus on weaknesses identified in ARPD data, PSLO outcomes, results of survey data, and other data used to assess your unit or program. This plan should guide your program and subsequent APRUs, but may be amended based on new initiatives, updated data, or unforeseen external factors.

<table>
<thead>
<tr>
<th>Goal</th>
<th>Strategic Goal/Priority (List number)</th>
<th>Benchmark</th>
<th>Desired Outcome</th>
<th>Unit of Measure</th>
<th>Year(s) Implemented</th>
</tr>
</thead>
<tbody>
<tr>
<td>HPMS Action Strategy 1</td>
<td>Click or tap here to enter text.</td>
<td>A complete, accurate, and transparent budget process that includes labor costs at the program or department level</td>
<td>Enhance the budgeting process to include labor costs at the program or department level</td>
<td>Implementation of an enhanced budgeting process that includes labor costs at the program or department level</td>
<td>AY 19-20</td>
</tr>
<tr>
<td>21CF Action Strategy 3</td>
<td>Click or tap here to enter text.</td>
<td>Conduct functional emergency response exercises every fall and spring semester</td>
<td>Students, faculty, staff, and visitors are well prepared to safeguard life and property during emergency incidents that affect the campus</td>
<td>Conduct functional emergency response exercises in fall 2019 and spring 2020</td>
<td>AY 19-20</td>
</tr>
<tr>
<td>21CF Action Strategy 2</td>
<td>Click or tap here to enter text.</td>
<td>A well maintained and fully functioning 500 kW PV system</td>
<td>A PV system that delivers, on average, 500 kW of photovoltaic electricity to the campus</td>
<td>Kilowatt hours</td>
<td>AY 19-20</td>
</tr>
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</table>
### Goal

<table>
<thead>
<tr>
<th>Strategic Goal/Priority (List number)</th>
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<th>Unit of Measure</th>
<th>Year(s) Implemented</th>
</tr>
</thead>
<tbody>
<tr>
<td>21CF Action Strategy 1</td>
<td>Click or tap here to enter text.</td>
<td>An effective electronic workflow process for facility use agreements</td>
<td>Implementation of an electronic workflow process for facility use agreements that fosters increased coordination, transparency, and efficiency throughout the campus in compliance with all applicable laws, policies, and procedures</td>
<td>AY 19-20</td>
</tr>
</tbody>
</table>

### 5. Resource Implications

Resource Request(s) for next year (from CPR Plan for your program or unit, or one(s) developed in Part V above if CPR was completed prior to 2018).

☑️ I am NOT requiring resources for my program/unit.