



Office of Institutional
Effectiveness and Research (IER)
Texas A&M University-Texarkana

STRATEGIC PLAN

2022-2027



OFFICE OF

Institutional
Effectiveness
and Research
(IER)

THE OFFICE OF INSTITUTIONAL EFFECTIVENESS AND RESEARCH (IER)

The Office of Institutional Effectiveness and Research oversees university-wide accreditations, assessment, institutional research and provides support institutional decision making for the strategic planning process. Our staff have expertise in a variety of areas and are available as a resource to the university community. The Office of Institutional Effectiveness and Research is committed to the effective evaluation of its educational programs, academic and administrative support services, and the use of assessment results for data-informed decision making, strategic planning and reinforce institutional quality and continuous improvement.

PURPOSE OF THIS PLAN

The purpose of an Institutional Effectiveness and Research Plan is to articulate a systemized process to outline actions and tasks for the strategic direction, goals, objectives, activities, and functions of the Office of Institutional Effectiveness and Research. Institutional Effectiveness is a continuous cycle for planning, assessing, analyzing, and improving processes, programs, and services that support the University's mission and vision. This document articulates our commitment to support faculty, staff, and students for research, grants, and sponsored projects. The document is a living document and will be revised from time to time.

VISION

The vision of Institutional Effectiveness and Research is to be known as a model of excellence and a trusted source for research and effectiveness for policy formulation, governance, and continuous institutional improvement.

MISSION

The mission of the Office of Institutional Effectiveness and Research is to provide accurate, consistent, and timely institutional data, analysis, and reports to internal (University community) as well as external (state, federal, accreditation organizations, and other public/private reporting agencies) stakeholders leading to improved institutional planning, policy formulation, and decision-making that enhances institutional performance and effectiveness. The office actively engages in analysis, survey research, program assessment, accreditation, reporting, and compliance to aid in data-informed decision making, strategic planning and reinforce institutional quality and continuous improvement.

CORE VALUES

Excellence

A commitment to continuous excellence, quality improvement, through creativity, and innovation.

Service with Integrity

A commitment to serve the campus community and external constituents in responsive, accessible, and with integrity and ethical manner.

Accountability

A commitment to accuracy, transparency, efficiency to advance the mission, vision, and effectiveness of the University.

Accurate and timely data

A commitment to provide timely, accurate and consistent data to the University community, and to external organizations.

Compliance

A commitment to maintain compliance with requirements of the SACSCOC and other disciplinary accreditation agencies and regulatory bodies.

GOAL 1: SYSTEMATICALLY IMPROVING INSTITUTIONAL EFFECTIVENESS THROUGH ASSESSMENT, ACCREDITATION, AND FACULTY CREDENTIALING.

SER #	OBJECTIVES	STRATEGIES/ ACTIONS	PERFORMANCE INDICATORS/MEASURES	BASELINE/ TARGETS	TIMELINE
1	<i>Establish and maintain a systematic multi-level institutional effectiveness system for measuring institutional effectiveness.</i>	<ul style="list-style-type: none"> • Strategy 1: Assess Program Learning Outcomes (PLOs) and Student Learning Outcomes (SLOs). 	Number of meetings and webinars for SLO and PLO assessment.	All assessments complete for Educational Support Units and University Operations Units.	Annually
		<ul style="list-style-type: none"> • Strategy 2: Develop Department Unit Assessment Plans. 	Number of department and unit assessments.	All assessments complete for Educational Support Units and University Operations Units.	Annually
		<ul style="list-style-type: none"> • Strategy 3: Create Course and Instructor Evaluation Administration Plan. 	Course and instructor evaluations completed.	All part of terms in Fall, Spring, and Summer.	Semesterly
		<ul style="list-style-type: none"> • Strategy 4: Conduct surveys and prepare reports to document success, challenges, and areas concerns 	Number of surveys for SACSCOC and other programs accreditations. Reports completed.	Previous academic year reported in Fall.	Annually
2	<i>Assure the educational quality and continuous improvement of an institution through various university and program accreditation efforts.</i>	<ul style="list-style-type: none"> • Strategy 1: Prepare institution to maintain SACSCOC and other programs accreditations and record the necessary documentation. 	Repository for documentation and accreditations outcomes.	Review Fall Update Spring Publish Report Summer	Annually Every 5 years
		<ul style="list-style-type: none"> • Strategy 2: Create list of all standards required by program and university accreditation 	Document of standards for program and university accreditation.	Review Fall Update Spring Publish Report Summer	Annually Every 5 years
		<ul style="list-style-type: none"> • Strategy 3: Identify areas of overlap within the standards across accreditors to create standard narratives for consistency (i.e., library resources, assessment plans, institutional effectiveness plans, credentialing, etc.). 	Number of standard narrative documents completed.	Review Fall Update Spring Publish Report Summer	Annually Every 5 years

**GOAL 1:
SYSTEMATICALLY IMPROVING INSTITUTIONAL EFFECTIVENESS THROUGH
ASSESSMENT, ACCREDITATION, AND FACULTY CREDENTIALING.**

SER #	OBJECTIVES	STRATEGIES/ ACTIONS	PERFORMANCE INDICATORS/MEASURES	BASELINE/ TARGETS	TIMELINE
3	Establish faculty credentialing process.	<ul style="list-style-type: none"> Strategy 1: Develop Credentialing documents to show how IER credentials a faculty member based on SACSCOC guidelines. 	Number of credentialed faculty. Percentage of faculty with completed credentialing.	Previous academic year audit completed in Spring.	On going
		<ul style="list-style-type: none"> Strategy 2: Communicate to the campus community the credentialing process. 	Number of workshop events conducted.	Scheduled each Spring and Fall New Faculty Orientation.	On going
		<ul style="list-style-type: none"> Strategy 3: Collaborate with Human Resources on faculty hiring to ensure faculty are credentialed before hire. 	Completed document of procedures and process.	Launch 23-24 Academic Year	On going
		<ul style="list-style-type: none"> Strategy 4: Maintain transparency on credentialing and the process to ensure faculty stay up to date on the process. 	Completed website and communication plan for dissemination of updates.	Website launch Fall 2022 Communication Plan launch Spring 2022	Annually

GOAL 2: ENHANCING INSTITUTIONAL RESEARCH, DATA, DASHBOARDS, AND REPORTING

SER #	OBJECTIVES	STRATEGIES/ ACTIONS	PERFORMANCE INDICATORS/MEASURES	BASELINE/ TARGETS	TIMELINE
1	<i>Provide access to accurate and timely data to support decision making</i>	<ul style="list-style-type: none"> • Strategy 1: Develop and implement a data governance committee that defines standards, roles, and responsibilities for data access, accuracy, and use. 	Number of data governance committee meetings.	Eight to 10 meetings in an academic year.	On going
		<ul style="list-style-type: none"> • Strategy 2: Respond to data requests in a timely and accurate manner. 	Number of requests received. Percentage of requests completed.	100 percent completed.	Annually
		<ul style="list-style-type: none"> • Strategy 3: Publish regularly updated information regarding institutional data on the website. 	Website and schedule of university data published.	Website created and documents uploaded.	Annually
2	<i>Develop and maintain data dashboards to support decision making.</i>	<ul style="list-style-type: none"> • Strategy 1: Develop and implement data dashboards for the university. 	Number of data dashboards developed and maintained.	Three core dashboards.	Annually
		<ul style="list-style-type: none"> • Strategy 2: Provide training and support for users of data dashboards. 	Number of users trained and supported.	Four videos.	Annually
3	<i>Develop and maintain external reporting.</i>	<ul style="list-style-type: none"> • Strategy 1: Respond to external requests for data from Federal, State, System, and other external agencies. 	Number of responses to IPEDS, THECB, TAMUS and other external agencies.	All thirty reported.	On going
		<ul style="list-style-type: none"> • Strategy 2: Monitor and adhere to timelines and requirements for external reporting. 	External reporting timelines and all applicable guidelines followed.	100 percent completed.	On going
4	<i>Increase data literacy across the university.</i>	<ul style="list-style-type: none"> • Strategy 1: Develop and implement data literacy workshops and trainings for faculty and staff. 	Number of faculty and staff attending data literacy workshops and trainings.	Thirty percent of all faculty/staff attendance.	Annually
		<ul style="list-style-type: none"> • Strategy 2: Develop and maintain a data glossary. 	Data glossary created and regularly updated.	Reviewed Fall. Updated Spring. Publish Summer.	Annually

GOAL 3: ENHANCING DATA-DRIVEN DECISION-MAKING USING SURVEYS

SER #	OBJECTIVES	STRATEGIES/ ACTIONS	PERFORMANCE INDICATORS/MEASURES	BASELINE/ TARGETS	TIMELINE
1	<i>Establish standards for survey questions, administrations, and results packages</i>	<ul style="list-style-type: none"> • Strategy 1: Publish a document of standards of best practices. 	Number of data standards written.	Review Fall. Updated Spring. Publish Summer.	Annually Every 5 years
		<ul style="list-style-type: none"> • Strategy 2: Communicate standards with the university community. 	Number of workshop events and activities.	Fifty percent attendance by faculty/staff.	Annually
		<ul style="list-style-type: none"> • Strategy 3: Survey university community regarding effectiveness of standards. 	Number of surveys conducted and response rates.	Seventy five percent response rate.	Annually
		<ul style="list-style-type: none"> • Strategy 4: Determine uses of surveys to inform policy, decisions making, and progress tracking. 	Number of satisfied customers utilizing survey tools.	Seventy five percent response rate.	Annually

GOAL 4: CONTINUOUSLY IMPROVING INSTITUTIONAL EFFECTIVENESS

SER #	OBJECTIVES	STRATEGIES/ ACTIONS	PERFORMANCE INDICATORS/MEASURES	BASELINE/ TARGETS	TIMELINE
1	<i>Strive for continuous improvement and standards of excellence within IER and Office of Academic affairs</i>	<ul style="list-style-type: none"> • Strategy 1: Develop Annual master Calendar for planning events and activities. 	Calendar created in centralized location and published on website.	Review Fall. Updated Spring. Publish Summer.	Annually
		<ul style="list-style-type: none"> • Strategy 2: Complete and submit Excellence and Assessment Narrative for continued improvement. 	Document created that reports strategies for campus community.	Review Fall. Updated Spring. Publish Summer.	Annually
2	<i>Develop formalized institutional effectiveness processes for data-informed improvements and efficiencies.</i>	<ul style="list-style-type: none"> • Strategy 1: Develop institutional effectiveness forms/processes. 	Number of existing forms and processes created and updated.	Review Fall. Updated Spring. Publish Summer.	Annually
		<ul style="list-style-type: none"> • Strategy 2: Use institutional effectiveness processes for evaluation of unit effectiveness campuswide. 	Number of departmental strategic plans with IER reviewed.	Review Fall. Updated Spring. Publish Summer.	Annually