2020-2022
Institutional Effectiveness Report

***As of August 2022**

Compiled by

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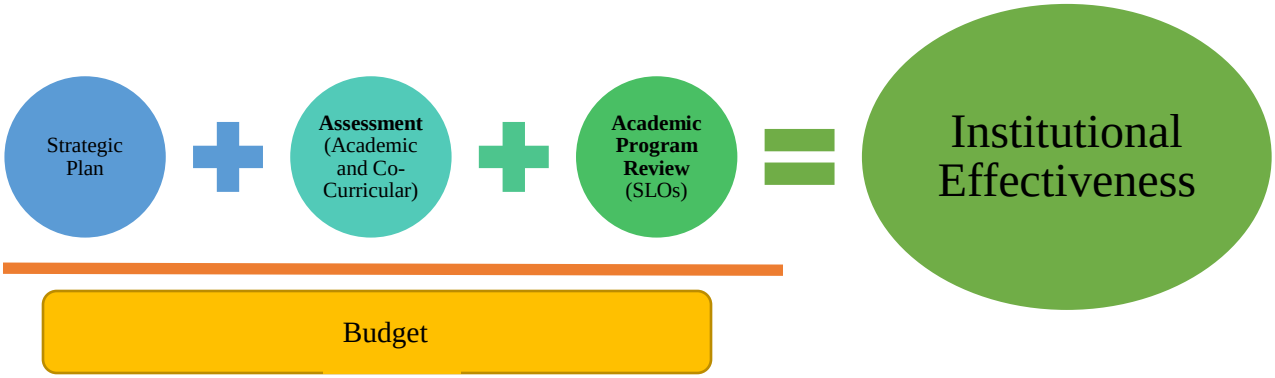
Director Institutional Effectiveness and Strategic Planning

EXECUTIVE SUMMARY

The Institutional Effectiveness Report is a summary of information from the Strategic Plan, Assessment (Academic and Co-Curricular), Academic Program Review, and the Budget, using the formula below:

Graphic 1: Mercy College of Ohio IE Formula



This report contains the follow subsections:

Review of Prior Year Recommendations
Strategic Plan
Assessment
Academic Program Review
Budget

Recommendations for 2022-2023

Recommendation	**Responsible Party(ies)**	**Outcome Expected**
Review Strategic Plan to remove assumed practices and focus on strategic implementation of new goals.	Strategic Advisory Council Strategic Leadership Team	Creation of new Strategic Plan.
Revise Academic Program Review process to be meaningful.	Director of Institutional Effectiveness and Program Directors/Deans	Submission of annual reports/program review with feedback provided to the programs.
Explore the use of badging through Credly to help with the Mercy College Experience, Academic Assessment Committee's initiative on Excellence Referrals, and other areas.	Director of Institutional Effectiveness, Academic Assessment, Co-Curricular Assessment, Strategic Advisory Council	Implementation of a badging system to support College values and mission.
Co-Curricular Assessment focus on Institutional Learning Goals.	Co-Curricular Assessment Committee	Align annual assessment report to ILGs and improve assessment to rely less on survey data alone.

REVIEW OF PRIOR RECOMMENDATIONS

The last recommendations came from the 2019-2020 Institutional Effectiveness Report, which was based on data received in 2018, 2019, and 2020. The status of each goal recommendation below includes updates from 2020-2021, as well as 2021-2022.

Goal 1	**Status**
The committee recommends that ASN and BSN continue with the implementation of specific strategies to increase success rates on the NCLEX-RN during 2018 and 2019. The NCLEX scores increased from 2017 to 2018 and into 2019 in the ASN/AAS Nursing program. The BSNP has a consultant assisting in restructuring some of the program to increase their NCLEX scores. The Ohio Board of Nursing requires that the rates be at least 95% of the national average.	The Nursing Division has continued to implement strategies to increase success rates on the NCLEX-RN. ASN pass rates are in the high 80 percent while BSN continues to struggle. *The newest action plan (2021-2022) is included following this table.*
KPI 4, safety and security as reflected in the Ruffalo Noel Levitz Student Satisfaction Inventory (SSI), needs a revised benchmark as the specified data are not available for comparison. The reference to "Question 13" is obsolete and should refer to the question statement not a number. The committee recommends using the crime statistics as reported in the Annual Security Report required by the Clery Act to identify an appropriate benchmark	With the addition of a new Director of Institutional Effectiveness, these metrics and others are in active review for 2022-2023.
KPI 5, overall student satisfaction with Mercy College educational experience, needs to reference both the Student Satisfaction Inventory (SSI) and Priorities Survey for Online Learners (PSOL). The committee recommends review of this KPI.	
The committee recommends that additional objectives or KPIs be considered as components of Goal 1 and include Academic Program Review that specifies targets for curriculum review and persistence/retention.	
Objective 1, "Review, Revise, and Update the Student Services Plan," is a task not an overall objective. The committee recommends that this objective be revised to focus on improving student services and how these affect the student learning environment. This could include review and revision of the Student Services Plan.	These tasks are being removed from future Strategic Planning for more specific goals.
Objective 2, "Update and implement the College's safety and security initiatives continuously," is a task and not an overall objective. The committee recommends that this objective be revised to focus on improving safety and security at all Mercy College locations including online. This could include review and revision of the Safety and Security Initiatives, as needed.	
Develop better strategies and/or objectives to retain highly qualified faculty and staff.	A new VPAA search is in progress and will help address this area in the future.

Goal 2	Status
Identify goals and measurement methods for community engagement and service.	With the addition of a new Director of Institutional Effectiveness, this metric and others is in active review for 2022-2023. The Student Affairs division is reviewing software we can use to better track these areas.
Identify resources available to ensure tracking of community service and engagement is consistent and not reliant upon one person to track.	
Better identify how to attract underrepresented populations and ensure retention occurs.	
Better tracking of Mercy Health Employees should be identified.	
Goal 3	**Status**
Review of program curriculum is needed to allow for students to increase credit hours per term.	New VPAA will work with Deans and Program Directors.
A review of students with multiple programs of study is needed to ensure student progress toward completion of all programs of study.	
Review and further analysis of retention targets and goals should be a priority for the College. Current goals are not nuanced, and all program goals and College goals are not in alignment. It is possible for all program retention targets to be met yet the College does not meet retention targets.	Work being done in the Student Success and Retention Committee.
Multiple plans are made throughout the College to increase enrollment and retention. However, better analysis, tracking, and review should occur to determine successes. Recommendations include that all efforts be coordinated through one area and tracking mechanism and target goals be developed. Scheduled reviews of each effort should be established to review these targets.	
Maximize marketing opportunities with relationship to social media that meets our current and prospective students where they are.	Under review with Marketing.
Goal 4	**Status**
Review the methodology and collection of data for the Community Benefits KPI. Additional resources should be identified to appropriately account and track hours served.	Student Affairs is reviewing availability of software and other means by which to track and collect hours for students.
Review of the mission and vision questions asked on the Noel Levitz Survey to ensure the College is collecting needed data.	Next Noel Levitz survey is in 2024 and will be reviewed.
Based on the data received, objectives 1 through 3 appear to be the focus of very few offices. Identification of other areas that are missing from the report are needed or	

analysis of these objectives should occur to ensure that these are in fact College level objectives.	Strategic Plan goals being reviewed for 2022-2023.
Possibly change Goal 4 to read, "Respect and embrace our core values, including our religious heritage."	

Action Plan for ASN and BSN 2021-2022

- Next Gen Task Force established – educate faculty to prepare students who will be taking new version of NCLEX exam in April 2023. This initiative included workshops to strengthen overall teaching strategies and student testing related to clinical judgment. The teaching strategies and testing are geared toward developing higher order thinking, clinical judgment, and overall NCLEX success.
    - Conducted 6 faculty workshops related to higher order thinking, clinical judgment, and test writing in the context of NEXT Gen
    - Invited National Speaker, Dr. Ann Neilsen, to further enhance knowledge and application of clinical judgment
- Detailed exam review for all courses in both programs; the majority of exam questions are to be written at application level or higher.
- Evaluation of course assignments re: incorporation of case studies and development of higher order thinking skills.
- Revised testing policy to include grading of Next Gen Style questions.
- Incorporated use of Exam Soft Testing platform – allows for students to be tested on different NCLEX style question types.
- Changed standardized testing for NCLEX predictor to ATI for both programs (BSN was using HESI, AASN had already been using ATI)
- Require ATI comprehensive Testing package that includes individual tutoring for students who are not achieving the "target" level of achievement.
- ATI remediation policy developed for proctored assessments in each course.
- Students who achieve less than 95% predictability on the ATI comprehensive predictor are required to complete the VATI program from ATI and get the "green light" before completion papers sent to the Board of Nursing.
- Worked with Student Success Center to revise the early Alert form and process.
- Worked with the Student Success Center to revise Student Success Plan format and process.

STRATEGIC PLAN

The Strategic Planning process is the roadmap for the College. The mission, vision, and values are identified and set the stage for developing the overall strategic goals. Environmental scanning is conducted externally to identify opportunities and threats. An internal assessment of the organization is conducted to review organizational strengths and weaknesses. An analysis of the above is completed and leads to developing a strategy for overall goal success. After strategy formulation, implementation and evaluation of the plan occurs. The Strategic Planning Process is led by the Strategic Leadership Team (College Administration); this team meets regularly, and twice a year conducts strategic planning retreats as scheduled by the President.

The Strategic Advisory Council represents a cross-section of college stakeholders and participates in and reviews the overall strategy of the College, making recommendations based on college outcomes reports. This council meets four times per year (August, October, February, and May), the month preceding each board meeting. These meetings are facilitated by the Director of Institutional Effectiveness and Strategic Planning.

The Strategic Enrollment Committee represents stakeholders in the enrollment process and reviews the Ruffalo Noel Levitz reports and suggestions for enrollment improvement while analyzing the College's enrollment strategies for future improvement. The committee meets four times per year (once to plan for the year, and again after each semester start to review the enrollment from the start of the term). These meetings are overseen by the Vice President of Enrollment Management and Partnerships.

Evaluation of the strategic plan measures the degree of success the College demonstrates in meeting its goals. This process includes identifying the methods for measuring the goals and recognizing gaps from actual to stated goal(s) and reflecting on the evidence provided. Appropriate action is taken to correct the situation in order to resolve the gap or to recommend another solution. The process of Plan-Do-Check-Act is repeated to create an environment of purposeful change and continual improvement. Where processes are working well the Standardize-Do-Check-Act model is used.

Success can be evaluated in several ways as measures of the following: productivity, quality, resource efficiency, and stakeholder satisfaction among others. The evaluation process is driven by reports from both academic and co-curricular assessment as well as other pertinent college reports and data, i.e. financial.

2021-2022 Summary

Here is a summary of the progress toward stated action steps/KPIs from the previous year. Moving into the 2022-2023 year, the College will report out assumed practices (such as graduation rates, default rates, etc.) in the annual Institutional Effectiveness Report. The Strategic Planning Initiatives for 2022-2023 will focus on those activities not assumed as practice but those strategic to the institution.

The following were the four initiatives of the Strategic Plan for 2021-2022:

1. Provide quality education promoting student success.
2. Develop and sustain collaborative relationships with internal and external constituencies.
3. Maintain and steward the financial viability of the College.
4. Respect and embrace our religious heritage and values.

1. Provide quality education that promotes student success.

Action Step	*Key Performance Indicators*	*Annual Update*

Graduation Rate: – According to the US Department of Education, graduation rates are based on degree completion within 150% of time for specified completion of the degree. (For example, a student completing a six-semester program would have nine semesters to complete the degree and be counted in the 150% completion rate).

Mercy College defines graduation rate as follows: 75% and above – Green – at or above goal; 50%-74% Yellow – below goal; 50% and below – Red – far below goal.

START YEAR	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018
MAJOR					
A.S./A.A.S. in Health Information Technology	✓ 89%	✗ 40%	✗ 36%	✗ 43%	! 54%
A.S./A.A.S. in Nursing (Toledo-Day)	! 59%	! 52%	! 59%	! 54%	✗ 47%
A.S./A.A.S. in Nursing (Toledo-Evening)	! 55%	! 65%	! 56%	! 71%	✗ 41%
A.S./A.A.S. in Nursing (Youngstown - Day)	! 74%	✓ 77%	! 64%	! 57%	! 56%
A.S./A.A.S. in Nursing (Youngstown - Evening)			! 63%	! 65%	! 57%
A.S./A.A.S. in Radiologic Technology	✓ 87%	✓ 90%	✓ 83%	✓ 93%	✓ 90%
B.S. in Human Biology / Biology	✗ 33%	✓ 80%	**	**	**
B.S. in Healthcare Administration (Completion)	! 71%	! 63%	✓ 75%	✓ 82%	! 73%
B.S. in Medical Imaging (Completion)	✗ 45%	! 59%	✗ 45%	✓ 75%	! 62%
B.S. in Nursing (Pre-licensure)	! 72%	! 72%	✓ 85%	✓ 83%	✓ 78%
B.S. in Nursing (RN-BSN Completion)	✗ 30%	✗ 13%	✓ 78%	✓ 73%	*
M.S. Nursing (Leadership)					✓ 75%

KEY: Graduation rate	
75% or greater	✓
50% to 74%	!
Less than 50%	✗

* "Two year" program still within 150% time.
** Four-year program still within 150% time.

Financial Aid Default Rate Percentage (%)

College percentage in comparison to both state/national and other independent institutions.

Trending Positive:

2.5% Default Rate in Fiscal Year 2018

4% in FY2017

5.6% in FY2016

*The college will have the FY2019 3-year Cohort Default rate in fall 2022.

Licensure and Certification Exam Passage Rates

Benchmark determined by individual accreditor.

Class Year	Program	% Mercy College students passing	National Pass Rate*
2019	BSN	66.23%	91.22%
2020	BSN	73.17%	90.29%
2021	BSN	74.24%	86.06%

Class Year	Program	% Mercy College students passing	National Pass Rate*
2019	ASN	88.89%	85.17%
2020	ASN	81.82%	82.80%
2021	ASN	84.85%	78.78%

<table>
<tr><td></td><td></td><td>American Registry of Radiologic Technologists (ARRT) pass rates for Radiologic Technology graduates
<table>
<tr><th>Class Year</th><th>Number Taking</th><th>Number passing on 1st attempt</th><th>% Passing</th></tr>
<tr><td>2021</td><td>25</td><td>22</td><td>88%</td></tr>
<tr><td>2020</td><td>20</td><td>14</td><td>70%</td></tr>
<tr><td>2019</td><td>27</td><td>25</td><td>92.6%</td></tr>
<tr><td>2018</td><td>26</td><td>23</td><td>87.5%</td></tr>
<tr><td>2017</td><td>18</td><td>14</td><td>78%</td></tr>
<tr><td>5 year average</td><td>115</td><td>97</td><td>84%</td></tr>
</table></td></tr>
<tr><td>Safety and Security</td><td>As reflected in the Ruffalo Noel Levitz Student Satisfaction Survey (RNLSSS – administered in the even years) question: “The School is safe and secure for all individuals”</td><td>Satisfaction in the category of safety and security decreased from 2020, 82%, to 76% in 2022.

Immediate comments about parking lot lighting were addressed to include longer hours of lights being on in the parking garage starting in May 2022.</td></tr>
<tr><td>Overall Student Satisfaction with Mercy College Educational Experience</td><td>As reflected in the Ruffalo Noel Levitz Student Satisfaction Survey</td><td>Overall, satisfaction declined from 5.79 in 2020 to 5.51 in 2022; however, more Strengths on the survey were noted in 2022 than in 2020. The decline in student satisfaction may partially be attributed to the many changes the College saw during the pandemic, as the prior survey was completed just before the 2020 pandemic began.</td></tr>
<tr><td>Annual Security Report</td><td>Completed by October 1 each year and distributed to the campus community.</td><td>Completed and posted to website.</td></tr>
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Retention	80% and higher for land-based programs; 65% and higher for online.	Revising retention to undergraduate and graduate retention rates.

	UNDERGRADUATE STUDENTS	GRADUATE STUDENTS
Retention Rates	% Returning after One Year	% Returning after One Year
Fall 2014 to Fall 2015	✓ 76%	NA
Spring 2015 to Spring 2016	✓ 79%	NA
Fall 2015 to Fall 2016	✓ 75%	NA
Spring 2016 to Spring 2017	✓ 82%	NA
Fall 2016 to Fall 2017	✓ 78%	NA
Spring 2017 to Spring 2018**	✓ 80%	NA
Fall 2017 to Fall 2018	✓ 77%	✓ 83%
Spring 2018 to Spring 2019	✓ 79%	✓ 80%
Fall 2018 to Fall 2019	! 74%	✓ 87%
Spring 2019 to Spring 2020	✓ 75%	✓ 95%
Fall 2019 to Fall 2020	✓ 78%	✓ 76%
Spring 2020 to Spring 2021	✓ 79%	✓ 85%
Key		
Retention Rate 75% or greater	✓	
Retention Rate 50-74%	!	
Retention Rate 0-49%	✗	

2. Develop and sustain collaborative relationships with internal and external constituencies.

Action Step	*Key Performance Indicators*	*Annual Update*
Mercy Health Capture Rate of new graduates	Number of nursing and other graduates who are employed with Mercy Health within six months of graduation. As of Fall 2020 goal is to achieve capture rate of 67%.	The number of nursing grads employed by Mercy Health is improving but has not hit the goal of 67%: May 2021: 27/66 = 40.91% Dec 2021: 28/68 = 41.18%
Enrollment of Bon Secours Mercy Health/Ensemble Employees and Partnership Employees	headcount and credit hours	

	HEADCOUNT		
	SP-21	SU-21	FA-21
BSMH	287	208	279
ENSEMBLE	5	2	1
ST. Luke	2	0	1
TOTAL	294	210	281

	CREDITS		
	SP-21	SU-21	FA-21
BSMH	2199.5	1348.5	2152.5
ENSEMBLE	31.5	13.5	6.0
ST. Luke	22.00	0	12.0
TOTAL	**2253.0**	**1362.0**	**2170.5**

Enrollment of Underrepresented students and Increased enrollment in underrepresented populations at the College.

headcount

Spring 2021 credit-bearing students	**GRAD**	**Toledo UG**	**BGSU**	**STEY**	**TIFF**	**Grand Total**
Amer. Indian or Alaska Native		2				2
Asian	1	13	1	3		18
Black or African American	4	110	4	30		148
Hispanics of any race	3	75	4	14		96
Native Hawaiian /Pacif Isl		1				1
Race and Ethnicity Unknown		4	1	1		6
Two or More Races	3	34	4	14		55
White	50	708	57	158	3	976
Grand Total	**61**	**947**	**71**	**220**	**3**	**1302**

Summer 2021 credit-bearing students	**GRAD**	**Toledo UG**	**STEY**	**BGSU**	**TIFF**	**Grand Total**
Amer. Indian or Alaska Native		2				2
Asian	4	8	2			14
Black or African American	4	66	17			87
Hispanics of any race	3	42	10	1		56
Native Hawaiian/Pac Isl		1				1
Race and Ethnicity Unknown		3	1			4
Two or More Races	4	22	6	2		34
White	66	440	94	10		610
Grand Total	**81**	**584**	**130**	**13**	**0**	**808**

		Fall 2021 credit-bearing students / **GRAD** / **Toledo UG** / **STEY** / **BGSU** / **TIFF** / **Grand Total** Amer. Indian or Alaska Native: 3 Asian: 4, 18, 2, 2, 26 Black or African American: 6, 134, 25, 7, 2, 174 Hispanics of any race: 3, 75, 12, 3, 2, 95 Native Hawaiian /Pacif Isl: 1, 1 Race and Ethnicity Unknown: 3, 1, 1, 5 Two or More Races: 2, 31, 15, 4, 1, 53 White: 72, 673, 147, 54, 8, 954 **Grand Total: 87, 938, 202, 71, 13, 1311**
Articulation agreements/dual degrees with Colleges and Universities	New agreements on file	Agreements in place for BGSU, Tiffin University, Logan University, and others.

3. Maintain and steward the financial viability of the College.

Action Step	*Key Performance Indicators*	*Annual Update*
Financial Stability	Less reliance on Medicare pass through funds (revenue over expenses continues to move toward breakeven without Medicare Pass Through dollars); Achieve the target number on the Composite Financial Index (CFI) submitted in the HLC Annual Institutional Update (AIDU); target date to achieve the breakeven of revenue over expenses is 2024.	Financial stability is based on College operations, instead of by investments or Medicare passthrough.

	2017	2018	2019	2020	2021
Support and Revenue					
Tuition and Fee Revenue	$ 14,897,196	$ 15,767,680	$ 15,341,972	$ 15,395,052	$ 16,911,034
Grants, Gifts and Bequest	$ 55,000	$ 239,775	$ 395,040	$ 465,695	$ 928,806
Grant-Student HEERF	$ -	$ -	$ -	$ 569,400	$ 4,206,375
Total Support and Revenue	$ 14,952,196	$ 16,007,455	$ 15,737,012	$ 16,430,147	$ 22,046,215
Expenses					
Salary Expense	$ 10,220,255	$ 10,614,096	$ 10,976,447	$ 11,070,450	$ 12,220,700
Benefit Expense	$ 2,721,677	$ 3,061,065	$ 2,267,485	$ 2,476,147	$ 2,947,129
Grant Expense-Student HEERF	$ -	$ -	$ -	$ 569,400	$ 4,206,375
Other Expenses	$ 3,205,691	$ 3,245,083	$ 3,276,570	$ 3,795,188	$ 3,405,013
Total Expenses	$ 16,147,623	$ 16,920,244	$ 16,520,502	$ 17,911,185	$ 22,779,217
Contribution Margin	$ (1,195,427)	$ (912,789)	$ (783,490)	$ (1,481,038)	$ (733,002)

Gifts and Grants for the Institution	Report on gifts and grants	• Awarded $2.1M HRSA grant for Nursing Workforce Diversity, 4 years • Awarded $740k HRSA grant for Community Health Worker – working in collaboration with BGSU's social work program, 4 years. • Awarded $459k Choose Ohio First grant to fund tuition for certificate students, 5 years. • Completing the 4th year of the four-year HRSA primary care grant. $2.4M (ending 06/30/2022) • Awarded HRSA Physician Assistant Rural Training Grant $557k, 4 years • Additional awards for HEERF **Reports on gifts:** • 2021: raised $284,000 • 2022: raised $297,000

4. Respect and embrace our religious heritage and values.		
Action Step	*Key Performance Indicators*	*Annual Update*
Mission, Vision and Values	as reflected in the Ruffalo Noel Levitz Student Satisfaction Survey Results – results from question on survey – "I know and understand the Mission and Values of the College."	Satisfaction with knowing and understanding the Mission, Vision, and Values of the College was 86% in 2020 and 83% in 2022. The new Strategic Plan is specifically focused on the student experience and ensuring students are participating in the values of the College.
Community service and Service-Learning Projects	measured by the number of hours served.	Incomplete information available with the pandemic from 2020-2022. The Student Affairs division is reviewing a tracking mechanism for service hours, and this tracking will be a part of the new Strategic Plan focusing on the Mercy College Experience for students.
CIMA Survey on Mission and Values from ACCU	Association of Catholic Colleges and Universities	Completed in 2021 and 2022.

COLLEGE ASSESSMENT COMMITTEES

Mercy College assesses student learning outcomes (SLOs) through a variety of methods that are linked to coursework and aligned with course assignments, including testing, journals, reflections, written work, oral presentations, and participation in co-curricular activities. Rubrics are used as a tool for assessment of the assigned work. The data gained from the assessment rubrics provides information regarding the achievement of the learning outcomes. Assessment of student learning is completed at the following levels: course, programmatic, and institutional. Assessment of student learning provides quantitative and qualitative data for measurement of student achievement. The assessment process produces information that supports data-driven decisions for overall curricular improvement. Assessment activities are conducted from the time a student enters the College until the time they exit, plus post-graduation surveys, etc. Student participation is essential to the process as it completes the cycle of assessment. Learning Outcomes identified – Assessment of Learning Outcomes – Data Collection and Analysis – Curricular Improvement measures recommended and implemented. Overall assessment is part of the institutional effectiveness of the organization.

Both the Academic Assessment and Co-Curricular Assessment Committees support HLC Standard 4B:

The institution engages in ongoing assessment of student learning as part of its commitment to the educational outcomes of its students.

1. *The institution has effective processes for assessment of student learning and for achievement of learning goals in academic and co-curricular offerings.*

2. *The institution uses the information gained from assessment to improve student learning.*

3. *The institution's processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty, instructional and other relevant staff members.*

Background

In the years prior to the 2019-2020 academic year, assessment data was decentralized. Information was collected and compiled by an academic assessment committee for curricular assessment, and via assessment forms for co-curricular assessment. Requested data was distributed to academic programs from the Institutional Research Analyst for review and used for refocusing course or program activities, assignments, learning objectives or other improvements as needed.

The data from academic and co-curricular assessment were used internally by programs of study, departments, and divisions to identify strengths and challenges as a guide for self-evaluation and continuous improvement. While the co-curricular model remained substantively unchanged after 2015-2016, the faculty governance process began efforts to restructure the Academic Assessment Committee to become a faculty-run committee which replaced the prior structure that was led by an administrative fellow.

To create a holistic picture of progress in promoting and achieving the college's institutional learning outcomes in the 2017-2018 academic year, the academic assessment committee migrated to a more inclusive and sustainable structure and a newly formed Co-Curricular Assessment Committee was formed comprised of staff members in various non-academic departments including Student Life, Academic Advising, and Library Services to name a few. To bring together academic and co-curricular assessment, the College Assessment Committee was created in 2019.

Academic year 2021-2022 saw a change in leadership at the VPAA level and the hiring of a new Director of Institutional Effectiveness. The institutional effectiveness process was in review for the 2021-2022 year with changes expected for 2022-2023.

Descriptions of the Academic and Co-Curricular Assessment Committees

The *Academic Assessment Committee (AAC)* is a Standing Academic Committee of the Faculty Assembly. Under the express authority of the Faculty Assembly, the purpose of the Committee is to be responsible for the coordination and advising of institutional and program assessment activities and promoting a faculty-driven culture of assessment in accordance with the mission, vision, and values of the College.

Scope of Duties: Responsibilities of the Committee include, but are not limited to the oversight of:

- Monitoring and revising Institutional Learning Outcomes (ILO) in coordination with college stakeholders as needed.
- Developing institutional evaluation instruments for academic use and to support training on how to use them.
- Supporting and contributing to the consistent collection and analysis of ILO artifacts, data, and other essential information within the academic community.
- Working in coordination with college stakeholders on providing regular and holistic data analysis and reporting

The *Co-curricular Assessment Committee (COAC)* is a standing College committee. The purpose of the committee is to develop and monitor co-curricular learning outcomes that align with the institutional learning goals, as well as the college's mission, vision, and values. Additionally, the committee is responsible for developing and coordinating a cohesive assessment process for all co-curricular departments. The committee also identifies resources to assist with assessment-related training efforts for all co-curricular departments.

Scope of Duties: Responsibilities of the Committee include, but are not limited to oversight of:

- Collecting data, making recommendations, and providing a report to the College Assessment Committee.
- Contributing content to the annual College Assessment Report.
- Assisting staff members who sponsor activities that have been designated as co-curricular using the Higher Learning Commissions guidelines in developing assessment plans that are meaningful and will enhance the Mercy College of Ohio student experience.

ACADEMIC ASSESSMENT

Introduction

In the 2021-2022 Academic Year the Academic Assessment Committee (AAC) continued to refine and streamline the academic assessment process to expand the number of courses assessed, expand the number of students assessed, and simplify the academic assessment process by assigning faculty liaisons for the coordination of rubric deployments and data gathering. In addition to expanding data collection and improving faculty communications, the committee also introduced its first training video for faculty members, which provides an overview of how to score an assignment using an Institutional Learning Goal (ILG) rubric.

Institutional Learning Goals

1. Are committed to social engagement, by demonstrating an understanding of servant leadership that improves the community and broader society.

    To achieve this goal, students will:

    Level 1 (Knowledge/Comprehension): Describe how one's specific course/program of study contributes to community and society.

    Level 2 (Application/Analysis): Complete a service-learning activity that benefits an organization/community.

    Level 3 (Synthesis/Evaluation): Demonstrate an understanding of a complex community or societal problem that impacts one's own life or the lives of others.

2. Are committed to intellectual inquiry, able to identify, evaluate, and propose solutions to problems in creative ways.

    To achieve this goal, students will:

    Level 1 (Knowledge/Comprehension): Identify and explain problems/issues.

    Level 2 (Application/Analysis): Participate in the problem-solving process to address a simple problem using appropriate sources.

    Level 3 (Synthesis/Evaluation): Participate in the problem-solving process to identify multiple solutions to a complicated or complex problem using appropriate sources.

3. Are effective communicators, able to write, speak, and listen as a professional.

    To achieve this goal, students will:

    Level 1 (Knowledge/Comprehension): Demonstrate appropriate use of the vocabulary of one's specific course/program of study.

    Level 2 (Application/Analysis): Present organized ideas through the various communication media in an understandable way to a designated audience.

    Level 3 (Synthesis/Evaluation): Critically evaluate information and sources used for written work and presentations.

4. Are proficient with ethical reasoning, using the lens of the Mercy Values as part of one's everyday decision-making process.

    To achieve this goal, students will:

    Level 1 (Knowledge/Comprehension): Express Mercy's Values when communicating with others.

Level 2 (Application/Analysis): Explain the significance of the Mercy College Values in a course/program of study.

Level 3 (Synthesis/Evaluation): Defend ethical decisions made using Mercy College Values.

5. Are professionally competent, displaying the capacity to successfully join the workforce in one's desired course/program of study upon graduating.

   To achieve this goal, students will:

   Level 1 (Knowledge/Comprehension): Demonstrate proficiency in the performance of general responsibilities required of entry-level employees in their program of study.

   Level 2 (Application/Analysis): Operate in a manner that safely contributes to the effectiveness of teams.

   Level 3 (Synthesis/Evaluation): Evaluate the performance of professionals in the course/program of study.

6. Are committed to lifelong learning, exhibiting responsibility for the future of one's own educational experience.

   To achieve this goal, students will:

   Level 1 (Knowledge/Comprehension): Describe one's own professional requirements.

   Level 2 (Application/Analysis): Demonstrate the ability to set professional goals that support lifelong productivity.

   Level 3 (Synthesis/Evaluation): Develop an action plan for future growth and development.

What We Measured in the 2021-2022 Academic Year

A total of 670 students across 16 courses were assessed for ILG competency during the 2021-2022 academic year across all certificate and undergraduate degree-granting programs with a breakdown as follows:

Program	Fall Assessment Count	Spring Assessment Count
Arts and Sciences	197	139
Nursing	135	126
Radiology	42	8
Imaging	11	12
Totals	**385**	**285**

Courses and Course Selection

The courses selected for the 2021-2022 Academic Year were selected based on one or more of the following criteria.

- Courses that span all six Institutional Learning Goals on all levels.
- Representative of the curriculum across multiple undergraduate academic programs at Mercy College of Ohio.
- All programs must be represented.

Methodology for Academic Assessment

The methodology and process for academic assessment were refined for the 2021-2022 academic year to streamline course preparation and data collection. While the process for scoring and collecting data continued to be executed through ILG scoring rubrics in the Canvas Learning Management System (LMS), the AAC committee developed a new method to ensure ILG rubrics were placed in the proper assignments and that the scoring was completed in a timely manner. For the 2021-2022 academic year, the AAC committee assigned each of its members to be a liaison to faculty members who were assessing ILGs in their courses. As liaisons, AAC members contacted their respective faculty members to discuss the assignment(s) to be assessed, identified the name and the location of the assignment in the course, and confirmed the ILG and applicable level being measured. This information, along with the due date of the assignment(s) being assessed, was entered into the AAC course worksheet. AAC faculty liaisons also worked with any faculty members who required training on ILG scoring, and a training video was developed for faculty members who needed to review the rubric-scoring procedure in Canvas.

ILG Scoring/Canvas Procedure

The procedure for scoring assignments for ILG competencies is completed by the course instructor using a tool called "Speedgrader," which is built into the college's LMS, Canvas. After courses to be scored are identified by the AAC, they are placed on the AAC Key Assignment Worksheet, which lists the course, the course section, and the assignment to be scored.

Academic Assessment Committee

Spring Semester 2021 Course Assignment Assessment Worksheet

ILG/ILO	KEY Course/Number/Section Number/Lecture-Lab-Clinical	Assignment Name	Canvas Module	KEY Course Instructor	Committee Member Responsible for Verification	Rubric in Course Assignment	Rubric Completed
ILG 1.3	NUR 434	Community Clinical Project	Module 6	Phommalee	PHOMMALEE & BELL	YES	
ILG 2.1	BIO 221	Case Studies	Module 6	Klarr/Kaw	MORRISON	YES	
ILG 2.2	MTH 140	Planted question on final exam	Module 16	Dalwalla	STOOS	YES	
ILG 2.3	BIO 290	Case Studies	Module 6 (case study# 1)	Morrison	MORRISON	YES	

After the key assignment worksheet is completed, the worksheet is sent to the college's Distance Education division, which places the appropriate ILG scoring rubrics into the assignments specified. After rubric placement is completed, the AAC faculty liaisons confirm the placement with the course instructor. If the course instructor is unfamiliar with the process, they are sent to review the ILG Scoring Training Video to familiarize themselves with the proper procedures for completion.

The ILG scoring rubrics that are placed in Speedgrader list the ILG Criteria and include three scoring ratings for those who Exceed, Meet, or Do Not Meet scoring expectations.

Assignment Rubric Details

HIS 210 Discussion Board Rubric FA19V (1)

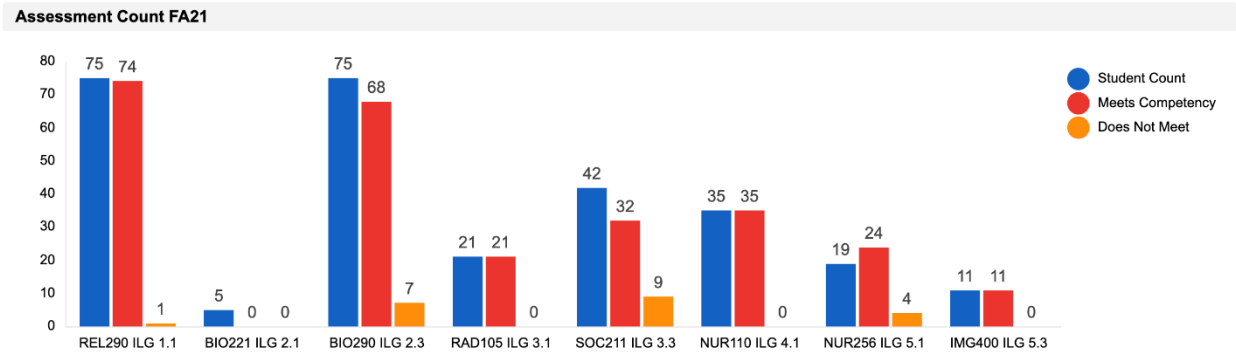
Criteria	Ratings			Pts
ILG 2: Level 2 Outcome view longer description threshold: 0.01 pts	0.02 pts Exceeds Expectations Can lead the problem-solving process to address a simple problem using appropriate sources.	0.01 pts Meets Expectations Can participate in the problem-solving process to address a simple problem using appropriate sources.	0.0 pts Does Not Meet Expectations Cannot participate in the problem-solving process to address a simple problem using appropriate sources.	0.02 pts
				Total Points: 0.02

Results

The graphics below can be also be accessed through the AAC's Academic Assessment Dashboard which provides real-time data in a dynamic and interactive interface. The raw data collected from the academic assessment is available as a shared file on the AAC's college Teams site.

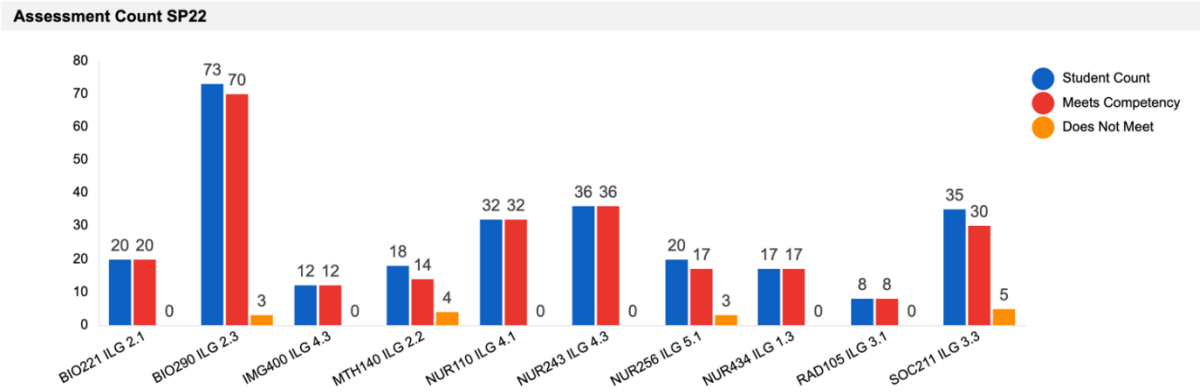
Fall 2021 Academic Assessment Data

In the Fall semester of 2021, a total of 385 students were assessed across 6 different Institutional learning goals (ILGs) in 16 course sections. The percentage of students meeting ILG competency was 93%, when you include those both meeting and those exceeding expectation.



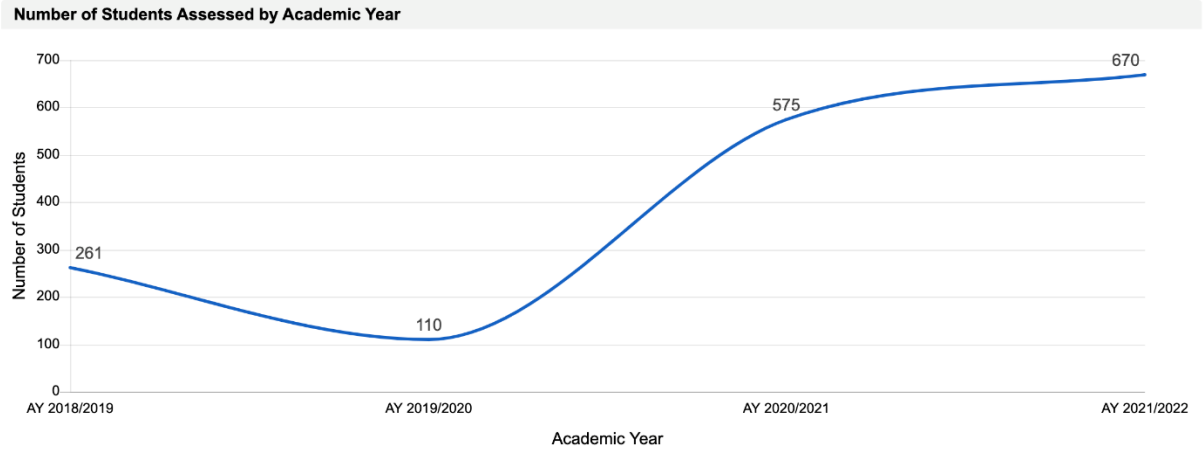
Spring 2022 Academic Assessment Data

In the Spring semester of 2022, a total of 285 students were assessed across 6 different institutional learning goals (ILGs) in 13 course sections. The percentage of students meeting ILG competency was 97%, when you include those both meeting and those exceeding expectation.



Total Number of Students Assessed by Academic Year

A total of 670 students were assessed for ILG competency in the 2021-2022 academic year, which represents an increase of 18% over the 2020-2021 academic year. The AAC attributes the increase in student assessments to an expanded course selection and to increased efficiencies in rubric placement and greater faculty participation due to the deployment of faculty liaisons.



Conclusions

Competency rates were in the high 90% range across all courses and all measured domains, and although no major issues were identified, course instructors will review the data to determine if improvements or enhancements are required in the relevant assignments.

Actions and Initiatives

For the upcoming 2022-2023 academic year, the AAC will be exploring these initiatives:

- Assessment of Mercy values. The AAC will explore ways to assess Mercy values by determining which courses and course activities promote and teach the values. A review to determine how the college's values align with existing ILGs will also be undertaken.

- Filling Assessment Gaps. Upon examining the ILG Assessment Table, the committee recognized gaps in the assessed outcomes and will be discussing a plan to assess all ILGs at all levels across the curriculum, this action should also lead to a greater number of students assessed.

- Excellent Referrals. The AAC will explore the feasibility of a college-wide "Excellence Referral" system where instructors can easily recognize outstanding student work and promote the students' work throughout the college.

- Exploring how ILGs are currently or could be infused throughout the curriculum at all levels as critical components of course objectives and as part of all assignments.

CO-CURRICULAR ASSESSMENT

Introduction

The Co-Curricular Assessment Committee (COAC) was created during the 2020-2021 academic year, and it was created following the College's successful accreditation visit from the Higher Learning Commission (HLC). The 2020-2021 committee members established Bylaws and set the foundation for how the COAC operated. During the 2021-2022 academic year, several members transitioned out of their role which allowed new membership to embark on the journey of further developing the committee. In particular, the College is seeking to enhance programming efforts related to Diversity & Inclusion, build upon the College's core mission and values, and design a Mercy College Experience (MCE) to attract, recruit, and retain more students.
The College is committed to ongoing assessment of student learning with three critical educational outcomes.

1. *The institution has effective processes for assessment of student learning and for achievement of learning goals in academic and co-curricular offerings.*
2. *The institution uses the information gained from assessment to improve student learning.*
3. *The institution's processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty, instructional and other relevant staff members.*

Committee Progress

The COAC bylaws are designed to outline areas of membership, office terms, duties of officers, meetings, and operational procedures. The Bylaws were revisited during the Spring 2022 semester when a new chairperson was identified which led to both a new co-chair and secretary. Minor edits were made during the 2021-2022 academic year to reflect the future relationship between the Toledo campus and the Youngstown location, to discuss which areas of the campus produce co-curricular offerings (for example Title IX and Compliance), and to develop a seventh Institutional Learning Goal (ILG) focusing on the College's reaffirmed commitment to diversity, equity, and inclusion.

Learning Outcomes

During the 202-2021 academic year, the COAC developed six Institutional Learning Goals (ILGs) as the framework for co-curricular assessment, intertwined with the overall Institutional Learning Goals reviewed in the Academic Assessment report. During the 2022-2023 academic year, the COAC will work closely with the Director of Diversity and Inclusion to establish a seventh ILG related to the College's commitment to DEI (Diversity, Equity, & Inclusion) work. Below is the list of the current ILGs, the various levels used in academic assessment, and the addition of the co-curricular learning outcomes.

1. Are committed to **social engagement**, by demonstrating an understanding of servant leadership that improves the community and broader society. To achieve this goal, students will:
    - **CO-CURRICULAR LEARNING OUTCOME (Knowledge/Comprehension): Demonstrate the values, knowledge, and skills to communicate and collaborate for the purpose of positive social change by developing social empathy as students work alongside community partners.**
2. Are committed to **intellectual inquiry**, able to identify, evaluate, and propose solutions to problems in creative ways. To achieve this goal, students will:

    - **CO-CURRICULAR LEARNING OUTCOME (Application/Analysis): Locate, evaluate, collect, and analyze information for use in answering a question, developing an argument, and seeking information to solve problems.**
3. Are **effective communicators**, able to write, speak, and listen as a professional. To achieve this goal, students will:
    - **CO-CURRICULAR LEARNING OUTCOME (Application/Analysis): Demonstrate appropriate communications in various modalities including verbally, non-verbally, and digitally and can adapt their discourse to suit various audiences and contexts.**
4. Are proficient with **ethical reasoning**, using the lens of the Mercy Values as part of one's everyday decision-making process. To achieve this goal, students will:
    - **CO-CURRICULAR LEARNING OUTCOME (Application/Analysis): Apply ethical principles and reasoning skills utilizing critical, creative, and reflective thinking.**
5. Are **professionally competent**, displaying the capacity to successfully join the workforce in one's desired course/program of study upon graduating. To achieve this goal, students will:
    - **CO-CURRICULAR LEARNING OUTCOME ((Knowledge/Comprehension): Demonstrate readiness to enter one's chosen field and exhibit professional standards including clear communication, ethical reasoning, appropriate demeanor, preparedness, reliability, and organizational skills.**
6. Are committed to **lifelong learning**, exhibiting responsibility for the future of one's own educational experience. To achieve this goal, students will:
    - **CO-CURRICULAR LEARNING OUTCOME (Application/Analysis): Demonstrate and apply career readiness by creation, revision, & implementation of career goals and maintenance of professional credentials.**

Department Data Reports

Each committee member served as a liaison for the various co-curricular departments and maintained regular 1:1 meeting to discuss individual assessment plans. Documents and notes were shared, and each liaison provided highlights and updates at the COAC monthly meetings. Some departments were unable to submit an assessment plan for the 2021-2022 academic year due to staffing changes and the impact of the Covid-19 pandemic, but the COAC made tremendous progress overall to include more assessment plans and reports. Each area created goals and has an assessment plan for the 2022-2023 academic year with hopes of enhancing all co-curricular assessment efforts and data collection.

COAC Assessment Annual Reports

Department: Student Life
Individual Completing Form: Marcus Dawson

2021-2022 Executive Summary

The Office of Student Life seeks to offer a wide range of co-curricular activities both in-person and virtually. During the 2022 spring semester, Student Life along with Student Support Services hosted an event titled "Movies for Mental Health" with Art with Impact during the annual Week of Wellness. Art With Impact specializes in using the arts to start meaningful dialogue amongst people of all ages about mental health. The event was hosted virtually on February 16, 2022, with just under 200 faculty, staff, and student participants.

Key Highlights

- Featured campus and community resources
- Highlighted national resources
- Almost 200 virtual participants
- Raised awareness of mental health issues
- This workshop reduced stigmas related to mental health

Data Collection

Qualitative and quantitative data were collected from a post activity survey. The tool was created by Art with Impact in conjunction with the assistant deans of Student Life and Student Success. The survey questions asked students about their awareness of mental health issues, addressed stigmas related to mental illness, awareness of local and national resources, and likelihood to seek support for mental health issues.

Data Analysis

Members of the COAC (Co-Curricular Assessment Committee) analyzed responses from the previously developed scoring rubric to show if students met or did not meet competency in the ILGs (Institutional Learning Goals) being assessed. Monthly meetings were held between a COAC liaison/committee member and the assistant dean or director from each of the 6 co-curricular departments.

During the 2020-2021 academic year, the committee developed rubrics to analyze responses from student surveys following co-curricular activities.

Following the participation in the "Movies for Mental Health" activity, students were presented with the following questions. Responses were scored using the previously developed rubrics.

Rubric #1
"In your opinion, did this workshop increase your awareness of mental health issues?"

Aspect	Competent (72.2%)	Not Competent (27.8%)
M4MH R1	The student agreed or strongly agreed that the workshop increased awareness of mental health issues.	The students were neutral or disagreed that their awareness of mental health issues increased.

Rubric #2
"In your opinion, did this workshop help you confront, and address stigma related to mental illness?"

Aspect	Competent (72.2%)	Not Competent (27.8%)
M4MH R2	The student agreed or strongly agreed that the workshop helped confront and address stigma related to mental health issues.	The student was neutral or disagreed that the workshop did not help confront and address stigma related to mental health.

Rubrics #1 and #2 align best with the College's ILG (Institutional Learning Goal) #2: "the student is committed to intellectual inquiry, able to identify, evaluate, and propose solutions to problems in creative ways."

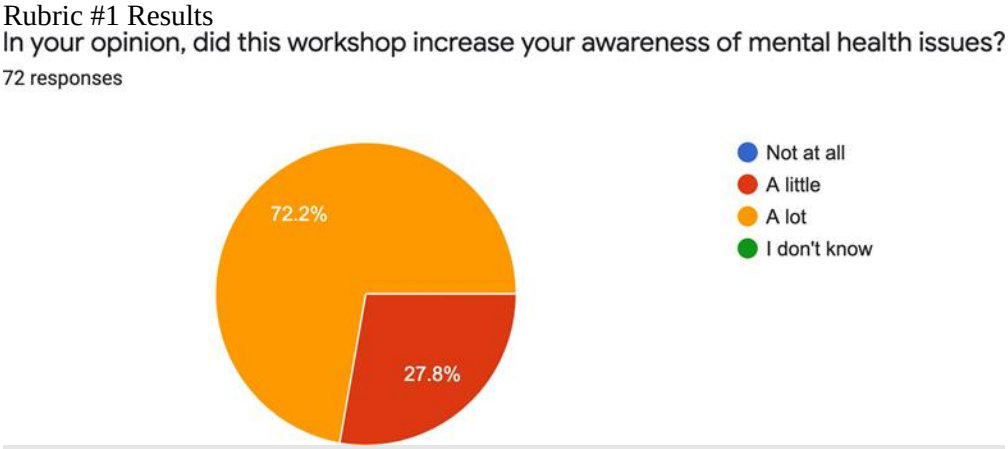
Rubric #3
"After this event, are you more or less likely to seek support for your mental health?"

Aspect	Competent (70%)	Not Competent (30%)
R3	The student agreed or strongly agreed that they are more likely to seek support for mental health.	The student is less likely to seek support for mental health or are already seeking support.

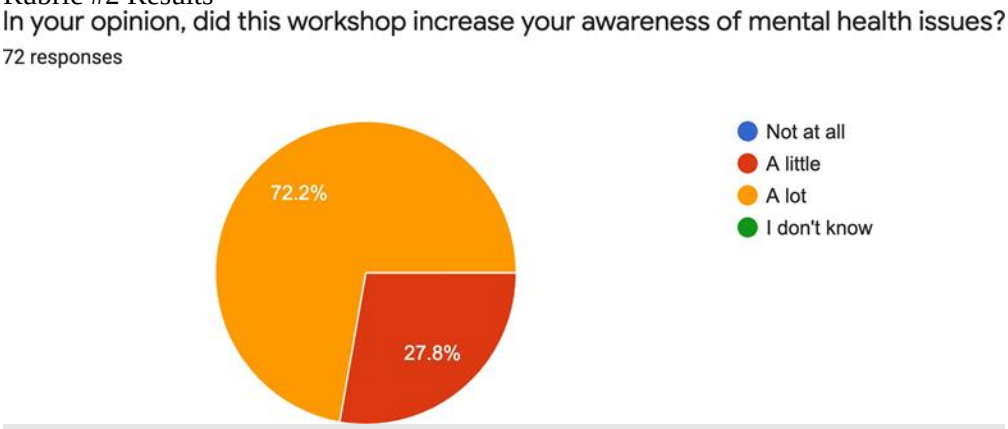
This prompt and rubric align best with the College's ILG #6 "the student is committed to lifelong learning, showing responsibility for the future of one's own educational experience."

Scoring of Survey and Dashboard

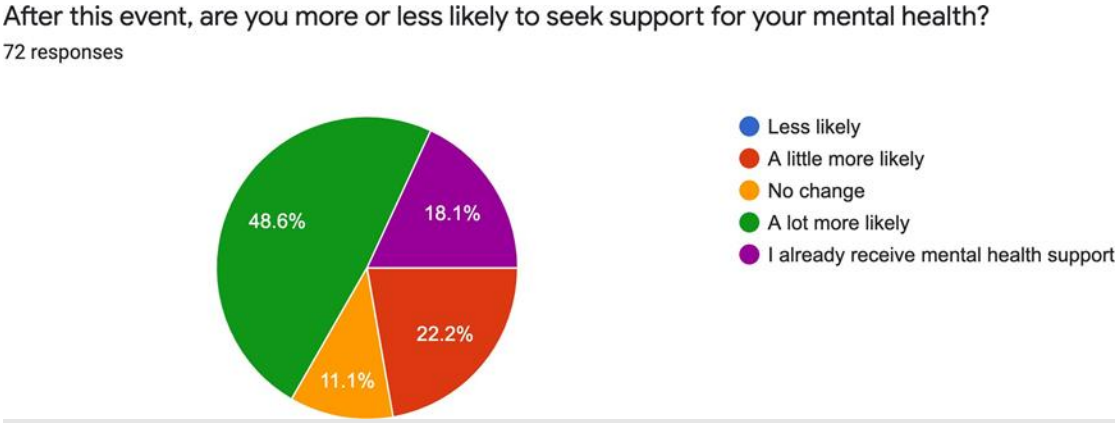
Rubric #1 Results



Rubric #2 Results



Rubric #3 Results



Implications and Conclusions of Activity

The activity indicated that 87% of students who were not already receiving mental health support reported an increase likelihood to reach out for help. The survey indicated that 100% of the students said that the workshop reduced stigma related to mental health and 100% of the students felt that the event created awareness of mental health issues. Based on the results from the activity, the committee will work with the assistant deans to address other ILG's within this or other co-curricular activities.

Conclusions

Students were given the opportunity to provide main takeaways from the activity. Based on the key points, the student affairs assistant deans concluded the event was extremely purposeful, impactful, and valuable.

Main Takeaways from Students

- "A great mental health seminar that helps you feel comfortable in your skin with people that don't judge and just want to support you and ensure that you don't feel alone."
- "It's okay to choose yourself and love yourself enough to learn self-love and seek help to heal."
- "My main takeaway is that mental health is heavily stigmatized, which makes it a lot harder for people to get help. It is important we do check-ins with others close to us, and ourselves. Mental wellness and mental illness can coexist, and both need to be addressed in diverse ways."

- "Everyone has mental health, whether good or bad, and we as humans need to understand this and not judge!"
- "Positive opportunity to (re)acquaint yourself with notion of stigma and the awareness of how important it is to talk about it and help people overcome the stigma to seek treatment."
- "I am not an anxious person but know it's a real thing. While I will never be able to 100% understand anxiety or depression, it is important to me to continuously "check" myself and be aware of those around me. To continue to try to be open and provide safe space for everyone when needed."

Department: Library Services
Individual Completing Form: Rebecca Daniels

Program

The Mercy College of Ohio Library presented library research tools and strategies during the Student Success Center's Journey to Success series. Twenty-four students either attended the training over Zoom or viewed the recording. This took place on October 7, 2021.

Description

The library staff provided tips on finding knowledge-based resources for students' projects. The staff helped orient students to the library page, taught them how to select the best resources for their searches, and how to select the best evidence for their research projects.

Number of attendees/survey participants: 24

Co-curricular Learning Outcome: Intellectual Inquiry

Locate, evaluate, collect, and analyze information for use in answering a question, developing an argument, and seeking information to solve problems.

Measurement

Survey responses were assessed to determine if students have or have not met competency in the applicable ILGs being assessed.

Rubric #1

"Describe three strategies/techniques/tips/take-aways that will help you be successful…"

Aspect	Competent (100%)	Not Competent (0%)
Library presentation: R1	The student lists two or more relevant strategies that will help them be successful in their college career.	The student lists one or no relevant strategies or lists non-relevant strategies that will help them be successful in their college career.

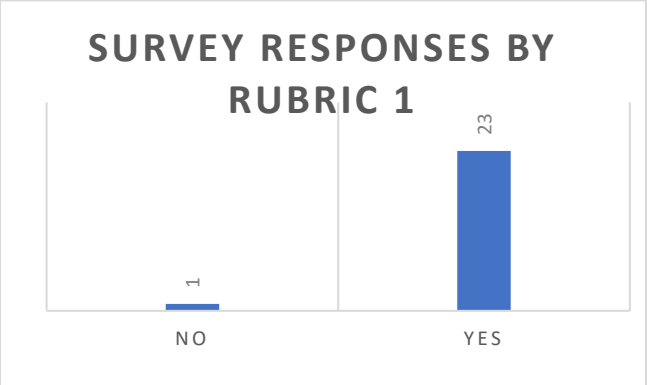
Rubric #2

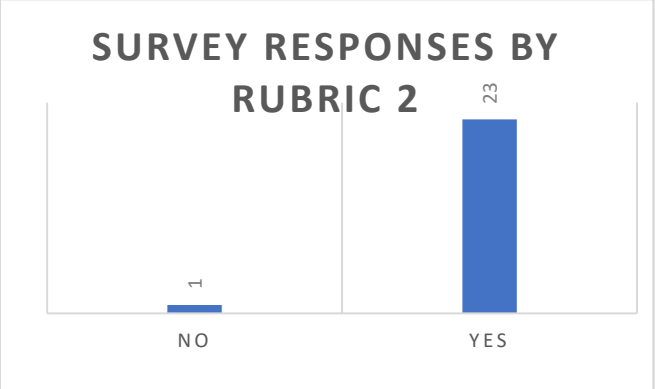
"…explain how you would apply [what you learned] to your education or career."

Aspect	Competent (100%)	Not Competent (0%)
Library Presentation: R2	The student provides a logical explanation of how they would incorporate a relevant learning strategy into their study plan.	The student does not provide a logical explanation of how they would incorporate a relevant learning strategy into their study plan.

Rubric 1
Describe three strategies/techniques/tips/take-aways that will help you be successful in this area.

Rubric 2
Please expand on one of the tips you listed above by explaining how you would apply it to your education or career.





Survey Respondent	**Rubric 1**	**Rubric 2**
223	yes	yes
224	yes	yes
225	yes	yes
226	yes	yes
227	yes	yes
228	yes	yes
229	yes	yes
230	yes	yes
231	yes	yes
232	yes	yes
233	yes	yes
234	yes	yes
235	yes	yes
237	yes	yes
238	yes	yes

241	yes	yes
242	yes	yes
244	yes	yes
245	yes	yes
259	yes	yes
279	yes	yes
306	yes	yes
318	yes	yes
324	no	no

Department: Diversity & Inclusion
Individual Completing Form: Javier Solorzano Parada

Summary of Program Assessed

In the spring semester of 2022, the office of Diversity & Inclusion and Physician Assistant Program staff/faculty worked together to lead a simulation on effective communication. "BARNGA" is a simulation that allows participants to think about normative assumptions and cross-cultural communication. During the simulation, participants in groups engage in a silent card game, each group working with different sets of rules of which participants are not aware.

Program Goals:

1. To learn to communicate effectively across cultural groups.
2. To help review assumptions we may have about group norms and to critically analyze where those norms have come from, determining whether they continue to be useful in new contexts.
3. To understand what happens when we are not utilizing the same "rules" or "norms" as others in the group.

Data Collection

Quantitative and qualitative data were collected upon completing the simulation. Participants took a five question, 5-point Likert scale survey. In addition to the survey, participants were asked to write down a takeaway from the experience.

- Survey Scale & Instructions:
  - 5-point Likert scale (1 = strongly disagree, 2 = moderately disagree, 3 = agree, 4 = moderately agree, 5 = strongly agree) and comment for any item rated less than 3. Mark NA if you did not participate in/utilize the resources queried in the survey item.
  - Please be sure to comment on anything not meeting your expectations at the end of the survey:

Survey Questions

- Q1. The simulation helped me learn and understand how to communicate effectively across diverse cultural groups.
- Q2. The simulation helped me notice assumptions I may have/bring when working with groups/people.
- Q3. The simulation helped me reflect on where my assumed group norms come from and how to determine if appropriate to keep using.
- Q4. The simulation helped me understand what may happen when groups are not all utilizing the same "norms."
- Q5. As a student and future health care professional, I will continue to reflect/learn about the role of normative assumptions and cross-cultural communication in my daily interactions with people/colleagues/patients.

Survey Results

5-point Likert scale (1 = strongly disagree, 2 = moderately disagree, 3 = agree, 4 = moderately agree, 5 = strongly agree) and comment for any item rated less than 3. Mark NA if you did not participate in/utilize the resources queried in the survey item.

- Q1. 4.68 Average
- Q2. 5 Average
- Q3. 4.95 Average
- Q4. 4.95 Average
- Q5. 5 Average

Participant Takeaways:

- Understand that you may not always understand someone else's perspective until you've "walked in their shoes" -- be patient
- Not everyone's "rules" (aka beliefs) are the same as your own, so be open to everyone's different perspectives
- Practice patience… It is okay to slow down to figure out how best to move forward to work with everyone
- Having patience with not only others but myself
- Sometimes you must think creatively when it comes to communication barriers
- To be open that others have diverse ways of thinking
- The reality of how much we rely on our voice to communicate in everyday life; something that I never thought about not physically being able to use until today
- Everyone handles stress in diverse ways
- Be willing to be adaptable!
- I learned the importance of not making assumptions of intent based on feelings from one-on-one or group interactions
- I learned that not everyone communicates the same --> pictures, etc. Words
- Everyone comes from diverse backgrounds of life (just like the different tools on the table). We may not know, or even be able to communicate, what we think or why we think that way, so assuming (even unintentionally) that everyone thinks how you do can be very hurtful
- Perspectives + Assumptions need to be evaluated constantly to better improve interpersonal relationships
- Always stay true to what you know is right
- Taking a few minutes to reflect when frustrated to understand where others are coming from
- I learned the importance of effective communication; that this may look different for everyone, and to be open-minded in hearing the ways that others communicate as well as their thoughts + beliefs that may be vastly different from your own
- Never assume that people "play by the same rules as you" everyone has different lived experiences + upbringings
- When there is a miscommunication and you are feeling overwhelmed, remember you are not the only one feeling annoyed, misunderstood, and confused
- It is important to consider the expectations and backgrounds of others and to identify, respect, and integrate these components into every unique encounter

Data Analysis

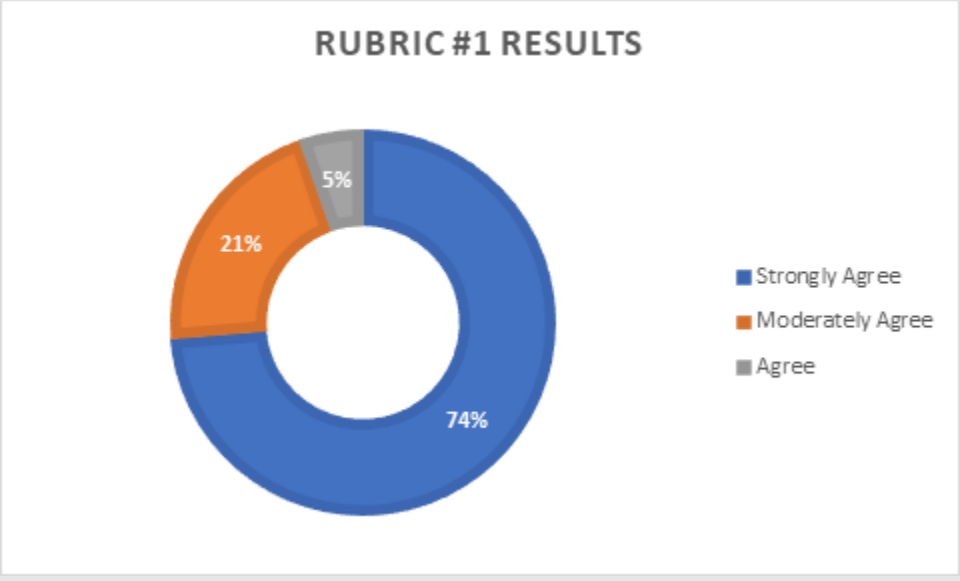
The Committee Liaison and the Director of Diversity and Inclusion reviewed the BARNGA Simulation and identified connections to the Institutional Learning Goals (ILGs). It was determined that ILG #3 effective communicators and ILG #6 lifelong learning aligned best with the BARNGA Simulation. Next, the survey questions were reviewed to identify specific questions designed to capture progress towards ILG #3 and ILG #6. It was determined that Q1 & Q5 of the survey connected best with the two learning goals. The two survey questions supported the development of the scoring rubrics.

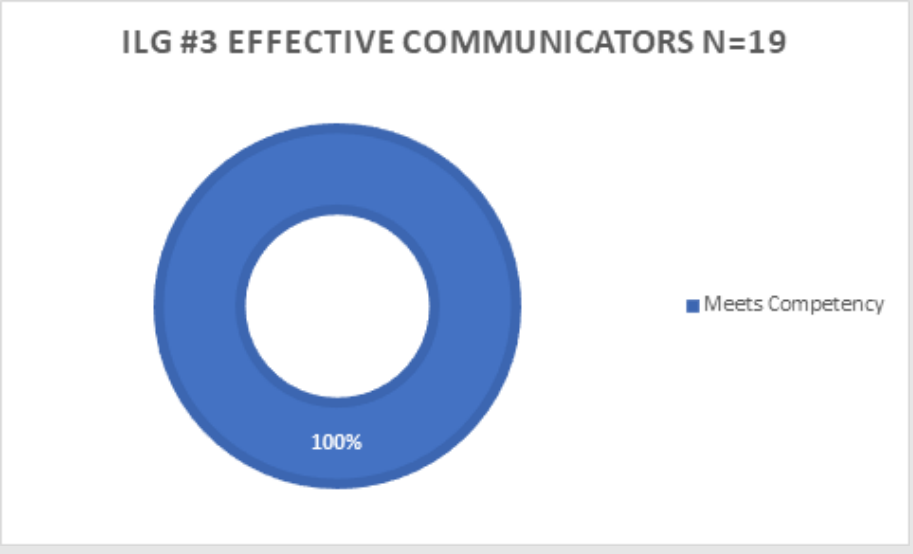
Rubric #1

"The simulation helped me learn and understand how to communicate effectively across diverse cultural groups."

Aspect	Competent (100%)	Not Competent (0%)
BARNGA (n=19) R1	The student agreed, moderately agreed, or strongly agreed that simulation helped them learn and understand how to communicate effectively across different culture groups.	The student moderately disagreed or strongly disagreed that simulation helped them learn and understand how to communicate effectively across different culture groups.

This prompt and rubric align best with the college's ILG (Institutional Learning Goal) #3, "**effective communicators**, students will be able to demonstrate appropriate communications in various modalities including verbally, non-verbally, and digitally and can adapt their discourse to suit various audiences and contexts.

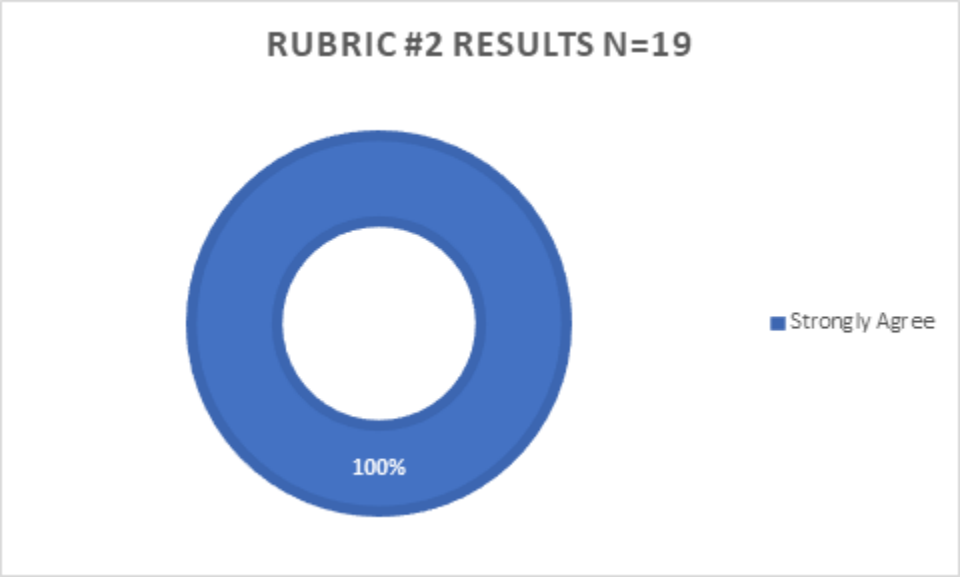


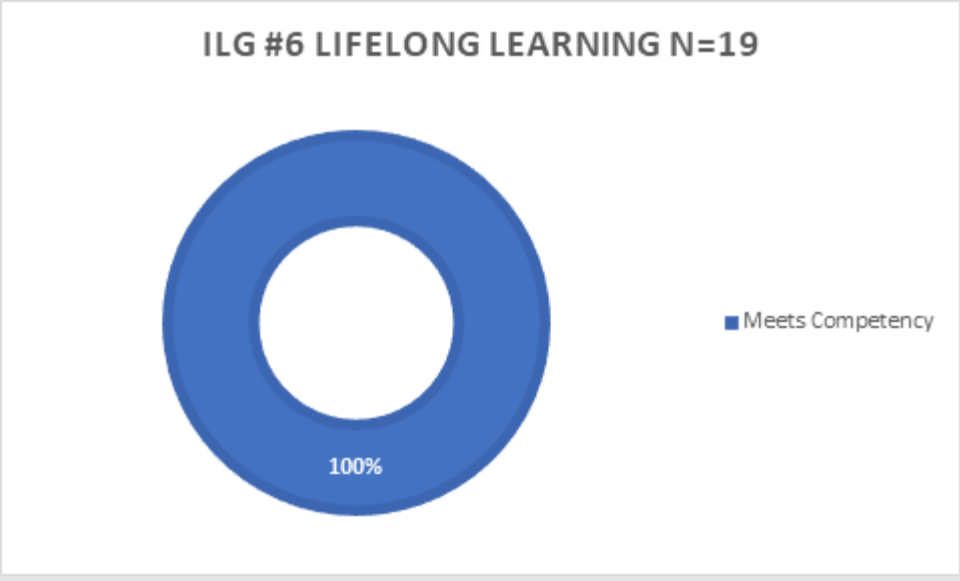


Rubric #2
"As a student and future health care professional, I will continue to reflect/learn about the role of normative assumptions and cross-cultural communication in my daily interactions with people/colleagues/patients."

Aspect	Competent (100%)	Not Competent (0%)
BARNGA (N=19) R2	The student agreed, moderately agreed, or strongly agreed that they will continue to reflect/learn about the role of normative assumptions and cross-cultural communication in their daily interactions with people/colleagues/patients.	The student moderately disagreed or strongly disagreed that they will continue to reflect/learn about the role of normative assumptions and cross-cultural communication in their daily interactions with people/colleagues/patients.

This prompt and rubric align best with the college's ILG #6, "**lifelong learning**, students will be able to locate, evaluate, collect, and analyze information for use in answering a question, developing and argument, and seeking information to solve problems."





Implications and Conclusions of Assessment of BARNGA

The BARNGA simulation results and analysis highlight that the program is supporting the institutional learning goals of effective communicators and lifelong learning. To better highlight results and analysis in the future, the program survey must be revised and moved from opinion-based to short responses. Adjustment to the survey is scheduled to occur next program date, spring semester of 2023.

Department: Department of Student Services
Individual Completing Form: Dr. Lisa Sancrant

Data Collection

The Student Success Center chose to assess the Advising/Tutoring survey to determine if it is an effective tool for accurately measuring student learning outcomes. After each advising or tutoring session, students receive a survey to provide feedback on the session. Administered using Survey Monkey, the survey starts with questions about the experience students had with scheduling and interacting with their advisor or tutor. Each survey asks students to rate their agreement with learning outcomes from their session. Below are the survey questions included in the surveys:

Advising Survey:

1. How did you schedule your advising appointment?
2. Who did you meet with?
3. How did you meet with your advisor?
4. What was the reason for meeting with your advisor?
5. Please indicate your agreement or disagreement with each of the following statements:
    a. My advisor was prepared for my appointment
    b. My advisor seemed genuinely interested in my success
    c. My advisor made me feel comfortable and at ease
    d. My advisor listened carefully
    e. My advisor was knowledgeable of the policies and procedures that related to my situation
    f. My advisor reviewed my current academic status and strategies to assist me with meeting my goals

g. My advisor allowed sufficient time for questions and helped me understand what I needed to do following my appointment

6. Please indicate your agreement or disagreement with each of the following statements:
    a. After meeting with my advisor, I understand the policies and procedures as they relate to my degree program
    b. I feel confident that my advisor will follow up on any unresolved issues
    c. Overall, I am satisfied with my advising experience
7. Please leave any additional feedback regarding your experience with academic advising

Tutoring Survey:

1. How did you schedule your advising appointment?
2. Who did you meet with?
3. How did you meet with your advisor?
4. What was the reason for meeting with your advisor?
5. Please indicate your agreement or disagreement with each of the following statements:
    a. My tutor was prepared for my appointment
    b. My tutor seemed genuinely interested in my success
    c. My tutor made me feel comfortable and at ease
    d. My tutor listened carefully
    e. My tutor was knowledgeable about the subject/material
    f. My tutor's explanation of the subject matter was understandable and clear
6. Please indicate your agreement or disagreement with each of the following statements:
    a. I received the help I needed *from my tutoring session
    b. After meeting with my tutor, I have a better understanding of the subject/material
    c. After meeting with my tutor, I have useful study strategies to help me learn class material effectively
    d. After meeting with my tutor, I feel better prepared to succeed in my courses
    e. Overall, I am satisfied with my tutoring experience
7. Please leave any additional feedback regarding your experience with academic advising

Data Analysis

The committee liaison and the assistant dean of student success reviewed the advising and tutoring services to identify a connection to the ILGs. It was determined that engagement in advising and tutoring services mostly aligns with the ILG Intellectual Inquiry. Next, we reviewed the survey questions to identify if they were designed to capture progress towards intellectual inquiry. While question 6 in both surveys does explore students' progress toward learning outcome for both advising and tutoring, the questions should be revised to accurately capture students' progress towards the co-curricular learning outcome for intellectual inquiry: locate, evaluate, collect, and analyze information for use in answering a question, developing an argument, and seeking information to solve problems.

Rubric #1

"After meeting with my advisor, I understand the policies and procedures as they relate to my degree program"

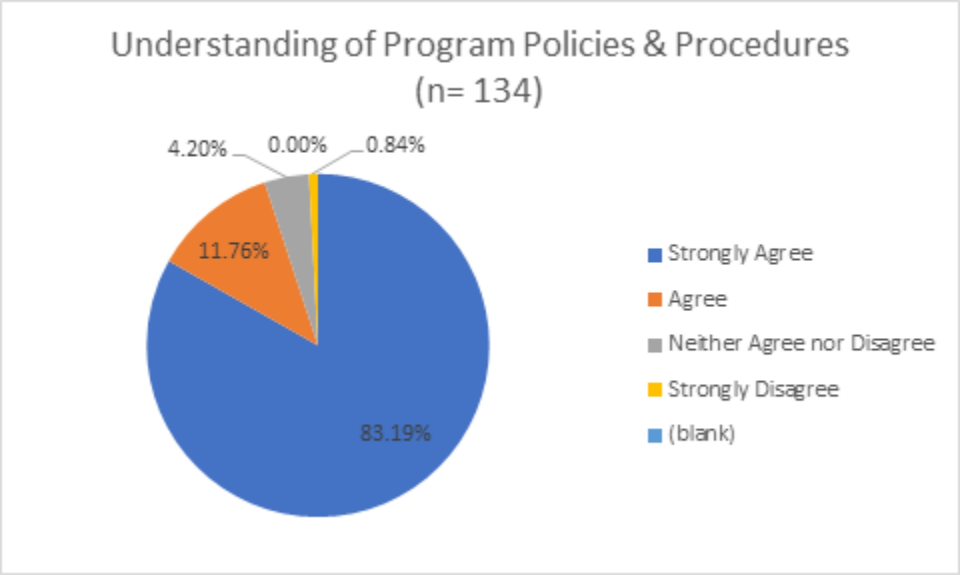
Aspect	Competent (97%)	Not Competent (3%)
Advising Survey R1	The student agreed or strongly agreed that they understand the policies and procedures related to their degree program.	The student was neutral or disagreed that they understood the policies and procedures related to their degree program.

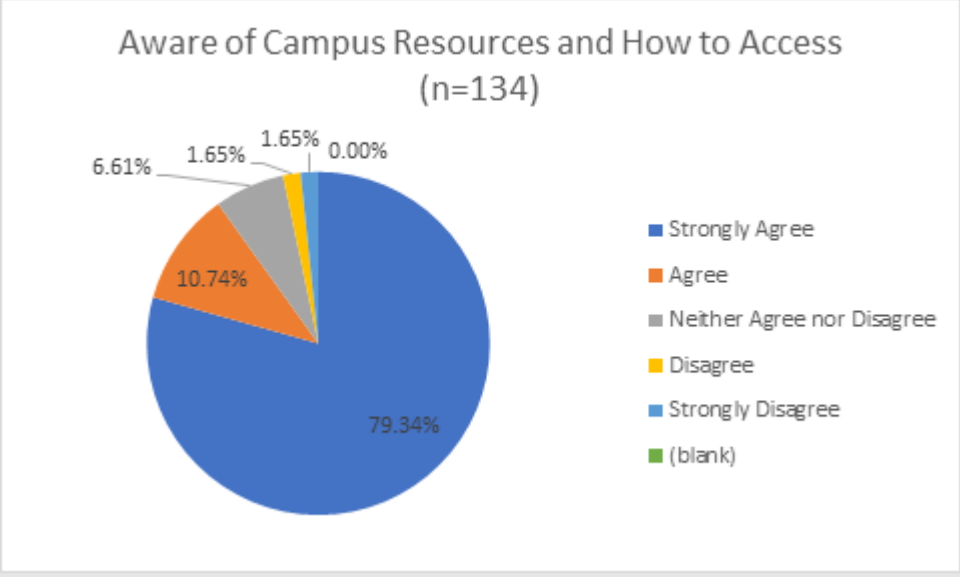
This prompt and rubric align best with the college's ILG #2, "the student is committed to **intellectual inquiry**, able to locate, evaluate, collect, and analyze information for use in answering a question, developing and argument, and seeking information to solve problems."

Rubric #2
"After meeting with my advisor, I am aware of campus resources designed to support academic success and how to access them."

Aspect	Competent (97%)	Not Competent (3%)
Advising Survey (N=135) R2	The student agrees or strongly agrees that they can locate and seek resources when needed.	The student is neutral or disagrees with being aware of how to locate and seek resources when needed.

This prompt and rubric align best with the college's ILG #2, "the student is committed to **intellectual inquiry**, able to locate, evaluate, collect, and analyze information for use in answering a question, developing and argument, and seeking information to solve problems."





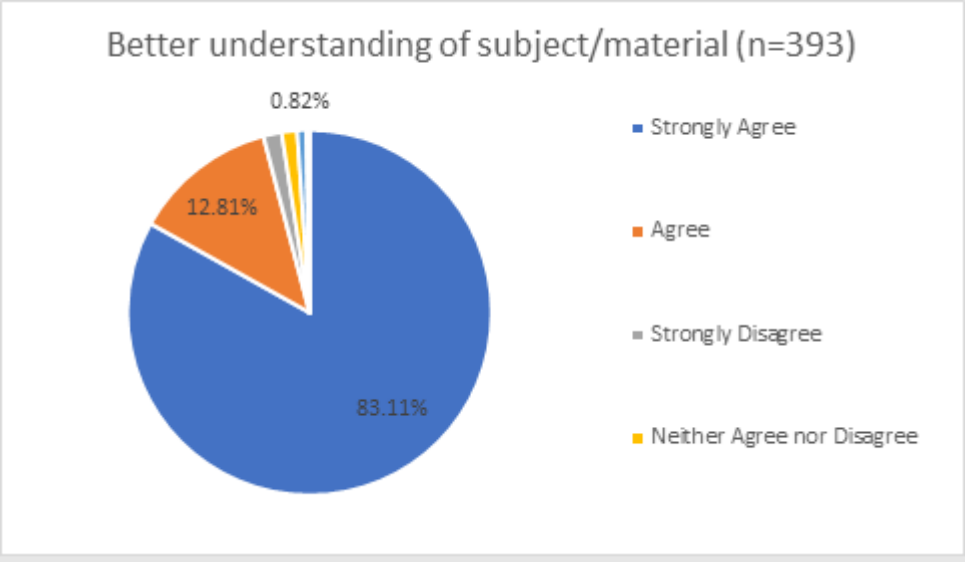
Rubric #3
"After meeting with my tutor, I have a better understanding of the subject/material."

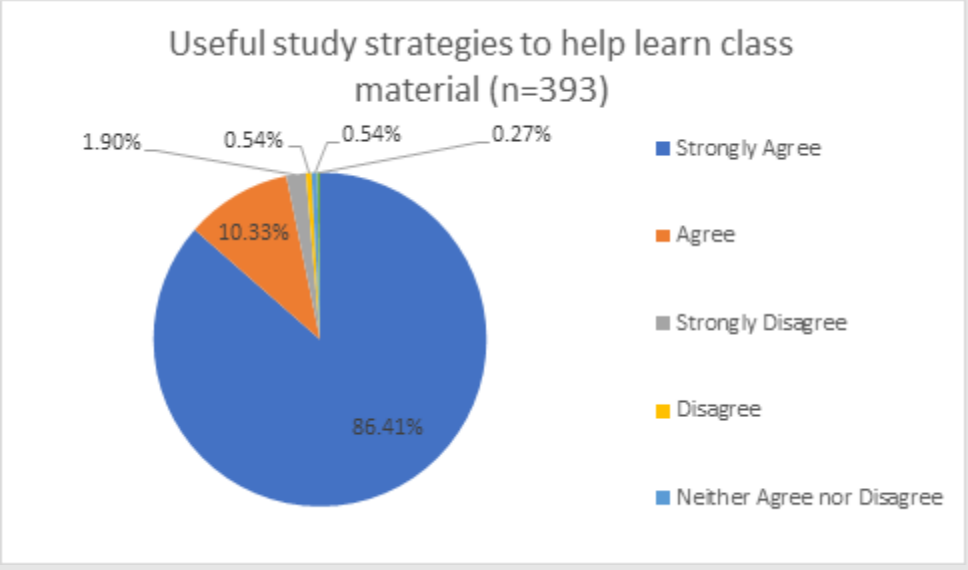
Aspect	Competent (96%)	Not Competent (4%)
Tutoring Survey R1	The student agreed or strongly agreed that they have the information they need to use in answering questions related to the subject material.	The student is neutral or disagrees that they have the information needed to use in answering questions related to the subject material.

This prompt and rubric align best with the college's ILG #2, "the student is committed to **intellectual inquiry**, able to locate, evaluate, collect, and analyze information for use in answering a question, developing and argument, and seeking information to solve problems."

Rubric #4
"After meeting with my tutor, I have useful study strategies to help me learn class material effectively."

Aspect	Competent (96%)	Not Competent (4%)
Tutoring Survey R2	The student agreed or strongly agreed that they left tutoring with strategies to effectively learn course material more effectively	The student was neutral or disagreed that they did not leave tutoring with strategies to help learn course material more effectively.





Implications and Conclusions of Assessment of Advising/Tutoring Survey

Upon review and analysis of the Advising/Tutoring Survey, it is evident that the questions need to be updated to ask specific information to further support that the ILG Intellectual Inquiry is being met during student interactions with advisors and tutors. For example, asking students to identify two or three strategies they learn in tutoring and asking students to identify specific information about college resources or their program of study. These questions will be revised and added to the Advising/Tutoring survey for the Fall 2022 semester.

Department: Student Life and Campus Ministry
Individual Completing Form: Reverend Gerald Cameron
The Offices of Spiritual and Community Engagement and Student Life offer two scholarship programs within the Division of Student Affairs. This assessment explores the experiences of students enrolled in the 2021-2022 cohort year. The survey presented below aimed to capture the service activities students engaged in throughout the academic year, as well as their understanding of Mercy Values and how they intersect with their experiences.

- Students engaged in meaningful community service opportunities throughout the greater Toledo area.
- Students gained a greater understanding of the Mercy Values and how to apply them to their vocation.
- Both scholarship programs received positive feedback from the cohort participants.
- All cohort members expressed positive feedback from their service activity experiences.

Qualitative and quantitative data were collected from a survey distributed towards the end of the spring semester. The tool was created by the Director of Spiritual and Community Engagement in conjunction with the assistant deans in student affairs. The survey questions asked students about their experiences throughout the scholarship program and the integration of the Mercy Values within those experiences.

Survey Questions

1. Please list the name and location of your service site.
2. Share a brief description of your service activity.
3. Which of the following values did you learn during your service activities?
a. Compassion
b. Dignity
c. Excellence
d. Sacredness of Life
e. Service
f. Justice
4. Please review the learning outcomes below and indicate the learning outcome(s) you achieved during your service activity.
5. Please discuss your selection(s).
6. Reflect on what you have learned about yourself during this academic year.

The Committee Liaison and the Director of Spiritual and Community Engagement reviewed the survey data and identified connections to the Institutional Learning Goals (ILGs). It was determined that ILG #1 **social engagement**, ILG #2 **intellectual inquiry**, and ILG #4 **ethical reasoning** aligned best with the HS and LS scholarship programs. Next, the survey questions were reviewed to identify specific questions designed to capture progress towards ILG #1, ILG #2, and ILG #4. It was determined that Q3 & Q4 of the survey connected best with the three learning goals. The three survey questions supported the development of the scoring rubrics.

Rubric #1

"Which of the following values did you learn during your service activities?"

Aspect	Competent (100%)	Not Competent (0%)
HS and LS (n=7) R1	The student was able to connect their service activity with one or more Mercy Values.	The student could not connect their service activity with one or more Mercy Values.

This prompt and rubric align best with the college's ILG #1 **social engagement**, ILG # 2 **intellectual inquiry**, and ILG #4 **ethical reasoning.** Students were able to connect their service experiences to more than one value.

Rubric #1 Results

Mercy College Values

ANSWER CHOICES	RESPONSES	
Compassion	69.23%	9
Dignity	53.85%	7
Excellence	53.85%	7
Sacredness of Life	23.08%	3
Service	69.23%	9
Justice	15.38%	2

Rubric #2

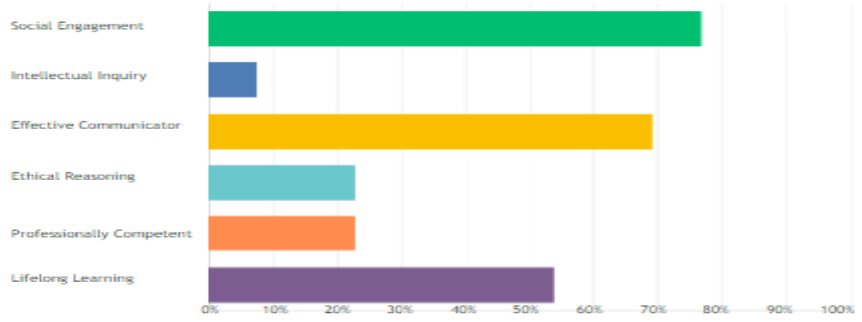
"After reviewing the definitions of each learning outcome listed below, please indicate the learning outcome(s) you achieved during your service activity."

Aspect	Competent (100%)	Not Competent (0%)
HS and LS (n=7) R2	The student was able to identify one or more learning outcomes that they achieved during their service activity	The student was not able to identify any learning outcomes that they achieved during their service activity

This prompt and rubric align best with the college's ILG #1 **social engagement**, ILG # 2 **intellectual inquiry**, and ILG #4 **ethical reasoning.** Students were able to identify one or more learning outcomes during their time in the scholarship program.

Rubric #2

Learning Outcomes



ANSWER CHOICES	RESPONSES	
Social Engagement	76.92%	10
Intellectual Inquiry	7.69%	1
Effective Communicator	69.23%	9
Ethical Reasoning	23.08%	3
Professionally Competent	23.08%	3
Lifelong Learning	53.85%	7

Implications and Conclusions of Assessment of HS and LS Scholarship Programs

The Hoffman Scholars and Leader Scholars scholarship program results and analysis highlight that the opportunities offered support the institutional learning goals of social engagement, intellectual inquiry, and ethical reasoning. To better highlight results and analysis in the future, the program survey must be revised and moved from opinion-based to short responses. Adjustment to the survey is scheduled to occur next program date, spring semester of 2023.

Department: Retention & Success Strategies (part of the Student Success Center)

Individual Completing Form: Melanie Rockhill

The Office of Retention and Success Strategies collaborated with a Co-Curricular Assessment liaison to develop a plan for assessment in the 2022-2023 academic year. Given the timing of the committee's work this office does not have an update for the 2021-2022 year; however, it will be implementing the following in the coming academic year:

- Determine the Co-Curricular Learning Outcome(s) to be met by the programmatic effort: Academic Success Plans.
- Create a survey and correlating rubric for students participating in Academic Success Plans.
- Administer above survey in December 2022 for Fall 2022 participants and May 2023 for Spring 2023 participants.
- Based on Fall 2022 survey responses, make any necessary and documented adjustments to the Spring 2023 survey or rubric tool, as well as programmatic efforts.
- Create a reporting tool for the above results for Co-Curricular Assessment purposes.

Department: Accessibility Services
Individual Completing Form: Christine Miller

The Accessibility Services office is collaborating with a Co-Curricular Assessment liaison as well as the Director for Institutional Effectiveness and Strategic planning to develop and implement an assessment tool in the 2022-2023 academic year. Due to the timing of the report along with significant delays from the COVID pandemic, there is no current update for the year 2021-2022. Accessibility Services will work toward the following goals during the current academic year:

- Collaborate with Institutional Effectiveness in researching past and current surveys related to both offices to determine any improvements/changes based on results/findings.

- Develop a survey for faculty/staff satisfaction of services provided through Accessibility Services and through Testing Services.
- Develop a survey and correlating rubric for students registered with Accessibility Services to measure acquired knowledge of self-advocacy, self-identify in relation to diagnoses/disabilities, and both qualitative and quantitative feedback on services provided regarding accommodations, resources, etc.
- Provide a means of reporting outcomes of these surveys, data collection and further action steps.

Department: Testing Services
Individual Completing Form: Christine Miller

Testing Services Office is collaborating with a Co-Curricular Assessment liaison as well as the Director for Institutional Effectiveness and Strategic Planning to develop and implement an assessment tool in the 2022-2023 academic year. Due to the timing of the report along with significant delays from the COVID pandemic, there is no current update for the year 2021-2022. Testing Services will work toward the following goals during the current academic year:

- Collaborate with Institutional Effectiveness in researching past and current surveys related to both offices to determine any improvements/changes based on results/findings.
- Develop a survey for faculty/staff satisfaction of services provided through Accessibility Services and through Testing Services.
- Review and improve survey questions provided to students that align with goal objectives and learning outcomes.
- Provide a means of reporting outcomes of these surveys, data collection and further action steps.

ACADEMIC PROGRAM REVIEW

In 2021, the Vice President of Academic Affairs posted for a Director of Institutional Effectiveness. This Director was hired halfway through the academic year. Program Directors and Deans had annual program reviews/annual reports put on hold while a new process was being established.

Programs with required annual reports to the state or programmatic accrediting bodies all submitted reports timely.

All academic programs at Mercy College of Ohio undergo a comprehensive review process every five to seven years, depending on programmatic approval timelines. Program reviews ensure the College maintains accreditation and authorization with the Higher Learning Commission, Ohio Department of Higher Education, and programmatic accrediting bodies. These reviews also contribute to internal decision-making through the assessment of strengths and weaknesses and resource prioritization.

All programs submit an Annual Program Dashboard, including key metrics associated with academic programs. Programs with annual reports due to a programmatic accreditor will submit the contents of their annual reports as a PDF along with the Annual Program Dashboard.

Programs with programmatic accreditation complete a mid-point program review halfway through their accreditation cycle. This mid-point review will include updates from the last accreditation site visit and review cycle.

Programs without programmatic accreditation will complete a comprehensive program review every five years. This review includes reviewing program learning outcomes, curriculum mapping, outcomes assessment, and other key indicators.

Included in the Institutional Effectiveness Report for this year, while the process is being reviewed, are the dashboards for each program. The dashboards cover the following information with recommendations to the Dean:

- Enrollment
- Retention
- Persistence
- Financial Efficiency
- Graduation Rates
- Student Success
- Program Assessment Process
- Program Learning Outcomes
- Overall Peer Review

While the dashboards in this report are not meant to be read in their entirety, they are included to see the visual trends in green, yellow, and red.

Biology

APR Dashboard - Mercy College of Ohio

Goal Status - Legend

Green = Met Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Yellow = 5-15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Red = > 15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Performance Metric	Key Performance Indicator(s)	Program Benchmark Target	Program Baseline 17-18	Program Trend 18-19	Program Trend 19-20	Peer Comments, Concerns, Questions, Recommendations
					↗↘→	
Enollment	Program Capacity	48	↘ 43%	↘ 43%	↘40%	Numbers for two previous years were 43% below benchmark (13 students). 12 students enrolled in 2019-
Retention	Continuing Student %	75%	100%	88%	85%	Retention was lower because students are accepted into the major with reduced GPA from original entrance
Efficiency (Financial)	Revenue/Expenses	1	↘0.52	↘0.8 -3.	↘0.8 -3.0	Please note - 2017-2018 Revenue was calculated over expenses. IN 2018-2019, 2019-2020 Expenses are calculated
Graduation Rates	Program Completion %			80%		80% was from 2015-2016 cohort. Cohort data since then has not been calculated. Preliminary "19-20" graduation rates would not be available for Biology until the mid 2023. The 150% rate would not be available until mid 2025.
Student Success	Standardized Exams/Placement		N/A	N/A	N/A	
Program Assessment Process	Professional Standards					
Program Learning Outcomes						
Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency		→	→	→	

Recommendations" Develop specific marketing and recrutiing plan with proactive inititatives, goals predictive of enrollment indicators and accountability Opportunities to increase enrollment for the major include enhancing search engine optimization; marketing for pre-PA, pre-Med students, pre-chiropractic and pre-pharmcy students.
Note efficiency was calculated using diffeernt methods (refer to report), giving a range of 0.8 -3.0. Depending on method it is relatively acceptable to highly unacceptable.

HCA

APR Dashboard - Mercy College of Ohio

Goal Status - Legend

Green = Met Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Yellow = 5-15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Red = > 15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Degree Program	Performance Metric	Key Performance Indicator(s)	Program Benchmark Target	Program Baseline 16-17	Program Trend 17-18	Program Trend 18-19	Program Trend 19-20	Program Trend 20-21	Peer Comments, Concerns, Questions, Recommendations
HCA									
	Enollment	Program Capacity	150	66	68 →	45↘	40↘	52↗	Program is not at optimal capacity.
	Retention (FA to FA)	Continuing Student %	65%	90%	80% ↘	72%↘	78↗	85%	Retention should be evaluated.
	Persistence	Continuing Student %(FA to SP)						93%	
	Persistence	Continuing Student % (SP to FA)						83%	
	Efficiency (Financial)	Revenue/Expenses	0.5	0.22	.18 ↗	.18→	0.21→	.19→	Program is efficient. Net Income $682k 2021.
	Graduation Rates	Program Completion %	75%	65%					completion.
	Student Success	Standardized Exams/Placement	n/a	n/a					
	Program Assessment Process	Professional Standards		Met	→	→	→	→	No concerns.
	Program Learning Outcomes			Neutral	→	→	→	→	No concerns.
	Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency				↘	→	→	• Director of Retention implement a program retention and persistence action plan. • Admissions develop an annual program recruiting plan. • Overall: Program doing well but with opportunities noted above.

MHA

APR Dashboard - Mercy College of Ohio

Goal Status - Legend

Green = Met Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Yellow = 5-15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Red = > 15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Degree Program	Performance Metric	Key Performance Indicator(s)	Program Benchmark Target	Program 17-18	Program 18-19	Program 19-20	Program 20-21	Peer Comments, Concerns, Questions, Recommendations
MHA								
	Enrollment	Program Capacity	80	28	45 ↗	46 ↘	41 ↘	Semester to semester enrollment erosion will lead to reduced program numbers.
	Retention	Continuing Student %(FA to FA)	65%		86%	84% →	88% →	
	Persistence	Continuing Student %(FA to SP)	65%		86%	98% →	94% →	
	Persistence	Continuing Student % (SP to FA)	65%		94%	89% →	95% →	
	Efficiency (Financial)	Revenue/Expenses	81.60%		0.66	.55 ↗	0.42↗	Accounting concern for the salaries of Dean and Adm. Specialist over expensed to MHA cost center. Net income $330k in 2021.
	Graduation Rates	Program Completion %	N/A		N/A	N/A	N/A	
	Student Success	Standardized Exams/Placement	N/A		N/A	N/A	N/A	
	Program Assessment Process	Aligned/Monitored/Focused Improvements	N/A		Met	Met	Met	
	Program Learning Outcomes	Benchmarks Met/Total Benchmarks	N/A		Met	Met	12/13	Of the 13 benchmark measurements for the 6 PLOs, one measurement was not met (#6 Leadership). Will continue to monitor for trends.
	Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency			→	→	→	Unrealized enrollment potential is a growing concern.

MCC and HIT

APR Dashboard - Mercy College of Ohio

Goal Status - Legend

Green = Met Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Yellow = 5-15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Red = > 15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↗)

AAS HIT	Performance Metric	Key Performance Indicator(s)	Program Benchmark Target	Program 16-17	Program 17-18	Program 18-19	Program 19-20	Program 20-21	Peer Comments, Concerns, Questions, Recommendations
	Enrollment	Program Capacity	30	22	28↗	28→	23↘	14↘	Program is not at optimal capacity. Significant decrease in enrollment.
	Retention	Continuing Student % (FA to FA)	65%	69%	80↗	71%↘	83%↗	47%↘	Significant decrease in retention. COVID-19 had significant impact.
	Persistence	Continuing Student % (FA to SP)	65%	82%	69%↘	79%↗	92%↗	70%↘	Decrease likely due to COVID-19.
	Persistence	Continuing Student % (SP to FA)	65%	86%	74%↘	68%↘	87%↗	70%↘	
	Efficiency (Financial)	Expenses/Revenue	< 1.0	0.8	.64↗	0.65→	0.64→	0.50↗	The Health Information Technology and Medical Coding Certificate programs share one budget. The programs were profitable at $195,083.
	Graduation Rates	Program Completion %	50%	40%	36%↘	43%↗	54%↗	22%↘	Percent completion within 150% (3 years or less). Majority of the students are part time and therefore five year completion is a better measure.
	Graduate Placement	Employed/Continuing Education	NA	100%	100%→	86%↘	100%↗	100%→	For the 2021 graduates who responded. Eight total graduates. Four of the 2021 graduates are employed in healthcare. Two graduates are continuing their education. The status of the other two graduates is unknown (did not respond).
	Student Success	Standardized Exams	*	100%	50% Only 2 First-time Test Takers	100%	100%	60%	Graduates of the program are eligible to sit for the Registered Health Information Technology (RHIT) exam. However, it is not a graduation or employment requirement. Validity of results is unknown due to new AHIMA reporting format.
	Program Assessment Process	Aligned/Monitored/Focused Improvements	NA	Yes	Yes	Yes	Yes	Yes	Program aligned with AHIMA's Domains, subdomains, and competencies. Program aligned with CAHIIM Standards. Annual Program Assessment Report (APAR) submitted to CAHIIM. The 2019-2020 Report was accepted as submitted and the program remains in good standing. The 2020-2021 Report was submitted in April 2022.
	Program Learning Outcomes	Benchmark Met/Total Benchmarks	75%	81%	84%↗	67%↘	90%↗	84%↘	The Program Learning Outcomes (PLOs) were revised to align with the American Health Information Management Association's updated domains and competencies. The Assessment plan was updated to reflect the changes.
	Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency		→	→	→	→	↘	

BSMI

APR Dashboard - Mercy College of Ohio

Goal Status - Legend

Green = Met Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Yellow = 5-15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Red = > 15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Performance Metric	Key Performance Indicator(s)	Program Benchmark Target	Program 16-17	Program 17-18	Program 18-19	Program 19-20	Program 20-21	Peer Comments, Concerns, Questions, Recommendations
Enrollment	Program Capacity	100	102	118↗	99↘	95↘	106↗	Data reported for the Fall following these periods to reflect recruiting impact over the AY (i.e. 20/21 = Fall 2021 numbers). The program can expand its total capacity beyond 100 as needed.
Retention	Continuing Student % (FA to FA)	65%	79%	80%→	77%↘	78%→	89%↗	
Persistence	Continuing Student % (FA to SP)	65%	85%	91%↗	88%↘	92%↗	95%↗	
Financial Efficiency	Total Expenses/Total Revenue	1.00	0.29	0.27→	0.25→	0.26→	0.25→	Current value for calendar year 2020.
Graduation Rates	Program Completion %	50%	59%	45%↘	75%↗	62%↘	NR	
Student Success	Standardized Exams/Placement	N/A	N/A	N/A	N/A	N/A	N/A	
Program Learning Outcomes	Benchmarks Met/Total Benchmarks	75%	100%	75%↘	57%↘	70%↗	95%↗	
Program Assessment	Aligned/Monitored/Focused Improvements	N/A	Yes	Yes	Yes	Yes	Yes	New plan implemented in AY20/21 to align with approved changes in PLOs
Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency	↗↘→		↗	→	→	↗	

PSG

APR Dashboard - Mercy College of Ohio

Goal Status - Legend

Green = Met Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Yellow = 5-15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Red = > 15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Performance Metric	Key Performance Indicator(s)	Program Benchmark Target	Program Baseline 17-18	Program Baseline 18-19	Program Trend 19-20	Program Trend 20-21	Peer Comments, Concerns, Questions, Recommendations
			2017 Cohort	2018 Cohort	2019 Cohort	2020 Cohort	
Enrollment	Program Capacity	20	21	20	9	12	Slight uptick in enrollment
Retention	Continuing Student %	80%	44%	67%	64%	67%	
Efficiency (Financial)	Revenue/Expenses	0.5	0.3	0.3	0.4	0.48	Operating earnings 20-21 = $46,197
Graduation Rates	Program Completion %	80%	76%	75.0%	80%	67%	1 student dropped before semester started
Student Success	Standardized Exams/Placement	65%	57	100%	100%	28%↘	Normally, students are passing the BRPT exam.
Program Assessment Process	Professional Standards					→	
Program Learning Outcomes						→	
Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency					→	• Program operating well, but needs improvement in enrollment. Hoping to bounce back from poor BRPT pass rate. Choose Ohio First grant.

EYE

			17-18	18-19	19-20	20-21	
Enrollment	Program Capacity	24	8	9	4	4	Enrollment continues to decline.
Retention	Continuing Student %	80%	88%	75%	100%	50%↘	
Efficiency (Financial)	Revenue/Expenses	0.5	0.73	0.6	0.7	0.68	Operating earnings 20-21 = $8,972
Graduation Rates	Program Completion %	80%	75%	78%	100%	50%↘	Two students didn't complete CastleBranch
Student Success	Standardized Exams/Placement	65%	50%	50%	57%	75%	Change in COA exam in 2017. Trying to incorporate new material.
Program Assessment Process	Professional Standards					→	
Program Learning Outcomes						→	
Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency					↘	Program closure August 2022

CHW

			17-18	18-19	19-20	20-21	
Enrollment	Program Capacity	20	6	6	3	5	Low enrollment.
Retention	Continuing Student %	80%	100%	50%	100%	80%	1 student dropped due to not completing CastleBranch
Efficiency (Financial)	Revenue/Expenses	0.5	0.4	0.2	1	1.2↘	Operating earnings 20-21 = over $4000 more expenses
Graduation Rates	Program Completion %	80%	83%	50%	33%	80%↗	1 dropped due to not completing CastleBranch
Student Success	Standardized Exams/Placement	n/a		n/a	n/a	n/a	No standardized exam for CHW
Program Assessment Process	Professional Standards					→	
Program Learning Outcomes						→	
Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency					↘	•**Enrollment Emergency:** Marketing/Communications and Admissions develop a program specific marketing/recruiting plan with proactive initiatives, goals, predictive enrollment indicators, and accountability. •Program now has two grants, HRSA and COF

Paramedic

			2017 Cohort	2018 Cohort	2019 Cohort	2020 Cohort	
Enrollment	Program Capacity	16	9	3	6	4	Program Underenrolled.
Retention	Continuing Student %	80%	67%	83%	75%	75%	1 student dropped due to COVID
Efficiency (Financial)	Revenue/Expenses	0.5	0.54	0.88	0.9	0.96	Operating Earnings 20-21 = $3,192 (EMT/Paramedic Cost Center)
Graduation Rates	Program Completion %	80%	86%	67%	83%	75%	1 student dropped due to COVID
Student Success	Standardized Exams/Placement	65%	63%	100%	80%	100%	3 out of 3 passed
Program Assessment Process	Professional Standards					→	
Program Learning Outcomes						→	
Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency					→	• **Enrollment Emergency:** Marketing/Communications and Admissions develop a program specific marketing/recruiting plan with proactive initiatives, goals, predictive enrollment indicators, and accountability. COF Grant

Rad Tech

APR Dashboard - Mercy College of Ohio

Goal Status - Legend

Green = Met Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Yellow = 5-15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Red = > 15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Performance Metric	Key Performance Indicator(s)	Program Benchmark Target	Program 16-17	Program 17-18	Program 18-19	Program 19-20	Program 20-21	Peer Comments, Concerns, Questions, Recommendations
Enrollment	Program Capacity	58	58	57→	52↘	57↗	58↗	30 students is max capacity for clinical seats. Fall 2020 the program accepted 28.
Retention	Continuing Student % (FA to FA)	80%	93%	90%→	83%↘	94%↗	81%↘	
Persistence	Continuing Student % (FA to SP)	80%	98%	97%↗	91%↘	98%↗	93%↘	
Financial Efficiency	Revenue/Expenses	1.00	0.49	0.62↘	.51↗	0.68↘	55%↗	The program remains stable.
Graduation Rates	Program Completion %	75%	79%	93%↗	91%↘	90%→	100%→	According to JRCERT, any student dropping for non-academic reason, are not counted.
Student Success	Standardized Exams	75%	89%	78%↘	88%↗	93%↗	70%↘	ARRT Registry Pass Rates. 70% is for 2020 graduates. JRCERT benchmark 5-Year rolling average for the class of 2020 was 84.3%
Student Success	Job Placement	75%	100%	93%↘	100%↗	100%→	100%→	
Program Learning Outcomes	Benchmark Met/Total Benchmarks	75%	92%	77%↘	81%↗	88%↗	69%↘	Many benchmarks were not met because of the wording of the benchmark. If the benchmard stated "all students will...", if a student was unable to complete the assignment due to COVID, then the benchmark was not met.
Program Assessment	Aligned/Monitored/Focused Improvements	N/A	Yes	Yes	Yes	Yes	Yes	PLO' s and program goals continue to be monitored annually through our JRCERT assessment plan.
Overall Peer Rating	Growth/Sustainability/Potential/Needs/Efficiency	↗↘→		→	→	→	→	

MSN

APR Dashboard - Mercy College of Ohio

Goal Status - Legend

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Red = > 15% Below Benchmark Stable (→), Trending Positive (↗), Trending Down (↘)

Performance Metric	Key Performance Indicator(s)	Program Benchmark Target	Program 17-18	Program 18-19	Program 19-20	Program 20-21	Peer Comments, Concerns, Questions, Recommendations
Enrollment	Program Capacity	40	20↗	15↘	13↘	17↗	4 (FA 19 continuing students) + 8 (FA 20 new students) + 1 (FA 20 new student started 7wk2) + 4 (SP 21 new students), but still below projected enrollment goal. FA 21-22 17 new students, 8 continuing
Retention	Continuing Student % (FA to FA)	65%	83%↗	90%↗	50%↘	80%↗	FA 21-22 77%
Persistence	Continuing Student % (FA to SP)	65%	92%↗	95%↗	85%↘	85%→	FA 21-22 91%
Financial Efficiency	Total Expenses/Total Revenue	1.00	.491↗	0.422↗	0.324↗	0.153↗	A benchmark range (such as 0.4-0.75) should be used to indicate financial health. Total Contribution: $146,258
Graduation Rates	Program Completion %	CCNE 70% Mercy 75%	NA	83.3%↗	85.7%↗	80%↘	FA 21-22 69% projected to complete. 4 students withdrew d/t financial, personal or transfer to another program.
Student Success	Standardized Exams/Placement	NA	NA	NA	100%	NA	0 students took certification exam, not required.
Program Learning Outcomes	Benchmarks Met/Total Benchmarks	75%	Met	Met	Met	Met	
Program Assessment	Aligned/Monitored/Focused Improvements	NA	Yes	Yes	Yes	Yes	Systematic Plan of Evaluation is in place and being assessed.
Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency	↗↘→	↗	→	→	→	The program needs an aggessive marketing and recruitment plan. Guild providing better financial support to students to encourage educational

RN to BSN

APR Dashboard - Mercy College of Ohio

Goal Status - Legend

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Performance Metric	Key Performance Indicator(s)	Program Benchmark Target	Program 18-19	Program 19-20	Program 20-21	Peer Comments, Concerns, Questions, Recommendations
Enrollment	Program Capacity	120	121→	115→	104↘	
Retention	Continuing Student %(FA to FA)	65%	79%↗	75%→	74%→	
Persistence	Continuing Student %(FA to SP)	65%	91%↗	84%↘	86%→	
Persistence	Continuing Student % (SP to FA)	65%	79%↗	83%→	82%→	
Efficiency (Financial)	Revenue/Expenses	1	0.59→	0.69→	0.682→	A benchmark range (such as 0.4-0.75) should be used to indicate financial health. All undergraduate nursing programs together.
Graduation Rates	Program Completion %	Mercy 75%	84.5%↗	73%→	*	* still within 150% of program length
Student Success	Standardized Exams/Placement	NA	NA	NA	NA	
Program Assessment Process	Aligned/Monitored/Focused Improvements		Met	Met	Met	
Program Learning Outcomes	Benchmarks Met/Total Benchmarks		Yes	Yes	Yes	
Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency		→	→	→	

AASN

APR Dashboard - Mercy College of Ohio

Goal Status - Legend
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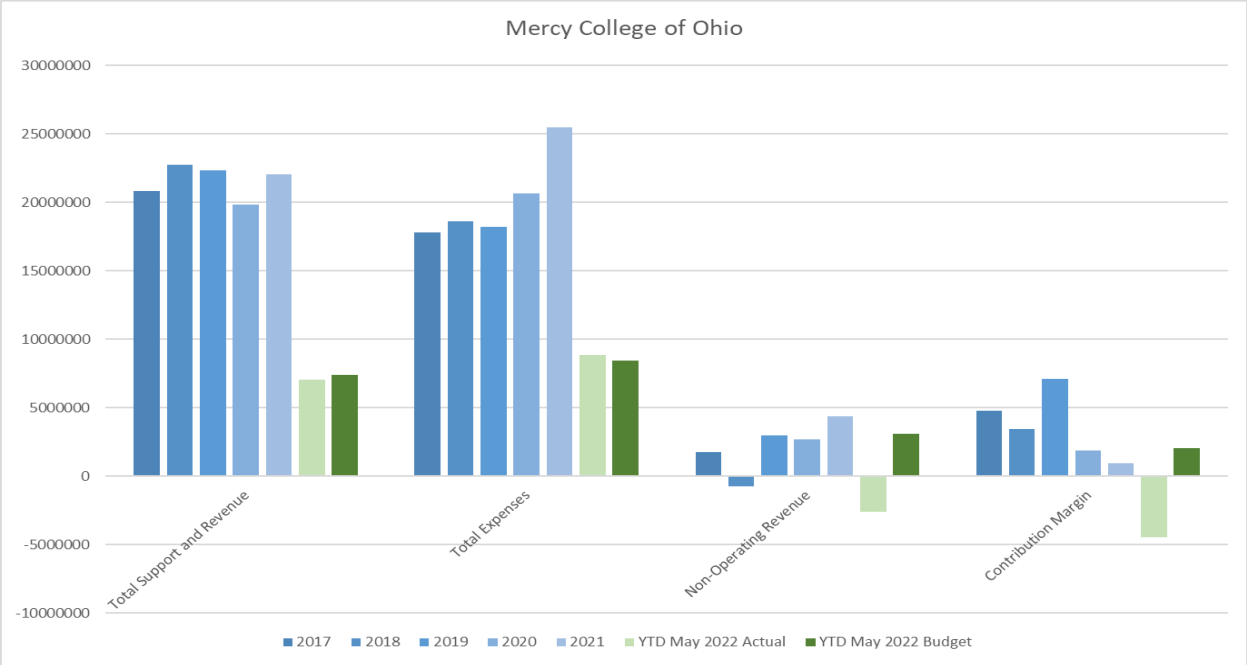
Performance Metric	Key Performance Indicator(s)	Program Benchmark Target	Program Baseline 18-19	Program Trend 19-20	Program Trend 20-21	Peer Comments, Concerns, Questions, Recommendations
			↗↘→			
Enollment	Program Capacity	100 Days; 60 W/E	↗	→	↘	Enrollment goal for Spring 2021 was 16 - met; Spring 2022 -- 24 down by 2 at 22; 67 (days); Fall 2021 Toledo 67 days 40 W/E; Youngstown was 71 days and 32 W/E - last admission for Youngstown
Retention	Continuing Student %	75%	→	↗	→	Fall 20-21: Toledo 74% days, 77% W/E; Youngstown days 66%, W/E 61%
Efficiency (Financial)	Revenue/Expenses	1	↗	→	→	Refer to Annual Report Narrative
Graduation Rates	Program Completion %	0.75	→	→	→	2017-2018 - 47% Days, W/E - 41%; Youngstown Days 56% , W/E - 57%; Overall = 50% (latest results available)
Student Success	Standardized Exams/Placement	95% National	↗	→	→	**NCLEX:** 84.85% met 95% of National Average (82.48%)
Program Assessment Process	Professional Standards	Ongoing	→	→	→	SPE for OBN and ACEN - continous plan of evaluation
Program Learning Outcomes	Benchmarks Met	Met	↗	→	→	2020-2021 EPSLO's Met 100%
Overall Peer Rating	Growth/Sustainability/Potential /Needs/Efficiency		↗	→	→	Tracking retention and NCLEX results

BUDGET REVIEW

The following is a summary of the report to the Board of Trustees with financial information up through May 2022.



	2017	2018	2019	2020	2021	YTD May 2022 Actual	YTD May 2022 Budget
Support and Revenue							
Tuition and Fee Revenue	$14,897,196	$15,767,680	$ 15,341,972	$ 15,395,052	$ 16,911,034	$ 6,395,172	$ 7,178,907
Medicare Reimbursememn	$ 5,891,394	$ 6,757,944	$ 6,577,346	$ 3,383,032			
Other Operating Revenue						$ 87,911	$ 45,783
Grants, Gifts and Bequest	$ 55,000	$ 239,775	$ 395,040	$ 465,695	$ 928,806	$ 547,878	$ 172,741
Grant-Student HEERF	$ -	$ -	$ -	$ 569,400	$ 4,206,375		
Total Support and Revenue	$20,843,590	$22,765,399	$ 22,314,358	$ 19,813,179	$ 22,046,215	$ 7,030,961	$ 7,397,431
Expenses							
Salary Expense	$10,220,255	$10,614,096	$ 10,976,447	$ 11,070,450	$ 12,220,700	$ 5,072,701	$ 4,864,054
Benefit Expense	$ 2,721,677	$ 3,061,065	$ 2,267,485	$ 2,476,147	$ 2,947,129	$ 1,319,509	$ 1,401,221
Lease Agreement	$ 1,642,824	$ 1,683,895	$ 1,683,695	$ 2,723,544	$ 2,723,544	$ 1,138,661	$ 1,134,821
Grant Expense-Student HEE	$ -	$ -	$ -	$ 569,400	$ 4,206,375		
Other Expenses	$ 3,205,691	$ 3,245,083	$ 3,276,570	$ 3,795,188	$ 3,405,013	$ 1,350,902	1,044,037.00
Total Expenses	$17,790,447	$18,604,139	$ 18,204,197	$ 20,634,729	$ 25,502,761	$ 8,881,773	$ 8,444,133
Non-Operating Revenue	$ 1,760,006	$ (718,895)	$ 2,972,490	$ 2,701,157	$ 4,402,490	$ (2,613,761)	$ 3,114,414
Contribution Margin	$ 4,813,149	$ 3,442,365	$ 7,082,651	$ 1,879,607	$ 945,944	$ (4,464,573)	$ 2,067,712