

Institutional Research & Analysis



1. Program or Unit Description

Program or Unit Mission or Purpose Statement:

The Office of Institutional Research & Analysis at Kaua'i Community College serves as a resource by providing systematic, timely, user-friendly official data and research services that are used to enhance decision making and policy formulation, prepare mandated reports, and to measure institutional effectiveness.

What is the target student or service population?

All Kaua'i Community College Students, University Center Students, Potential Students.

2. Analysis of the Program/Unit

Discuss the Program's or Unit's strengths and areas to improve in terms of Demand, Efficiency, and Effectiveness based on an analysis of the program's Quantitative Indicators or comparable unit-developed measures or program-developed metrics. Include a discussion of relevant historical-trend data on key measures (i.e., last three years).

Demand

This is the third year Institutional Research & Analysis is reporting for the Annual Report of Program Data. Methods for collecting data on user requests were established two years ago. The data for Quantitative Indicators were collected by using a request tracking database developed by the department. 359 requests were closed in the 2020 fiscal year (65% were requested by faculty, 29% by staff and 6% were for external/UH System reporting purposes). This is a 31% increase over prior year. All requests were completed by the target date indicated when the ticket was received. Many of the requesters did not provide the recommended two-weeks needed to complete a project and the average time to complete requests was a little over a week.

Trainings and workshops offered increased by 22% over prior fiscal year despite campus lockdowns due to the pandemic. Twenty-two workshops/Professional Development opportunities were offered onsite and at the system on Tableau (user and developer training), Dashboard Best Practices, Survey Development and Reporting efficiencies, and Program Review.

Efficiency

<u>Survey development policy and procedures</u> were written and reviewed by a workgroup comprised of employees from different areas of the college and a student representative. College Council approved the policy (KCCP 1-11) and it was implemented for the Fall 2020 term. A public facing <u>calendar</u> was created that also provides permission based access to survey results. A more refined process for housing survey respondent and item banks will provide an opportunity to mitigate survey fatigue and continue to improve survey response rates.

A new development for Institutional Research & Analysis in 2020 included permission based dashboard access for licensed users. Refreshable dashboards with student level information were created to track outreach efforts to increase retention and get student feedback. Assessment silos were consolidated through the use of the software for meaningful longitudinal analyses. A total of 3,721 views were logged over eight different areas of the college. Dashboards with the highest views include: Budget Operating Statement, Enrollment, Financial Aid Dashboard, University Center ARPD, and the Course Trends Dashboard.

Effectiveness

This is the third year in a row that the department had a world-class NPS score. Item means for the user satisfaction survey remained higher than desired outcome and are provided in Appendix 2.

In summary, strengths remain consistent for this department: Demand by faculty and staff, on-time deliverables, and a world-class NPS. The department will continue to educate and refine dashboarding best practices as more employees are provided Tableau Server access in the coming academic year.

Discuss significant program or unit actions (new certificate(s), stop outs, gain/loss of position(s), results of prior year's action plan, etc.). Include external factors affecting the program or unit.

The request for additional Tableau licenses was ranked highest in priority for the 2018-2019 APRU requests. However, the pandemic caused a spending freeze so the licenses could not be procured.

The Overall Program Health is Healthy

Quantitative Indicators

Demand Indicators	2017-2018 ^{1, 2}	2018-2019 ^{1, 2}	2019-2020 ^{1, 2}	2020-2021
# Internal IR Requests	217	275	359 ³	
# External IR Requests	18	6	2	
# Trainings/Workshops	11	18	22	
# Dashboards & Self- service Tools Created	22	8	29	

Efficiency Indicators	2017-2018 ^{1, 2}	2018-2019 1, 2	2019-2020 ^{1, 2}	2020-2021
% Internal IR Requests Completed On-time	96%*	99%	99%	
% External IR Requests Completed On-time	100%	100%	100%	
# Processes Improved/Streamlined	108	140	244	
# Dashboard & Self- service Tool Users/Views	1,106	1,425	4,004 (Public) 3,271 (Online)	

Effectiveness Indicator	2017-2018 ^{1, 2}	2018-2019 ^{1, 2}	2019-2020 1, 2	2020-2021
Net Promoter Score	95	96	100	

^{*}Target Date adjusted to accommodate competing priorities

3. Program Student Learning Outcomes or Unit/Service Outcomes

List of the Program Student Learning Outcomes or Unit/Service Outcomes, program or Unit/Service Outcomes that have been assessed in the year of this Annual Review, assessment results, and changes that have been made as a result of these assessments.

PSLO 1: Provide accurate, usable data for faculty and staff. Assessed. One-hundred percent of requests were in closed status for the Fiscal Year. A request goes from resolved to closed once

¹ Data glossary is located in Appendix 1

² Health call scoring rubric is located in Appendix 3

³ All Meetings were included in Request N for telework time tracking (Spring 2020)

stakeholder confirms data met request needs. No improvements were implemented and this PSLO will be reassessed in 2020-2021.

PSLO 2: Provide timely and effective customer service. Assessed. NPS score was 100, so improvements were implemented. This PSLO will be reassessed in 2020-2021.

PSLO 3: Reduce the number of ad hoc requests through self-service reporting tools. Assessed. There were 4,004 Dashboard & Self-Service Views (Tableau Public) and 3,271 Dashboard & Self-Service Views (Tableau Online). No improvements were implemented and this PSLO will be reassessed in 2020-2021.

4. Action Plan

Based on findings in Parts 1-3, develop an action plan for your program or unit from now until your next Comprehensive Review date. Be sure to focus on areas to improve identified in ARPD data, student learning or unit/service outcomes, results of survey data, and other data used to assess your program or unit. This plan should guide your program/unit through to the next program/unit review cycle and must detail measurable outcomes, benchmarks and timelines. Include an analysis of progress in achieving planned improvements.

2019-2020 Action Plans

There were two action plans for 2019-2020. The first was to provide survey development support. This was achieved as policy was written and adopted by the college for Institutional Surveys. This was needed as there were 40 survey related requests in FY20. An action from this plan that will be carried into FY 21 is to continue to refine process for storing survey items and create end user driven tool to access items and results. Part of that ongoing process will include developing a question bank and repository of invitees and respondents per survey to mitigate over-surveying and associated fatigue in an effort to increase response rates.

The second action plan for 2019-2020 was to assist System in Tableau deployment for reporting. The Kaua'i Tableau site had 3,271 views in FY20. Three extracts were scheduled for system use and refresh, for which KAU IR developed logic. This action plan was achieved as refresh schedules are now managed by System personnel. Kaua'i IR will continue providing professional development for System IR and aid in developing an awareness campaign.

2020-2021 Action Plans

Goal 1 (aligns with Strategic Goals 1, 4, 6, and 7): Build inferential analysis capability to support more advanced analyses by developing predictive models to identify opportunities for intervention throughout the student lifecycle using attributes indicative of risk types extracted in inferential analysis efforts from Year 3. The desired outcome is to predict student attrition from first term to second term with 85% accuracy. This will be measured by assessing the accuracy of developed predictive models.

Goal 2 (aligns with Strategic Goals 1, 2, 3, 4, 5, 7, 8, 10, 17, and 20): Increase dashboard awareness and adoption. The desired outcome is for faculty and Staff to know how to find the data they need by effectively working with dashboards. This will be measured by a campus-wide survey and the goal is to increase awareness from 52% to 60%.

The date of the next Comprehensive Program Review (CPR) is Fall 2022

These goals and action plans will complete the fourth year of the department plan developed and initiated in 2017-2018 and aid the campus in becoming more data-informed.

5. Resource Implications

Detail any resource requests, including reallocation of existing resources (physical, human, financial)

☒ I am NOT requesting additional resources for my program/unit.

Appendix 1



Kaua'i Community College

Amanda Fluharty

Annual Report of Institutional Research & Analysis Department Data Glossary 2018

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2 – Number of External IR Requests	
3 – Number of Trainings/Workshops	
4 – Number of Dashboards & Self-Service Tools Created	
Efficiency Indicators	11
1 – Percentage of Internal IR Requests Completed On-Time	11
2 – Percentage of External IR Requests Completed On-Time	11
3 – Number of Processes Improved/Streamlined	11
4 – Number of Dashboards & Self-Service Tool Users/Views	12
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Demand Indicators

1 – Number of Internal IR Requests

Data Source: Institutional Research & Analysis Request Tracking Database

REQUEST_TRACKING.ISSUES, REQUEST_TRACKING.CONTACTS

Definition/Description

Total number of Institutional Research tickets in closed status from July 1 to June 30 (Fiscal Year) requested by internal stakeholders.

2 – Number of External IR Requests

Data Source: Institutional Research & Analysis Request Tracking Database

REQUEST_TRACKING.ISSUES, REQUEST_TRACKING.CONTACTS

Definition/Description

Total number of Institutional Research tickets in closed status from July 1 to June 30 (Fiscal Year) requested by external stakeholders.

3 – Number of Trainings/Workshops

Data Source: Institutional Research & Analysis Request Tracking Database

REQUEST_TRACKING.ISSUES, REQUEST_TRACKING.CONTACTS

Definition/Description

Total number of Institutional Research tickets in closed status from July 1 to June 30 (Fiscal Year) for Training or Workshops.

2020 Kaua'i Community College ARPD Program: Institutional Research & Analysis

4 – Number of Dashboards & Self-Service Tools Created

Data Source: Institutional Research & Analysis Request Tracking Database

REQUEST_TRACKING.ISSUES, REQUEST_TRACKING.CONTACTS

Definition/Description

Total number of Institutional Research tickets in closed status from July 1 to June 30 (Fiscal Year) for Dashboards & Self-Service Tools.

Efficiency Indicators

1 – Percentage of Internal IR Requests Completed On-Time

Data Source: Institutional Research & Analysis Request Tracking Database

REQUEST_TRACKING.ISSUES, REQUEST_TRACKING.CONTACTS

Definition/Description

Percentage of Institutional Research tickets in closed status from July 1 to June 30 (Fiscal Year) completed on time and requested by internal stakeholders.

2 – Percentage of External IR Requests Completed On-Time

Data Source: Institutional Research & Analysis Request Tracking Database

REQUEST_TRACKING.ISSUES, REQUEST_TRACKING.CONTACTS

Definition/Description

Percentage of Institutional Research tickets in closed status from July 1 to June 30 (Fiscal Year) completed on time and requested by External stakeholders.

3 – Number of Processes Improved/Streamlined

Data Source: Institutional Research & Analysis Request Tracking Database

REQUEST_TRACKING.ISSUES, REQUEST_TRACKING.CONTACTS

Definition/Description

Number of Institutional Research tickets in closed status from July 1 to June 30 (Fiscal Year) improved or streamlined by using code and/or dashboard to automate task.

4 – Number of Dashboards & Self-Service Tool Users/Views

Data Source: Institutional Research & Analysis Request Tracking Database

REQUEST_TRACKING.ISSUES, REQUEST_TRACKING.CONTACTS,

Tableau Public View Counter

Definition/Description

Number of views from July 1 to June 30 (Fiscal Year) to dashboards & self-service tools. For data that is available via web the count is derived by using view counter in Tableau Public. For internal resources, dashboard usage is tracked in the Self-Service/Refresh field in the Institutional Research and Analysis Request Tracking Database.

Effectiveness Indicators

1 – Net Promoter Score from IR Survey

Data Source: Google Form – Institutional Research & Analysis User Satisfaction Survey https://docs.google.com/forms/d/e/1FAIpQLSeoeOlOsOUNhX6WCzfM7Wned5JOW4WI5Iq0pAu57 RLzhgvSqw/viewform?usp=sf link

Definition/Description

Net Promoter Score®, or NPS®, measures customer experience and predicts business growth. This proven metric transformed the business world and now provides the core measurement for customer experience management programs the world round.

The NPS Calculation

NPS is calculated by using the answer to a key question, using a 0-10 scale:

How likely is it that you would recommend Institutional Research & Analysis to a colleague?

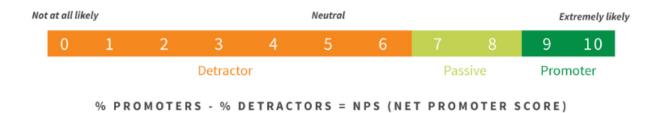
Respondents are grouped as follows:

Promoters (score 9-10) are loyal enthusiasts who will keep buying and refer others, fueling growth.

Passives (score 7-8) are satisfied but unenthusiastic customers who are vulnerable to competitive offerings.

Detractors (score 0-6) are unhappy customers who can damage your brand and impede growth through negative word-of-mouth.

Subtracting the percentage of Detractors from the percentage of Promoters yields the Net Promoter Score, which can range from a low of -100 (if every customer is a Detractor) to a high of 100 (if every customer is a Promoter).



Health Call Scoring Rubric

Demand: Monitoring the capacity and need for the unit.

Demand Indicators	Value	Benchmark	Scoring
Number of Internal IR	359	2= 175 or more; 1 = 125 to 174; 0 = Less than 125	Healthy
Requests (1)			
Number of External IR	2	Not used in Health Call	
Requests (2)			
Number of	22	2 = 10 or more; $1 = 6$ to 9; $0 = Less$ than 6	Healthy
Trainings/Workshops (3)			
Number of Dashboard &	29	2 = 6 or more; $1 = 3$ to 5; $0 = Less$ than 3	Healthy
Self-Service Tools			
Created (4)			

Efficiency: Monitoring how time is budgeted and spent in the unit

Efficiency Indicators	Value	Benchmark	Scoring
Percentage of Internal IR	100%	2 = 85% or more; $1 = 70%$ to $84%$; $0 = Less$ than	Healthy
Requests Completed on		70%	
Time (1)			
Percentage of External	100%	2= 100%; 1 = 90% to 99%; 0 = Less than 90%	Healthy
IR Requests Completed			
on Time (2)			
Number of Process	244	2 = 50 or more; $1 = 30$ to 49 ; $0 = Less than 30$	Healthy
Improved/Streamlined			
Number of Dashboard &	7,725	2 = 1,000 or more; $1 = 700$ to 999; $0 = Less$ than	Healthy
Self-Service Tool		700	
Users/Views			

Effectiveness: Monitoring the quality of products produced by the unit

Effectiveness Indicator	Value	Benchmark	Scoring
Net Promoter Score	100%	2 = 70 or more; $1 = 50$ to 69 ; $0 = Less than 50$	Healthy

Score Key

2 = Healthy

1 = Cautionary

0 = Unhealthy

Appendix 3

User Satisfaction Survey Summary by Item

2019-2020 Responses

Survey Item	Achieved (Y or N)?	Desired Outcome	Actual Outcome	Unit of Measure
Data Accuracy	Y	4 or better	4.91	Average Survey Score Scale 1-5
Data Met Needs	Y	4 or better	4.96	Average Survey Score Scale 1-5
Data was Timely	Y	4 or better	4.96	Average Survey Score Scale 1-5
Data was Actionable	Y	4 or better	4.91	Average Survey Score Scale 1-5
Customer Service	Y	4 or better	4.96	Average Survey Score Scale 1-5
Data was easy to understand	Y	4 or better	4.57	Average Survey Score Scale 1-5
Overall	Y	4 or better	4.96	Average Survey Score Scale 1-5

N=44