



September
2023



CARRINGTON COLLEGE®

Institutional Midterm Report

**In Support of Continuing Accreditation
Submitted by Carrington College
8909 Folsom Blvd. | Sacramento, CA 95826**

**To Accrediting Commission for Community and Junior Colleges
Western Association of Schools and Colleges**




Midterm Report Certification Page


To: Accrediting Commission for Community and Junior Colleges,
Western Association of Schools and Colleges

From: Mr. Mitch Charles
Carrington College
8909 Folsom Blvd., Sacramento, CA 95826

I certify that there was broad participation/review by the campus community and believe this report accurately reflects the nature and substance of this institution.


Signatures:

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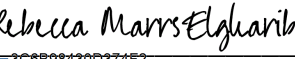
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Report Preparation

The Carrington College Governance Structure was utilized to facilitate the completion of this report. Committees at the College participated in the process by contributing, collecting, and analyzing data; attending the monthly and quarterly integrated planning meetings; or during the Program Review process. Despite delays imposed by the COVID-19 pandemic, this process culminated in data analysis, gap identification, and recommendations for improvement that will drive the College forward as we strive to support and fulfill our Mission. The timeline for the completion of this report was as follows:

DATE:	ACTION:
March 15, 2021	Establish Committee documentation and membership, build SharePoint and Teams repositories for working groups and committees.
April 8, 2021	Accreditation Training for committee chairs and launch meeting.
April 10, 2021	Accreditation Committee began working on the DRAFT response template.
April 10, 2021	Education Committee and Student Services Committee began working on the QFEs.
May 1, 2021	Education Committee began working on Recommendation #1.
July 6, 2021	Accreditation Committee began working on Recommendation #3.
August 11, 2021	Executive Council met to revisit timeline and assign co-chairs to remaining Improvement Plans.
September 1, 2021	Continued evidence collection.

September 1, 2021	Finance and Budget Committee began working on Recommendation #2.
September 23, 2021, Monthly until August 24, 2023	ACCJC and Integrated Planning Monthly Meetings.
December 10, 2021	Quarterly Midterm Report Progress Meeting.
February 28, 2022	DRAFT #1 in with supporting exhibits and data.
March 10, 2022	Quarterly Midterm Report Progress Meeting.
May 1, 2022	Executive Council meeting to discuss progress and next steps.
June 10, 2022	Quarterly Midterm Report Progress Meeting.
August 1, 2022	First DRAFT reviewed by the College Committees.
September 10, 2022	Quarterly Midterm Report Progress Meeting.
November 10, 2022	First DRAFT reviewed by the Carrington Executive Council Leadership Team.
February 3, 2023	CC Board of Governors 1st Readthrough.
May 1, 2023	Final data analysis and final compilation.
July 13, 2023	Second DRAFT reviewed by the Carrington College Executive Council/Leadership Team.
August 25, 2023	Final Board Approval.
September 30, 2023	Submit to ACCJC.



Carrington College Self-Identified Improvement Plans Arising from the Self-Evaluation Process

During Carrington College's 2019 self-evaluation process, administration, faculty, staff, and students identified areas for improvement to strengthen our alignment with the ACCJC Standards. This section reports on those self-identified improvement plans and the progress made for each. For all plans that have been fully addressed, we describe the resulting action and outcomes. For all plans that are in process, we identify those as "in progress" and provide an anticipated date for completion.

Standard I: Mission, Academic Quality and Institutional Effectiveness, and Integrity

Improvement Plan 1: (I.B.1) Solicit feedback from instructors at all levels both during and after completion of the Program Review cycle.

Progress and Analysis

During the Program Review cycle, the Deans of Curriculum solicit feedback from the Deans of Nursing and Program Directors, as well as their faculty, including any part-time or adjunct instructors. Carrington College updated the Program Review (PR) process in June 2020 by creating individual courses in the Learning Management System (LMS) Canvas, for each program going through Program Review that year. The course shell contained forms, data packages, due dates, and the means with which to collaborate with others and gather information in one centralized location. Please see **Exhibit IP.IB1-1** Program Review Canvas Course Shell Overview 2020. The Canvas course shell improved participation, collaboration, and communication resulting from the centralized location of all materials and the universal platform for both synchronous and asynchronous communication. The course shell made it easier for participation in meetings during which faculty at all levels collaborated to generate recommendations for improvement.

The Program Review for 2021 began in July and course shells were built in the LMS Canvas similar to how they were for the 2020 cycle. Please see **Exhibit IP.IB1-2** April 21 Canvas PR course shell. Once Program Review concluded, the participants were solicited for feedback, and it was recommended that all programs go into one course shell to further simplify the process and enhance collaboration and communication. Also, the request was made to have more time to complete the process. The Program

Review Data Packet was linked with the course shells which greatly enhanced accessibility of data. This will always be available and is refreshed as data changes.

In response to the request for more time to conduct Program Review, the 2022 Program Review cycle was launched in January, and the Program Review Data Package was linked in the course shell where updates are captured to reflect current data. During this launch event, the expectations were communicated to Program Directors (PD) to get the input of all part-time, full-time, and online faculty. This process yielded strong participation from part-time, full-time, and online faculty. Please see **Exhibit IP.IB1-3** Attendance Roster General Education Program Review. The Canvas shells served as the repository of information, and meeting minutes were uploaded here for each respective program. Please see **Exhibit IP.IB1-4** Screenshots of DA Program Review Course Shell.

Additionally, the teams utilized the Assessment Planning Matrix which encompasses eight critical areas for review. For a representative example, please see **Exhibit IP.IB1-5** PR Assessment Planning Matrix DH 2022.

Next Steps

Launching the program review earlier yielded greater support from colleagues at all levels and fostered constructive dialogue that resulted in a strong number of campus and program global recommendations such as customized student kits and calibration typodonts for dental hygiene. Please see **Exhibit IP.IB1-6** Program Review Executive Summary Dental Hygiene 2022 and **Exhibit IP.IB1-7** Resource Allocation Rubric DH 2022. Completed executive summaries of all approvals or deferrals for each program are finalized and uploaded into the canvas course shells for review by Campus Directors, Program Directors, and faculty. This process will continue during the next Program Review cycles scheduled for 2023 and 2024. Data is readily available and continuously updated in the Power BI report.

Status:

Completed

Improvement Plan 2: (I.B.6, I.C.2, I.C.4, I.C.5 and I.C.6) The College will review publication management practices and update the process to include additional controls on timelines, deadlines, a pre-determined schedule, and process flow. It will help to improve communication and flow of information between key stakeholders and requirements for capturing edits to the catalog and website, allowing for sufficient review time prior to publishing.

Progress and Analysis

The College reviewed the catalog publication process and determined that specific adjustments would improve the overall process. In response, the College established strategic publication release dates to occur after a start date which allows for

prospective students seeking to enroll the visibility of any newly published policies, as well as the total cost of education in the Academic Catalog.

The College created a flowchart outlining the business units that collaborate on the update, review, approval, publication, and web posting of the Academic Catalog. In addition, the College developed a publication schedule timeline to support each step of the catalog process and assigned business unit content owners for each section. The recently developed flowchart outlines the cross functional business units that collaborate on the accuracy of the Academic Catalog, Enrollment Agreement, and the student information system. Please see **Exhibit IP.IB6-IC2.4.5.6-1** Catalog Area of Responsibility Chart. The cross functionality and process flow of the Academic Catalog and the Enrollment Agreement ensures that the consistency of the program cost, credits, and length of the program are consistent across all documents. Please see **Exhibit IP.IB6-IC2.4.5.6-2** Pre and Post Catalog Flowchart.

The finalized catalog is posted to the College's website based on the catalog publication schedule and is available for use at the opening of the next business day. Please see the Academic Catalog Publish Schedule and Due Dates (estimated) and Catalog Review and Publication Flow Chart attached as **Exhibit IP.IB6-IC2.4.5.6-3** Catalog Review and Publish Process Flowchart. In addition to the catalog review and publication process, the College website is updated based on standards, policies, and procedures of regulatory bodies and programmatic accreditors. The programmatic accreditors inform the College of required updates and provide the prescriptive language for these instances. Please see **Exhibit IP.IB6-IC2.4.5.6-4** CoARC Required Updates to College Website, **Exhibit IP.IB6-IC2.4.5.6-5** Academic Catalog Page 133 Respiratory Care Technical Standards, and **Exhibit IP.IB6-IC2.4.5.6-6** CAPTE Required Updates to College Website for accreditor requests and supporting evidence the requirements were met.

Data from the Spring 2021 Student Satisfaction Survey demonstrated an increase in satisfaction with accessibility to the online Academic Catalog as compared to the Spring 2019 survey. This includes an increase in positive scores for providing useful information, tuition, program descriptions, time to completion, learning outcomes, and credentials awarded. Previously, in the 2019 ISER, the College referred to the Spring 2019 Survey where it was revealed that 71% of student respondents either agreed or strongly agreed with the statement that, "Carrington College public website provides useful information about its academic program offerings (tuition, program description, time to completion, learning outcomes, and credentials awarded)." In the spirit of continuous improvement, Carrington College instituted the new process mentioned above and administered a survey in Spring of 2021. The results of the Spring 2021 survey revealed an increase from 71% to 78% (Likert score of 4.06). Please see **Exhibit IP.IB6-IC2.4.5.6-7** Student Survey Results.

Status:

Completed

Next Steps

The next steps are for the College to continue to monitor the progress made with the new catalog process and determine if any additional adjustments need to be made. The College will also monitor survey data for feedback regarding the new process during 2023 and 2024.

Improvement Plan 3: (I.C.9) The College uses data derived from end of course surveys and observations to craft performance and development plans for faculty.

Progress and Analysis

The College has implemented a report in Microsoft Power BI that captures end of course survey results and instructor observation data. The data is used to create development plans for faculty to improve performance. The plans are developed through collaboration of the faculty and their supervisor to address performance in the identified areas of opportunity.

During the Dental Hygiene (DH) Program Review process in 2022, the faculty and Program Directors made recommendations based on feedback derived from End of Course (EOC) Surveys. These recommendations included the need to conduct clinical faculty calibrations every term, to allow for sufficient time to onboard and provide adequate training to clinical faculty, to utilize the Instructor Observations (IO) for instructional feedback and training, and to begin replacing some of the operating chairs as needed. Please see **Exhibit IP.IC9-1** DH-PR Assessment Planning Matrix, **Exhibit IP.IC9-2** DH-Resource Allocation Rubric 2022 calibration typodonts, **Exhibit IP.IC9-3** DH-Executive Summary, and **Exhibit IP.IC9-4** DH-SAC EOD DH400 Student Comments.

Next Steps

These changes became effective in May 2022, and between May and November 2022, there have been 592 instructor observations performed as compared to 523 for the entire calendar year 2021. This is approximately 100 observations per month which suggests a significant increase in the number of instructor observations performed. Please see **Exhibit IP.IC9-5** Instructor Obs 2021, and **Exhibit IP.IC9-6** Instructor Obs May to Oct 2022. At the end of calendar year 2022, the College will be completing performance evaluations and will begin development plans for 2023 and incorporate the data gleaned from EOC surveys and IOs as

part of this process.

Status:

In Progress. Expected completion by the end of 2023.

Standard II: Student Learning Programs and Support Services

Improvement Plan 4: (II.A.2) Observation data is being captured in a new dashboard.

Progress and Analysis

In 2021, the College implemented eLEO and VCO observation data which was previously only available in an Excel spreadsheet format. It was implemented via Microsoft Power BI to display instructor observation data where custom reports can be created in the platform's dashboard. This enhancement produced a Power BI report that users were able to filter and view individual instructor, program, or campus data. For a representative sample of program data and a dashboard for the Dental Assisting (DA) Program, please see **Exhibit IP.IIA2-1** Power BI data and **Exhibit IP.IIA2-2** eLEO Dashboard DA.

Training was provided to increase the usage of the instructor observation and how to access the data. For a list of meeting invitations and minutes please see **Exhibit IP.IIA2-3** PALS Meeting Invites and **Exhibit IP.IIA2-4** PALS Meeting minutes 12.20.21. The instructor observation tool was improved to align with the ILOs, and one template form was used for all faculty. Also, the rating scale for the instructor observations was changed to a 5-point Likert scale to align with the EOC survey.

Power BI provides the College with visibility into the data. The data is updated continuously, which assists with determining additional faculty training and development needs. The observation data is used during faculty one-on-one meetings and end-of-year evaluations. This process in its entirety went live May 2022 and initial data review demonstrates a positive trend in instructor observation completions. Please see **Exhibit IP.IIA2-5** Power BI Instructor Observation and **Exhibit IP.IIA2-6** IO 1.1.22 to 9.20.22 detail for an example of the data and an increased utilization.

Next Steps

The College will continue to monitor the effectiveness of the report for observation data.

Status:

Completed

Improvement Plan 5: (II.A.3) The Assessment Committee will focus on improving the accessibility and delivery of SLO data and review topics relating to assessment of SLOs.

Progress and Analysis

In 2020, the College began working on creating an SLO Mastery Data Report. The report was completed in 2021 and included in the Program Review data package. The data is continuously updated and available to the College community. Please see **Exhibit IP.IIA3-1** Learning Outcomes 2020 for an example of the dashboard created in Canvas.

Once the dashboard and Power BI data package were created, the Student Learning Outcome (SLO) results were analyzed and compared from 2020 and 2021, and it was noted that the overall SLO Master Rate increased from 88.6% in 2020 to a 91.5% rate in 2021. Please see **Exhibit IP.IIA3-2** Learning Outcomes 2021.

The Assessments and Outcomes Committee recommended that the SLO assessment process be simplified, and the recommendation was to create an SLO module with the CLOs, PLOs, and ILOs. The SLO module includes a definition for learning outcomes, includes a mastery statement, and how the student will be assessed. Please see **Exhibit IP.IIA3-3**, **Exhibit IP.IIA3-4** and **Exhibit IP.IIA3-5** for Assessment and Outcomes Minutes to review the integrative planning process, strategic objectives, action planning, and ACCJC recommendation 1- SLO and course mapping status. Please see **Exhibit IP.IIA3-6** Canvas Course Shell and **Exhibit IP.IIA3-7** Faculty In-Service New SLO Format.

Next Steps

Results are available in Power BI for easy review and interpretation and as part of the data package for Program Review that will be continuously accessible moving forward. Please see **Exhibit IP.IIA3-8** Power BI SLOs 2020-2022 Overview.

Status:

Completed

Improvement Plan 6: (II.A.11) The College will review the definitions of Institutional Learning Outcomes (ILOs) and consider revising to add clarity to the expectations and how they are measured. In addition to the biannual Program Review process, the College will consider quarterly meetings during which we will compare ILOs to SLOs to ensure they align.

Progress and Analysis

As part of the SLO project initiated by the College in 2020, it was determined that the SLO mapping by program be completed prior to reviewing and modifying the ILO descriptors. The SLO mapping project commenced in 2020 and took two years to complete. Multiple meetings were held throughout the two years to complete the SLO mapping project and ensure alignment of SLOs for all programs.

A recommendation was made by faculty and Program Directors to add the ILO descriptors into the LMS and the Academic Catalog for student and faculty clarity. Please see **Exhibit IP.IIA11-1** Catalog Updates ILO Comparison. In September 2021, the Integrated Planning Committee discussed and compared the ILOs to the new College Mission Statement to see if they aligned with the Mission Statement. During that meeting, it was unanimously agreed that the ILOs support the new College Mission Statement. Please see **Exhibit IP.IIA11-2** Integrated Planning Committee Meeting Minutes.

Subsequently, to better align with the course mapping project and learning outcomes alignment in 2022, ILOs were updated for clarity and included in the catalog which involved changing the naming conventions from SLOs to ILOs. During this phase of the alignment, all levels of learning objectives (institutional, programmatic and course) which allowed for greater visibility. Please see **Exhibit IP.IIA11-3** Aligned IO and EOC 2022. The Education Master Plan was created using the ILOs and descriptors. Please see **Exhibit IP.IIA11-4** 2022 Education Master Plan ILO. The project, progress, and updates were discussed during quarterly Outcomes and Assessment Committee meetings. Please see **Exhibit IP.IIA11-5**, **Exhibit IP.IIA11-6**, and **Exhibit IP.IIA11-7** Assessment and Outcomes Committee Minutes.

Status:

Completed

Standard III: Resources

Improvement Plan : (III.A.14) The College will broaden the scope of seminars/webinars that are attended by including more accreditation hosted conferences, registry and licensing body hosted conferences, as well as state and national education opportunities where legislation and regulation might be further discussed. The College needs to develop a repository that will store the best practices and take-aways from each development opportunity.

Progress and Analysis

The COVID-19 pandemic significantly limited the College's ability to send faculty to attend conferences as most of them were canceled. As opportunities became available in 2021 and 2022, the College provided faculty members with the means to attend conferences, symposiums, or webinars. The College hosted a Nursing Summit in 2021 and 2022. The purpose of these summits was to review and work on curriculum, program outcomes, perform assessments, and develop action plans for areas of improvement. These summits provided an opportunity for the Deans of Nursing to meet in person and collaborate on standardization of curriculum, documentation, and processes.

The Surgical Technology program in Phoenix was seeking initial accreditation with the Accreditation Review Council on Education in Surgical Technology and Surgical Assisting (ARC/STSA). The Program Director attended the Accreditations Fundamentals for Educators (AFE) Workshop held in July 2021 and the ARC/STSA Site Visitor Training Workshop. The information obtained at these workshops was shared with the other colleagues in the Surgical Technology Program. Please see **Exhibit IP.IIIA14-1** ARCSTSA SVT Attendee PPT.

Additionally, the Veterinary Technology Program Director at the Pleasant Hill campus attended the 2020 virtual annual conference, and the 2021 in-person annual conference held by the Association of Veterinary Technician Educators (AVTE) to include discussion topics in self-care, teaching skills, and the road ahead in the veterinary profession. Please see **Exhibit IP.IIIA14-2** AAVSB VTNE AVTE for the 2020 symposium conference notes. Please see **Exhibits IP.IIIA14-3, IP.IIIA14-4, and IP.IIIA14-5** for information provided during the 2021 AVTE conference that was brought back to the College to share with others.

Colleagues attended the ACCJC Equity, Quality, and Innovation Through Action Symposium April 20-22, 2021, and brought back information learned at the symposium. The College considered these key tenets during the revision of the College Mission Statement.

During May 20 - May 21, 2021, faculty members attended the Medical Assisting Education Review Board (MAERB) Initial Accreditation Self-Study Workshop covering topics that included Commission on Accreditation of Allied Health Education Programs

(CAAHEP) standards and guidelines, the self-study process, and available resources. On September 16, 2021, faculty members attended the ABHES Accreditation Workshop which covered topics such as the process of accreditation, preparing the self-evaluation report, ABHES standards, and visit reports. Please see **Exhibit IP.IIIA14-6** for Confirmation of Registration for MAERB's Initial Accreditation Self-Study Workshop and Certificate of Completion for the Accrediting Bureau for Health Education School's (ABHES) Accreditation Workshop.

The College identified a gap to collect presentations and documentation of in-services provided by faculty that attended conferences. As a result, the College created a centralized repository that houses all of the key takeaways from the seminars, webinars, or symposiums attended in order to share best practices with the College. Please see **Exhibit IP.IIIA14-7** for a screenshot of the new repository. Moving forward into 2023, the best practices and takeaways from each conference will be housed here. For example, colleagues recently attended the California Dental Hygiene Educators Association (CDHEA) annual conference, colleagues have signed up to attend the American Physical Therapy association (APTA) combined sections meeting scheduled for February 23-25, 2023, and colleagues have registered for the American Association for Respiratory Care (AARC) convention occurring on November 9-12, 2022. Please see **Exhibit IP.IIIA14-8** Conferences Attended and Scheduled. Additionally, the College has redesigned and centralized the location of the Professional Development Fund Request Form so that it is more user friendly and more accessible to colleagues. Please see **Exhibit IP.IIA14-9** Prof Dev Fund Request.

Next Steps:

The repository and training on the process will be provided to colleagues involved in the process. As the pandemic impeded the improvement in this area, the College will continue forward into 2023 and 2024 with the process to encourage conference attendance, centralize the learned information, and collect and analyze data as applicable.

Status:

In Progress. Expected completion by the end of 2023.

Improvement Plan: (III.C.1) Carrington College's IT department will collaborate closely with Ember Education's Shared Services shared IT services to ensure infrastructure, cyber security, and database administration are appropriate to support the operations of the College.

Progress and Analysis

In early 2021, Carrington College revised the Technology Plan to better capture the key services that students need from a technology standpoint to be successful in their courses and programs. The Carrington College Information Technology (IT) Plan outlines the technological infrastructure needed to support the College. Please see **Exhibit IP.IIIC1-1** Technology Plan for a comprehensive list of system administration,

technical support, and services. This commitment to excellence encompasses the development of the technological infrastructure needed to support and deliver programs by providing reliable access to the resources needed for effective operation of the College.

As part of this change, regional support was partitioned by area versus by the entire College. This structure allows for more efficiency, better oversight, and facilitates greatly improved knowledge sharing and coverage. As a result, the partnership has provided students with a robust support network between the Learning Management System (LMS), Canvas; Apple iPads and Apple TVs; as well as identifying technology specifications and requirements prior to enrollment. Canvas is accessible 24 hours a day, seven days a week and is supported by the LMS Team who is available to support students with troubleshooting or gaining access to course materials or textbooks. Student records are maintained indefinitely in the student management system which is supported by the shared IT services team. Technical support can be obtained by submitting a request into the ticketing system at help@carrington.edu.

As part of the continuous improvement process, each campus had three Apple TVs installed to accompany the iPads in late 2020 and early 2021. In 2022, many classrooms have migrated to smart TV's, which facilitate a wireless connection between the iPad and the screen allowing the instructor to move about the classroom during instruction. The iPad technology is often new to students and faculty; however, with the support from the team at Apple and our partners in IT, the College continues to provide up-to-date training and support to faculty and students.

The College launched the Student Satisfaction Survey in Spring 2021 and Fall 2021 to ascertain whether these technology improvements meet the needs of our student population. For the question "Carrington College has provided the necessary resource to support my learning" which encompasses technology and other resource areas, 81% of students either agreed or strongly agreed. Please see **Exhibit IP. IIIC1-2** for the results of this survey question. Survey data and reports are housed in Power BI which enables the College to collect the data for analysis and share it with the College community more effectively.

With regards to cybersecurity, mandatory quarterly cybersecurity trainings are provided through Living Security for all employees. This training is released through askhr@carrington.edu and serves as an integral component to dissemination and verification of training for all colleagues. Please see **Exhibit IP. IIIC1-4** Living Security screenshot. Each campus has an electronic badge entry system that only allows authorized personnel with the proper badge or identification into the building. Students and faculty attempting to access Carrington electronic information must submit to the multi-factor authentication process designed to restrict access to only those that are authorized.

The College instituted a Multi-Factor Authentication (MFA) process that greatly reduces the number of compromised accounts and is the most effective way to secure user

identity. MFA was implemented for all employees in July 2021 and was implemented for all current and future students in November 2022. The College has also started a project to increase the bandwidth and install a software defined wide area network (SD-WAN) for all campuses with an expected completion date of April 2023. Additionally, the College installed a New Inteliquent System for telephones that is compatible with the New SD-WAN. A budget was approved for the Wireless Hotspot Project to replace the existing wireless hotspot hardware at all campuses and to expand the wireless hotspots throughout the campuses to ensure reliable wireless connections for all users. This is also scheduled to be completed by the end of February 2023.

Next Steps:

Projects to upgrade connectivity and improve the quality of signal and service to students and faculty will be completed. Students will have the opportunity to provide feedback through the bi-annual student survey.

Status:

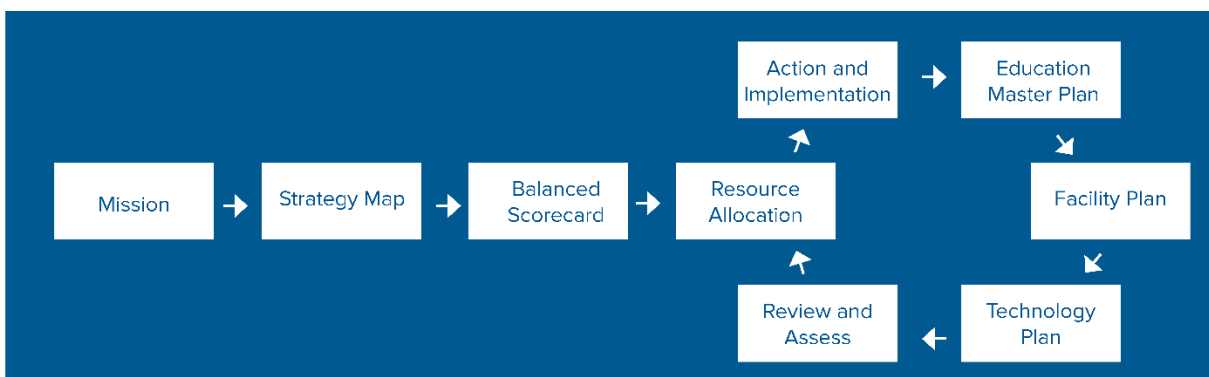
Completed

Improvement Plan: (III.C.1) Carrington College will continue to work closely with Ember Education's Shared Services, to align financial practices and resources.

Progress and Analysis

The College has in place an integrated system of reviewing, planning, and budgeting to ensure resources are focused on achieving the College's mission and fostering continuous improvement.

The College Integrated Planning Process (see diagram below) is conducted primarily through college-wide committees and campus committees. During the College Annual Planning process, committees meet to review past outcomes and to make recommendations for the upcoming year. Dialogue and decisions are guided by learning outcomes and achievement data. Allocating appropriate funds is a part of a comprehensive, long-range fiscal plan.



Carrington College follows an extensive budget development process for annual operating and capital expenditures. The Vice Presidents of Operations collaborate with the President to review the various forecasts and assumptions for upgrading and replacing resources. Additionally, there is consideration for long-range forecasting and expansion of existing or new programs based on community and employer demand. In addition, the Vice Presidents of Operation and the Finance and Budget Committee members help drive long-range forecasting and expansion of the College such as opportunities for new programs or campus locations.

During the budget process, financial resources, including leasehold and capital expenditures are forecasted for each location, academic program, and college operation. The budgeted expenses account for resources associated with instruction, faculty, materials, services, administrative, and physical resources. Additionally, recommendations occurring from the Program Review process which include a fiscal component utilize the Resource Allocation Rubric. The resource allocation process is a part of the College's fiscal planning to ensure resources flow to activities designed to meet the institutional goals and objectives identified in the strategic plan. Carrington College's institutional goals reflect the College's commitment to its Mission. The purpose of the resource allocation process is to ensure funding of programs and services that promote student learning directly and indirectly. The Resource Allocation Rubric weighs planning recommendations based on the extent to which a recommendation meets the following criteria:

- positively impacts the Carrington experience for a substantial number of students
- relates to existing college objectives
- addresses regulatory/legislative/accreditation requirements
- improves institutional processes/procedures, need for recommendation identified by a gap in learning outcomes, or in student achievement data, i.e., licensure pass rates

Please see **Exhibit IP.IIID5-1** Resource Allocation Rubric. Utilizing the data and feedback collected, a draft of the budget is developed and sent to the Campus Directors for review. The draft budget includes the following data and information: revenue projections expenses, student head count, faculty, and service areas staff. Much of this information is derived from program and service reviews, all of which are generated through the College committee structure.

The College President will present this proposed budget to the Finance and Budget Committee for the College. This draft is reviewed by the committee and is presented to the Board of Governors (BOG) Finance Committee for review and approval. That is accomplished at the December Board of Governor's meeting each year. Once the budget is approved and adopted, financial statements are provided to leaders monthly to review, assess, evaluate, and capture recommended adjustments to ensure academic and service excellence is maintained. Reforecasting occurs monthly.

Status: Completed

Exhibits for the Self-Identified Improvement Plans Arising from the Self-Evaluation:

Exhibit IP.IC9-1 DH PR Assessment Planning Matrix 2022
Exhibit IP.IC9-2 Resource Allocation Rubric 2022 DH calibration
Exhibit IP.IC9-3 DH Executive Summary 2022
Exhibit IP.IC9-4 DH SAC EOD DH400-comments 2019-2022
Exhibit IP.IC9-5 Instructor Obs 2021
Exhibit IP.IC9-6 Instructor Obs May to Oct 2022
Exhibit IP.IIA2-1 Power BI data
Exhibit IP.IIA2-2 eLEO Dashboard DA
Exhibit IP.IIA2-3 PALS Meeting Invites
Exhibit IP.IIA2-4 PALS Meeting minutes 12.20.21
Exhibit IP.IIA2-5 Power BI Instructor Observation
Exhibit IP.IIA2-6 IO 1.1.22 to 9.20.22 detail
Exhibit IP.IIA3-1 Learning Outcomes 2020
Exhibit IP.IIA3-2 Learning Outcomes 2021
Exhibit IP.IIA3-3 Assessment and Outcomes Minutes
Exhibit IP.IIA3-4 Assessment and Outcomes Minutes
Exhibit IP.IIA3-5 Assessment and Outcomes Minutes
Exhibit IP.IIA3-6 Canvas Course Shell
Exhibit IP.IIA3-7 Faculty In-Service new SLO Format
Exhibit IP.IIA3-8 Power BI SLOs 2020-2022 Overview
Exhibit IP.IIA11-1 Catalog Updates ILO Comparison
Exhibit IP.IIA11-2 Integrated Planning Committee Meeting Minutes
Exhibit IP.IIA11-3 Aligned IO and EOC 2022
Exhibit IP.IIA11-4 2022 Education Master Plan ILO
Exhibit IP.IIA11-5 Assessment and Outcomes Minutes
Exhibit IP.IIA11-6 Assessment and Outcomes Minutes
Exhibit IP.IIA11-7 Assessment and Outcomes Minutes
Exhibit IP.IIIA14-1 ARCSTSA SVT Attendee PPT
Exhibit IP.IIIA14-2 AAVSB VTNE AVTE
Exhibit IP.IIIA14-3, **IP.IIIA14-4** and **IP.IIIA14-5** 2021 AVTE Conference Takeaways
Exhibit IP.IIIA14-6 Confirmation of Registration MAERB workshop
Exhibit IP.IIIA14-7 Screenshot of Webinar/Conference Repository
Exhibit IP.IIIA14-8 Conferences Attended and Scheduled
Exhibit IP.IIIA14-9 Prof Dev Fund Request
Exhibit IP.IIIC1-1 Technology Plan
Exhibit IP.IIIC1-2 Survey Results
Exhibit IP.IIIC1-4 Living Security screenshot
Exhibit IP.IIID5-1 Resource Allocation Rubric



6. A: Carrington College Recommendations for Improvement

Recommendation 1

In order to improve effectiveness, the team recommends that the College build upon its existing SLO processes to ensure a sustained, substantive, and collegial dialogue about student learning and achievement (II.A.3).

Progress and Analysis

As a part of the integrated planning process, Student Learning Outcome (SLO) assessment is an ongoing process throughout the College. The purpose of assessing SLOs is to identify and create measurable student learning outcomes for each course in the College's programs.

Carrington College developed a project plan that began in 2019 with the goal of completing an SLO Map for all programs. The purpose behind the SLO Mapping was to provide a visible alignment of all CLOs to PLOs and PLOs to ILOs. The project began in conjunction with the Program Review process with the intent to complete 50% of the SLO maps in 2020 and to complete 100% by the end of 2021 with input and feedback from the Program Directors and faculty. As a result, several of the PLOs and CLOs were rewritten to align with the ILOs. Please see **Exhibit 6A.Rec1-1** Academic Excellence Meeting to discuss the SLO Project, **Exhibit 6A.Rec1-2** SLO Assessment Cycle, and **Exhibit 6A.Rec1-3** SLO Map of Programs 2021.

In 2022, the College created course maps for programs and attached SLOs to the appropriate assessment tools. The second phase of the project consisted of the following key steps:

- Reorganization of SLOs
- Archiving old courses and programs
- Reducing unnecessary layers
- Standardizing SLO rating scales
- Creating SLOs for programs and courses (new or updates)
- Syllabus page standardized for every course
- HTML rewrites
- SLO updates
- Simplification for enhanced student understanding
- Template created and previewed by program (faculty development in-services)
- Independent learning activities were created (asynchronous for blended)
- SLO assessment in course formatting

Once the SLO mapping was completed, the College began the course mapping during phase two of the project. Please see **Exhibit 6A.Rec1-4** Course Map VN101. For a representative example of PLOs updated in the Academic Catalog versus prior PLOs, please see **Exhibit 6A.Rec1-5** PLO Update Examples from the Academic Catalog 2020 to 2022.

One example of SLO dialogue and analysis driving data-based decisions occurred within the Physical Therapist Assistant Program at the Mesa campus. The Physical Therapist Assistant National Physical Therapy Exam (PTA NPTE) pass rate for the program for 2018-2019 was 74.19%. The Commission on Accreditation in Physical Therapy Education (CAPTE) standard requires an average two-year pass rate of at least 85%. In 2020 to 2021, the program completed an in-depth analysis of courses which included alignment with the SLOs within the technical phase of the program. This led to the identification of a learning gap in basic anatomy courses and adjustments were made to increase the rigor of these courses (i.e., weekly muscle quizzes). The courses were then tracked year-over-year, and it was deduced that these improvements yielded an increase in the PTA NPTE two-year pass rate to 86.96%, above the threshold of 85%. Please see **Exhibit 6.A.Rec1-6** FSBPT Free Basic Pass Rate Report – PTA Mesa campus. Student Learning Outcomes for all programs across the College will continue to be reviewed during Program Academic Leadership (PAL) calls.

Next Steps:

The College is working on the development of a repository of curriculum maps in a centralized, accessible location that can be used to analyze disaggregated student achievement data and drive continuous improvements in instructional delivery. The project is in phase 2 where the initial collection of data will result in analysis and results that will serve to drive decisions.

Status:

In Progress. Expected completion of phase 2 end of August and phase 3 by the end of December 2023.

Recommendation 2

In order to improve effectiveness, the team recommends that the College continue to follow the Correction Action Plans (CAP) as identified in response to audit reports. (III.D.15)

Progress and Analysis

The College has continued to execute on the Corrective Action Plans pertaining to the findings from the audit period July 1, 2018 through June 30, 2019. The following actions and results have taken place:

The College reviewed and addressed each individual finding by facilitating staff training, updating its processes, and taking the required steps to resolve them.

Subsequently, the College was audited for the period of January 1, 2020 through December 31, 2020, and during that audit, it was determined that the corrective action plans were completed as reported in the original action plans for the audit period July 1, 2018 through June 30, 2019. The College will continue to monitor its processes to ensure accuracy of processing Title IV.

Status:

Completed

Recommendation 3

In order to improve effectiveness, the team recommends that the College further document their evaluation mechanisms of institutional decision-making policies, procedures and processes, including how the resultant improvements are communicated across the institution. (IV.A.7)

Progress and Analysis

The College has in place an integrated process for reviewing, planning, and budgeting to ensure resources are focused on achieving the College's mission and fostering continuous improvement. The College Integrated Planning process is conducted primarily through college-wide committees and campus committees.

Additionally, throughout the year, regular meetings occur (e.g., faculty meetings, campus operations, program risk assessment) including Program Advisory Committee (PAC) meetings which are held twice a year for each program. These meetings provide the opportunity for internal and external stakeholders to review and assess numerous metrics throughout the year and make recommendations for improvement. At the end of each planning year, committees and colleagues undertake a review of strategic objectives and assessment of outcomes. The results of the review and assessment form the basis for planning for the following year. The College revisited and updated the Strategic Plan, Education Master Plan, and Technology Plan to better align with the new Mission Statement of the College, the communities we serve, and the programs that we offer. Please see the resulting strategic plan included as **Exhibit 6A.Rec3-1** Carrington College Strategic Plan 2022-2027. The campuses were provided three printed hardcopies of each plan for hands-on reference.

Furthermore, the College Committee structure was rebuilt in 2020-2021 to include new committee chairs and new committee members to facilitate a more diverse membership. The President and Provost hosted institution-wide town halls to solicit committee membership and to discuss the new committee structure for the College. Several colleagues from various areas of discipline elected to join a committee to provide a well-rounded and diverse group of experts. Please see **Exhibit 6A.Rec3-2** Committee Structure and **Exhibit 6A.Rec3-3** Committee Membership. The College formally reviews the Mission Statement every three years. The College formally reviewed and

updated the Mission Statement through the committee structure during the 2020-2021 Academic Year. An additional update was made in 2022 to capture the offering and conferral of a baccalaureate degree.

The process began in July of 2020 when the Carrington College President led a call for review and comment on the College's Mission Statement. A rubric was provided to all colleagues soliciting feedback and suggestions for the key tenets from which the new Mission Statement would be based upon. Please see **Exhibit 6A.Rec3-4** Mission Statement Rubric. In January of 2021, a draft was sent back out through the committee structure for additional review, then the final draft was sent to the Carrington College Executive Council for review, feedback, and edits. That version was submitted to the Accreditation Committee as a voting item and was approved by the committee during the February 19, 2021 meeting. Please see **Exhibit 6A.Rec3-5** Accreditation Committee Meeting Minutes. Subsequently, the new Mission Statement draft was presented to the Carrington College Governing Board for review and approval. After incorporating their feedback and comments, the final version of the Mission Statement was approved by the Governing Board where it was ratified during the March 3, 2021 meeting. The resulting version of the Mission Statement now more accurately represents the program offerings, modalities, and communities we serve. Please see page 5 of **Exhibit 6A.Rec 3-6** Governing Board Meeting Minutes, and **Exhibit 6A.Rec3-7** Process for Review of the Mission Statement.

Committee or Program Review recommendations that have a budgetary component are presented to the Executive Council for consideration and are rendered one of the following three actions: approved, denied, or deferred for additional information. As a critical component to closing the loop, a formal decision is communicated to each committee chair for sharing with the committee members. The Program Review Executive Summary is uploaded to the Program Review course located in Canvas. Subsequently, leadership shares key decisions of the Executive Council Meetings during the quarterly town halls which serves as the catalyst for action.

The recommendation for Parchment services where students can order transcripts and diplomas came through the Service Review process during 2019 and 2021. The project was implemented in June 2021. Parchment transcript and diploma processing allows students to place their order via a secure website. Their orders are delivered electronically to the requested receiver through the Parchment website, creating a secure environment for protecting student information.

An example of a recommendation that was approved for the Veterinary Technology program through the Program Review process in 2021 was to extend the Vet Tech Prep student membership from the previous 90-day subscription to a 180-day subscription. Refer to **Exhibit 6A.Rec3-8** VT Executive Summary Report 2021 which outlines all recommendations, the rationale, whether the recommendation was approved, and the timeline for implementation.

Another example of a recommendation that arose through the committee structure was submitted to and approved by the Executive Council is the implementation of TalEval. The software TalEval is a dental clinical evaluation tool for the Dental Hygiene program and addresses the Commission on Dental Accreditation (CODA) programmatic accreditation standards. This request was approved for purchase at all locations offering the Dental Hygiene Program. Please refer to **Exhibit 6A.Rec3-9** Quarterly email for the email sent by the College President advising colleagues of all outcomes from the previous Executive Council meeting and **Exhibit 6A.Rec3-10** Assessment and Outcomes Meeting Minutes which includes the motion to approve.

Another example of a recommendation that arose through the committee structure was for the College to provide students with non-academic support through a third-party service. The recommendation was approved and the College procured the services of ACI Specialty Benefits which provides students and their families with 24/7 support for personal and family matters.

Status:

Completed

Exhibits Arising from the Responses to the Recommendations:

Exhibit 6A.Rec1-1 Academic Excellence Meeting to discuss the SLO Project

Exhibit 6A.Rec1-2 SLO Assessment Cycle

Exhibit 6A.Rec1-3 SLO Map of Programs 2021

Exhibit 6A.Rec1-4 Course Map VN101

Exhibit 6A.Rec1-5 PLO Update Examples

Exhibit 6A.Rec1-6 FSBPT Free Basic Pass Rate Report – PTA Mesa campus

Exhibit 6A.Rec3-1 Carrington College Strategic Plan 2022-2027

Exhibit 6A.Rec3-2 Committee Structure

Exhibit 6A.Rec3-3 Committee Membership.

Exhibit 6A.Rec3-4 Mission Statement Rubric

Exhibit 6A.Rec3-5 Accreditation Committee Meeting Minutes

Exhibit 6A.Rec3-6 Governing Board Meeting Minutes

Exhibit 6A.Rec3-7 Process for review of the Mission Statement

Exhibit 6A.Rec3-8 VT Executive Summary Report 2021

Exhibit 6A.Rec3-9 Quarterly email-College President

Exhibit 6A.Rec3-10 Assessment and Outcomes Meeting Minutes



6. B: Carrington College Reflection on Improving Institutional Performance

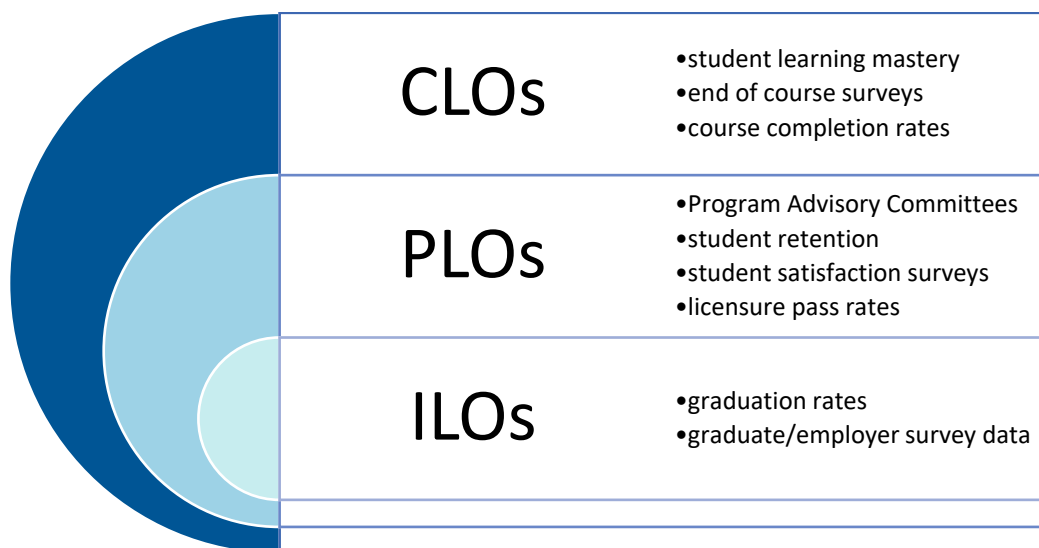
Reflection on the College's assessment processes since the last comprehensive review:

What are the strengths of the process that helps lead the College to improve teaching and learning?

Progress and Analysis

The integrated planning process has become a strength at the College as it employs a data driven process that engages its constituencies to foster and sustain student learning. Strengths of the assessment process include data collection, reporting and analysis, as well as updates to the committee structure and membership resulting in overall improvements in communication and improvements to teaching and learning. The updated Carrington College Committee Structure improves the flow of information at all levels of the College. The College performed a review of SLOs across the spectrum which included Academics and the Service areas of Enrollment, Financial, and Career Services with each respective department contributing to the development of the updated SLOs. Information gleaned from the program and service reviews over the last 3 years contributed to this process. As a result, the SLOs were aligned closely with the CLOs, PLOs, and ILOs. The assessment of data is continuous and ongoing and drives improvement in teaching and learning. During 2021 and into 2022, the College facilitated two Nursing Dean Summits, one Dental Hygiene Summit, and one Veterinary Technology Summit in which all programs had representation and participated in the evaluation of the current SLOs and made recommendations for changes. As a result, the Associate Degree in Nursing had a reduction in the amount of SLOs from eleven to a more manageable and practical three which also aligned better with the ILOs.

Assessment Process



During the process of data analysis, the College self-identified a need to develop a better reporting system for tracking third party credentialing exam pass rates. While a previous report was in place, we needed to have a report that provided aggregate data that could be disaggregated into its constituent campuses, programs, and by date ranges as well as by various fields of attempt and graduation year. All College leaders and Program Directors have access to this new report that is in a common access point in Microsoft Power BI. Please see **Exhibit 6B.1** Third-Party Exam Pass Rates Tracker.

Carrington College has put an emphasis on the importance of student learning outcomes and has thus provided more training for faculty on what they are, why they are essential for measuring student learning and success, and how to track them. Program Academic Leadership (PAL) calls are conducted monthly to prepare new leaders to be fully effective in their role as well as to review SLOs and to identify opportunities for improvement. A Canvas course has been created to serve as a repository of information and resources that can be reviewed and accessed at any time including meeting minutes. Please see **Exhibit 6B.2** Feb 2022 PALS Meeting Minutes for the Veterinary Assisting and Veterinary Technology programs, and **Exhibit 6B.3** Nov 21 PALS Meetings Dental Hygiene, Physical Therapist Assistant, Respiratory Care, Surgical Technology, and Medical Radiography meeting minutes from November 2021.

Status:

Completed

What growth opportunities in the assessment process has the College identified to further refine its authentic culture of assessment?

Progress and Analysis

Assessment at the College is a multi-faceted and integrated process, with the purpose being to foster communication and collaboration among the College community

involving both internal and external stakeholders. For this process to be effective, we identified the need for real-time and historic data to be made widely available to the College community.

Program assessment data, including student learning outcome and achievement data, is now readily available within the College's student learning management system, Canvas, which is supported by the resource center in Power BI. Student learning outcome and achievement data is disaggregated by course, program, and location. The purpose of having real-time data is to allow the College to better identify the areas in need of improvement, make data-driven decisions, and allocate resources equitably. Additionally, at the end of 2021, a Curriculum Manager was hired to help improve the alignment and consistent tracking of all SLO data points as this was a gap previously identified. In addition, ILOs and PLOs were reviewed and aligned with appropriate assignments for each program. With proper alignment, we are better able to analyze outcome assessment data, which in turn has guided faculty training in the delivery of instruction as well as helping to identify and implement appropriate formative and summative assessment tools. Data will be evaluated on a quarterly basis and recorded by way of the Institutional Effectiveness Strategic Objective Matrix.

The College also solicits feedback from our graduates as well as our employers and partners in the field regarding the academic quality and rigor of our programs as well as the level of preparedness of our graduates to perform in their field of study at an entry level. During the recent Program Review and Programmatic Accreditation Reporting cycles it was observed that the process for dissemination and collection of graduate and employer surveys was not consistent and did not provide the return rate desired. In mid-2021, Dynamics 365 Customer Voice (a Microsoft product) was added to the College's cadre of web-based products. Dynamics 365 Customer Voice is a web-based program that allows the College to build real-time surveys and track specific metrics as defined by programmatic accreditor requirements for specific survey questions. College-wide training on the new process began in October 2021, and survey results were received shortly after. Program Directors and Campus Academic Deans are now able to export and analyze results in Excel for each program.

Please see **Exhibit 6B.4** Growth Opportunities Customer Voice Graduate Survey and **Exhibit 6B.5** Growth Opportunities Customer Voice Employer Survey. In the Fall of 2022, we developed a mechanism to disseminate the surveys electronically through our LMS for the non-degree programs.

Status:

In Progress. Data analysis to be performed by the end of 2023.

Provide examples where course, program, or service improvements have occurred based on outcomes assessment data.

Progress and Analysis

Student Learning Outcomes Assessment

As a result of our integrated planning process, student learning outcomes and achievement data analysis drive recommendations for improvement. The analysis originates within the Program Review process and/or the Governance Structure. For example, the Outcomes and Assessment Committee reviews student learning outcome data and maps for alignment so they can identify training opportunities for faculty regarding the assessment and improvement of student learning outcomes.

The College developed a project plan that began in 2019 and ended in 2021 with the goal of completing an SLO Map for all programs. The purpose behind the SLO Mapping was to provide a visible alignment of all CLOs to PLOs and PLOs to ILOs. The project began with the intent to complete 50% of the SLO maps in 2020 and to complete 100% by the end of 2021 by forming a partnership between the Deans of Curriculum and the Program Directors. Please see **Exhibit 6B.6** Academic Excellence Meeting to discuss the SLO Project, **Exhibit 6B.7** SLO Assessment Cycle, and **Exhibit 6B.8** SLO Map of Programs 2021.

One example of SLO analysis driving data-based decisions occurred within the Physical Therapist Assistant Program at the Mesa campus. In 2020 to 2021, the program completed an in-depth analysis of courses which included alignment with the SLOs within the technical phase of the program. This led to the identification of a learning gap in basic anatomy courses and adjustments were made to increase the rigor of these courses (i.e., weekly muscle quizzes). The courses were then tracked year-over-year, and it was deduced that these improvements yielded an increase in the PTA NPTE two-year pass rate to 86.96%, above the threshold of 85%. Please see **Exhibit 6B.9** FSBPT Free Basic Pass Rate Report – PTA Mesa Campus. Additionally, EOC data resulted in a recommendation to add text regarding nutrition to the Dental Hygiene course DH270. During the review of outcomes during the Program Review process, the Dental Hygiene (DH) Program Directors made the recommendation to incorporate the tracking tool, TalEval, into all four DH programs in order to better align with the recording, reporting, and consistency of student assessment data.

The College identified the need for a better clinical placement tracking mechanism and hired a Clinical Experience Manager to facilitate the process. The College has weekly meetings to discuss clinical site placement status and to collaborate on difficult placements or site procurement. The clinical tracker and meeting minutes are stored in an accessible College SharePoint location where all stakeholders can access and update as needed. These changes have improved the clinical site placement process and student experience.

Status:

In Progress. Expected completion by the end of 2023.

Program Academic Leadership Calls and Triage Calls

Progress and Analysis

In an effort to further support course, program, or service improvements based on outcomes assessment data, PALS (Program Academic Leadership) and Triage calls are held regularly to assess the data, share best practices, and develop improvement plans to enhance any at-risk outcomes. A Canvas course has been created in conjunction with the monthly calls to provide a repository of information and resources that can be accessed and utilized at any time with modules to include foundations and resources, meetings and schedules, supporting students, supporting faculty, and supporting the program. Please refer to PALS meeting minutes **Exhibit 6B.2** February 2022 PALS Meeting Minutes, **Exhibit 6B.10** April 2022 PALS Meeting Minutes, and **Exhibit 6B.11** March 2022 PALS Meeting Minutes.

Quarterly triage meetings consist of a robust conversation regarding student learning outcomes and retention rates, graduation rates, program completion rates, placement rates, student survey data (both end of course and student satisfaction surveys), and third-party licensure participation and pass rates. While reviewing these topics, leaders and program personnel identify trends or at-risk areas within the program and collaborate to create action plans for improvement. The programs are expected to provide analysis and action planning to address outcomes not meeting threshold. Program leaders are also expected to share best practices and methodologies where outcomes are meeting or exceeding that threshold.

During PALS and Triage Calls for the Veterinary Technology program, it was identified that the courses AS110 and AS111 had poor course completion rates. The poor course completion rates negatively impacted retention rates. The action plan was a Vet Tech Summit for all program leaders which includes Program Directors and Doctors of Veterinary Medicine, to thoroughly review the course content and make recommendations for changes. The Summit took place on March 9, 2022. The VT Summit topics discussed included the re-creation of testing banks for quizzes in term 1, implementing item writing workshops for faculty, best practices on retaining employees, and how to increase the level of communication to the campuses. Post VT Summit, the Administrative Team has kept in constant communication with the VT program regarding best practices to implement in the classroom, changes that are going on in the College, and updates on items that were discussed during the Summit. Please refer to meeting minutes from the VT Summit **Exhibit 6B.12** Vet Tech Summit Meeting Minutes.

Status:

In Progress.

Graduate and Employer Survey Process

Progress and Analysis

Data is collected from various stakeholders and analyzed to drive continuous improvement across the College. The College identified a gap with both the dissemination and collection of graduate and employer surveys during the annual reporting period for programmatic accreditors. Across the various programs, there were different processes for sending, receiving, and tracking surveys, and it became difficult for the College, as a whole, to monitor and track the number of surveys being sent and received. In addition, survey results were being housed at the campus level making it challenging to gain access to the data and to align results.

In mid-2021, Dynamics 365 Customer Voice (a Microsoft product) was added to the College's cadre of web-based products. Dynamics 365 Customer Voice is a web-based program that allows the College to build real-time surveys and track specific metrics as defined by programmatic accreditor requirements for specific survey questions. College-wide training on the new process began in October 2021, and survey results were received shortly after. Program Directors and Campus Academic Deans are now able to export and analyze results in Excel for each program.

In the Fall of 2022, we developed a mechanism to disseminate the surveys electronically through our LMS for the non-degree programs.

Status:

In Progress. Expected completion by the end of 2023.

End of Course Surveys

Progress and Analysis

Carrington College identified some inconsistencies in the distribution of the End of Course Surveys where there was a combination of the faculty advising students of what the end of course survey is as well as the importance of receiving feedback from students, and cases where the survey was never mentioned or activated via the Canvas course shell. Carrington College expects faculty to be involved in decision-making and planning by participating in College, campus, program, and course surveys and evaluations. At the end of each course, students will complete an evaluation of the course, faculty, and lab when appropriate. The faculty are required to grant student access to the survey during the last week of the course. Once the survey is enabled, they must inform their students to complete the survey.

Based on the results of the student survey, an action plan may be developed to improve the course, delivery of the information, or may be considered during Program Review.

Status:

In Progress. Expected completion by the end of 2023.

Third-Party Credentialing

Progress and Analysis

Third-Party Credentialing is an important student outcome not only to drive curriculum and program improvement, but also to lead to gainful employment. In order to verify accurate credentialing reporting, the process was transitioned to the Accreditation Team in April 2021. The team identified discrepancies in how data was reported throughout College channels including the academic scorecard, triage calls, etc. It was identified that the information was being reported on a quarterly basis versus on a monthly basis and trends were not identified in a timely manner. The College developed a new data source housed in Microsoft's Power BI.

The data source then generates reports in Power BI that can be accessed by stakeholders across the College to verify institutional and accreditor thresholds are being met.

Status:

Completed

Has the college achieved floor standards?

Progress and Analysis

Carrington College has performed a detailed assessment to determine an appropriate stretch goal for the currently established floor standards. Please see **Exhibit 6B.15** ISS Floor Standards and Stretch Goals for each institutional set standard (ISS). Please see **Table 6.B.1** Course Completion Rates below for a demonstration of the floor goals, aspirational goals and achieved course completion rate. For the academic years 2019-2020, 2020-2021, and 2021-2022, the College met its floor goals for Course Completion Rate and Job Placement Rate.

Course Completion Rates:

As reported in the 2021 ACCJC Annual Report, the overall course completion rate for the 2019-20 academic year exceeded both the floor stretch/aspirational goals by achieving a course completion rate of 86%. Please see **Exhibit 6B.13** ACCJC 2021 Annual Report.

As reported in the 2022 ACCJC Annual Report, the overall course completion rate for the 2020-21 academic year exceeded both the floor and stretch/aspirational goals by achieving a course completion rate of 86%. Please see **Exhibit 6B.14** ACCJC 2022 Annual Report.

As reported in the 2022 ACCJC Annual Report, the overall course completion rate for the 2020-21 academic year exceeded both the floor and stretch/aspirational goals by achieving a course completion rate of 87%. Please see **Exhibit 6B.14.22** ACCJC 2022

Institution Set Standards for Student Achievement

Table 6.B.1 Course Completion Rates 2019-2020, 2020-2021 & 2021-2022	2019-20	2020-21	2021-22
13. List your Institution-Set Standard (floor) for successful student course completion rate:	80%	80%	80%
13a. List your stretch goal (aspirational) for successful student course completion rate:	83%	83%	83%
13b. List the actual successful student course completion rate:	86%	86%	87%

Employment Job Placement Rates:

The overall job placement rate for the 2019-20 academic year was 67%, which exceeds the current College ISS floor and stretch goals of 50% and 55% respectively. The overall job placement rate for the 2020-21 academic year was 70%, which exceeds the current College ISS floor and stretch goals of 50% and 55% respectively. The overall job placement rate for the 2021-22 academic year was 72%, which exceeds the current College ISS floor and stretch goals of 50% and 55% respectively. For the individual programs that did not meet the 50% job placement rate floor goal, as part of the College's strategic plan, we will continue to create and strengthen our community partnerships that benefit our students, College, and communities. These added partnerships will provide added job opportunities for our graduates. Additionally, our Career Services team at each of our campuses work with every student on job-search strategies, job-market orientation, resume writing, and interviewing techniques. These services are available to all active students and all graduates of the College. Career Services is committed to helping graduates achieve their career goals by partnering with local employers to assist graduates in finding an entry-level position upon graduation. Many of our extern sites hire our graduates and this is something that the College will continue to foster as well.

Licensure Exam Pass Rates:

As submitted in the 2021 ACCJC Annual Report, the ISS floor standards for licensure examination pass rates for the 2019-20 academic year were met for all programs with the exception of three. As submitted in the 2022 ACCJC Annual Report, the ISS floor standards for licensure examination pass rates for the 2020-21 academic year were met for all programs with the exception of three. As submitted in the 2023 ACCJC Annual Report, the ISS floor standards for licensure examination pass rates for the 2021-22 academic year were met for all programs with the exception of six. All program exam

pass rates are monitored by the Academics Team, Program Directors, and Campus Directors to track both participation and pass rate trends for each program. For those programs that fall below threshold, a thorough assessment is conducted in order to determine trends and changes needed in the exam preparation process for students.

Licensure Examination Pass Rates 2019-20, 2020-21 and 2021-22

Program	Exam	Institution Set Standard*	2019-20	2020-21	2021-22
Dental Assisting (NOCTI)	State	62%	86%	86%	81%
Dental Assisting (RHS)	State	56%	63%	58%	52%
Dental Hygiene (CRDTS)	State	80%	93%	98%	97%
Dental Hygiene (NBDHE)	National	80%	92%	82%	74%
Dental Hygiene (WREB)	National	80%	92%	94%	97%
Massage Therapy (MBLEx)	National	52%	50%	59%	63%
Medical Assisting (CMA)	National	60%	51%	75%	N/A
Medical Assisting (RMA)	National	60%	70%	75%	N/A
Medical Assisting (CCMA)	National	60%	71%	66%	61%
Medical Billing & Coding (CBCS)	National	69%	69%	91%	80%
Medical Radiography (ARRT)	National	75%	82%	64%	73%
Pharmacy Technology (PTCE)	National	57%	70%	68%	53%
Physical Therapy Assistant (NPTE)	National	85%	95%	82%	83%
Practical/Vocational Nursing	National	80%	88%	84%	89%
Registered Nursing/Nursing Bridge	National	80%	82%	82%	81%
Respiratory Care (CSE)	National	40%	61%	91%	58%
Respiratory Care (TMC-HI)	National	70%	76%	89%	31%
Respiratory Care (TMC-Low)	National	80%	92%	81%	17%
Surgical Technology (CST)	National	70%	56%	50%	29%
Veterinary Technology (VTNE)	National	55%	59%	53%	47%

Has the college achieved its stretch (aspirational) goals?

Progress and Analysis

Course Completion Rates:

Carrington College has performed a detailed assessment to determine an appropriate stretch goal for the currently established floor goals. Please see **Exhibit 6B.15** ISS Floor Standard and Stretch Goals. As reported in the 2021 ACCJC Annual Report, the overall course completion rate for the 2019-20 academic year exceeded both the floor stretch/aspirational goals by achieving a course completion rate of 86%. Please see **Exhibit 6B.13** ACCJC 2021 Annual Report. As reported in the 2022 ACCJC Annual Report, the overall course completion rate for the 2020-21 academic year exceeded both the floor and stretch/aspirational goals by achieving a course completion rate of 86%. Please see **Exhibit 6B.14** ACCJC 2022 Annual Report. As reported in the 2022 ACCJC Annual Report, the overall course completion rate for the 2020-21 academic year exceeded both the floor and stretch/aspirational goals by achieving a course completion rate of 87%. Please see **Exhibit 6B.14.22** ACCJC 2022 Annual Report.

Institution Set Standards for Student Achievement

Course Completion Rates 2019-20 and 2020-21	2019-20	2020-21	2021-22
13. List your Institution-Set Standard (floor) for successful student course completion rate:	80%	80%	80%
13a. List your stretch goal (aspirational) for successful student course completion rate:	83%	83%	83%
13b. List the actual successful student course completion rate:	86%	86%	87%

Employment Job Placement Rates:

The overall job placement rate for the 2019-20 academic year was 67%, which exceeds the current College ISS floor and stretch goals of 50% and 55% respectively. The overall job placement rate for the 2020-21 academic year was 70%, which exceeds the current College ISS floor and stretch goals of 50% and 55% respectively. The overall job placement rate for the 2021-22 academic year was 72%, which exceeds the current College ISS floor and stretch goals of 50% and 55% respectively.

Employment Job Placement Rates 2019-20 and 2020-21	2019-20	2020-21	2021-22
Placement: In-field placement in a calendar year. (Institutional aggregate of annual placement rate)	50%	50%	50%
Floor goal:			
Stretch goal:	55%	55%	55%
Achieved:	67%	70%	72%

What initiative(s) is the college undertaking to improve its outcomes?

Progress and Analysis

Career Service Regionals meet with the Campus Directors and Career Service Advisors at each campus on a weekly basis to identify those programs that do not meet job placement benchmarks and continue outreach to students to determine if they are working in the field. Career Services teams at each of our campuses work with every student on job-search strategies, job-market orientation, resume writing, and interviewing techniques. Services are available to all active students and graduates. Career Services is committed to helping graduates achieve their career goals, by partnering with local employers to assist graduates in finding an entry-level position upon graduation. In response to a gap identified in the collection of assignments, time sheets and student clinical placement, the College developed a tracker and Clinical Tracking Meeting to discuss the status of clinical site procurement and student placement.

Integrated Planning and Student Learning Outcomes

As a part of the integrated planning process, student learning outcome and success data is analyzed. The student learning outcome (SLO) assessment is a continuous and ongoing process. The process begins with program faculty collaborating on reviewing, defining, planning, and mapping the curriculum. The Outcomes and Assessment

Committee reviews student learning outcome maps for alignment, and they assist in training faculty on the assessment of student learning outcomes.

The data is analyzed within the committee structure and Program Review process. Student Learning Outcome and success data is readily available within the College's data reporting systems. Student success data is disaggregated by course, program, and location. This became a more streamlined process with the launch of Canvas (the College's learning management system) in 2017. With Canvas, the College was able to incorporate an SLO tracker in which results are downloaded at the end of each course for analysis by the course instructor, and the data is readily available in the repository generated within Microsoft Power BI.

As noted above, as part of the recent Program Review process, it was discovered that many of the PLOs needed to be updated to better measure the goals of each program. With faculty participation, PLOs were rewritten by each program and then voted on by the Assessment and Outcomes Committee. Once approved they were attached to a more appropriate assessment tool for each program. We have just begun collecting data on these new outcomes and will require a few more cycles before determining whether or not other improvements will be necessary.

Status: In Progress. Expected completion by the end of 2023.

Strategic Plan

In early 2022, the College identified the need to update the College's integrated planning approach to include a more robust strategic plan for resource allocation and institutional changes that align with the mission, vision, and values of the College. Within these discussions, the SLT developed a more streamlined approach to the integrated plan by apportioning the plan into four distinct but interconnected areas: Strategic Plan, Education Master Plan, Facilities Plan, and Technology Plan. Executive Council owners were identified to oversee each strategic objective (Grow the College, Focus on Service Excellence, Drive Student Outcomes, Develop and Engaged Workforce). Each owner has been tasked with identifying trends to reach the College's threshold and stretch goals and will report to the SLT on a quarterly basis with an action plan if a threshold has not been achieved.

Governance Structure

The College's strategic planning is an integrated and interactive process that utilizes a college-wide Governance Structure to set priorities and benchmarks. The Governance Structure has been updated and revised to employ a data-driven process that engages its constituencies in order to foster and sustain student learning. Committees have been established across the College, each reporting to one of three areas focusing on college-wide excellence: Academic Excellence, Operations Excellence, and Administrative Excellence. Collectively, these areas report directly to the Executive Council, the President, and finally the Governing Board. Each committee is made up of

various members with diverse membership including at least one member specific to that area, a chairperson, and an executive owner (reporting area).

Program Advisory Committee

Carrington College takes many initiatives to improve its outcomes. One of those initiatives is through the Program Advisory Committees. Carrington College utilizes the Program Advisory Committee (PAC) meetings in order to have meaningful dialogue and feedback from those professionals and community members in the field. Each Carrington College campus hosts a Program Advisory Committee meeting biannually, usually one in the spring and the other in the fall. All faculty, including part-time or visiting instructors, are encouraged to become a PAC member. It is important to realize that as technology advances increase, and occupational patterns change, instructional programs must strive to reflect current practice. These changes require a joint effort of school and community to ensure the curriculum reflects up-to-date instructional methods and content.

Program Advisory Committee members will attend all meetings when regularly scheduled and take an active part in the evaluation of the instructional program. Members will help formulate recommendations for improving the program and outcomes that have been recommended through the biannual advisory committees are then brought forward through the College's Governance Structure or through Program Review in order to implement necessary changes in the program to keep up with industry standards.

Triage Calls

The purpose of the quarterly triage calls is to have a robust conversation regarding student learning outcomes such as retention rates, graduation rates, program completion rates, placement rates, student survey data (both end of course and student satisfaction surveys), and third-party licensure participation and pass rates. While reviewing these topics, program personnel will identify trends or at-risk areas within the program and collaborate to create action plans for continuous improvement. During the triage calls, often times program leaders will suggest modifications to be made within the program as part of their at-risk program assessment. These program modifications can either go through the Program Review process for review and approval if during the biannual cycle, or via the Governance Structure if in the off cycle of Program Review. This is a data-driven process that includes data analysis and monitoring of progress made toward achievement of the stated outcomes performance thresholds.

Third-Party Credentialing

Third-Party Credentialing is an important aspect of student outcomes not only to drive curriculum and Program Review, but also to lead to gainful employment. Third-Party credentialing is also a mechanism to compare the academic quality of our programs. The team identified discrepancies in how data was reported throughout College

channels including the academic scorecard, triage calls, etc. It was identified that the information was being reported on a quarterly basis versus a monthly basis as data became available. As a result, in some cases areas of underperformance or trends were not identified in a timely manner. In an effort to minimize the gap in reporting across the College, we streamlined the process across all applicable educational programs. The new system has been implemented and consists of a data entry point in Microsoft's Power BI system. The data source then generates reports in Power BI that can be accessed by stakeholders across the College to verify institutional and accreditor thresholds are being met. This change has yielded positive results across the landscape as both visibility into the data and the accuracy of the data have been increased significantly.

How does the College inform its constituents of this information? Evidence: Provide the most recent Annual Report used for this reflection.

Progress and Analysis

Carrington College informs its constituents in the undertaking to improve its outcomes by posting all accreditation and approvals on the College website www.carrington.edu and in the Academic Catalog <https://carrington.edu/catalog/>. The website also includes posting Annual Disclosures, State Board Annual Reports, California State Disclosures, School Performance Fact Sheets, and program credentialing data on an annual basis as required by select programmatic accreditors. This information is shared with campus leadership as well as program advisory committees and clinical partners. Chairs of the College's committee structure cascade the information to the committee members for discussion and analysis as needed to drive action planning. As supporting evidence, please see the most recent ACCJC Annual Report under **Exhibit 6B.14** ACCJC 2022 Annual Report.

Exhibits for the Reflection on Improving Institutional Performance:

Exhibit 6B.1 Third-Party Exam Pass Rates Tracker

Exhibit 6B.2 Feb 2022 PALS Meeting Minutes

Exhibit 6B.3 Nov 21 PALS Meetings

Exhibit 6B.4 Growth Opportunities Customer Voice Graduate Survey

Exhibit 6B.5 Growth Opportunities Customer Voice Employer Survey

Exhibit 6B.6 Academic Excellence Meeting

Exhibit 6B.7 SLO Assessment Cycle

Exhibit 6B.8 SLO Map of Programs 2021

Exhibit 6B.9 FSBPT Free Basic Pass Rate Report

Exhibit 6B.10 April 2022 PALS Meeting

Exhibit 6B.11 March 2022 PALS Meeting

Exhibit 6B.12 Vet Tech Summit Meeting Minutes

Exhibit 6B.13 ACCJC 2021 Annual Report

Exhibit 6B.14 ACCJC 2022 Annual Report

Exhibit 6B.15 ISS Floor Standards and Stretch Goals



6.C Carrington College Report on the outcomes of the Quality Focus Projects

Quality Focus Essay #1-Student Satisfaction:

Introduction

The bi-annual Student Satisfaction Survey is a college-wide initiative to ensure we accurately identify and address student concerns. Identification of student concerns allows the College to create and implement action plans at the campus, department, and program level. Depending on where a student is in their program of study, they receive an in-school or pre-graduate survey. All students receive the in-school survey, except those in their final term. Students in their final term receive the pre-graduate survey. The student satisfaction survey is sent to all students in 'active' status during the two-week data collection period. Once the survey has closed, the survey data is distributed to all leadership levels for analysis and action plan development.

In 2018, the Executive Council approved the following actions, and new questions were crafted. The following changes were implemented in 2019 based on this analysis: discontinue use of the Net Promoter Score, maintain one question on willingness to recommend Carrington College, create specific questions to Carrington College and address issues related to accreditation standards, , add assessment questions related to the Mission, Institutional Learning Outcomes (ILOs), facilities, safety, and security, and improve focus on rigor and quality, campus culture, summative feedback, and career outcomes. This revision resulted in a marked departure from the traditional survey questions.

In 2020, due to the impact of the COVID-19 pandemic, there were anomalies to the administration of the Student Satisfaction Survey. The pandemic response required a rapid transition from on-campus to a virtual learning environment. Many of the survey questions reflected on the 2020 survey related to the student's campus experience at the College. Carrington College complied with the Center for Disease Control guidance, limiting the student's ability to be present on campus. Due to this unforeseen transition, new and existing students could not adequately answer the survey questions; therefore, the Student Survey was paused. All efforts were focused on providing enhanced remote support for all impacted students and faculty. The questions utilized in the 2019 Student Survey were reviewed in 2021, and the language was adjusted to add clarity and to enhance the focus on data collection. While there were language updates to the survey questions, the College maintained utilizing two different versions for in-school and pre-graduate.

When the students returned to campus in 2021, the Student Satisfaction Survey process was relaunched. The Student Survey was administered in May and November

2021. In May of 2022, the Student Survey was once again administered, please see below for the results.

Survey Data

The bi-annual Student Survey utilized a 5-point Likert scale for all questions except for questions about licensure, which are yes/no questions and reported in percentages. The 5-point scale is as follows: “Please rate the following statements on a scale of 1-5, 1) Strongly disagree; (2) Disagree; (3) Neither agree nor disagree; (4) Agree; (5) Strongly agree.”

To aid in data analysis, the questions were grouped into themes for both survey versions. The data in the chart below illustrates the themes and the respective college-wide results. Appendices A – D include a detailed description of the question grouping for each year and the survey version.

In-School Survey

Theme	May 2019	Nov 2019	May 2021	Nov 2021	May 2022
Recommendation	4.01	3.90	4.11	4.04	4.00
Recognition	4.18	4.13	4.06	4.05	4.02
Website	3.93	3.80	4.06	4.02	3.96
Academics	4.21	4.23	4.29	4.28	4.26
Service Area	3.67	3.65	4.11	4.04	4.03
Learning Resources	4.00	4.00	3.99	4.09	4.05
Security	4.22	4.16	4.33	4.31	4.26

Pre-Grad Survey

Theme	May 2019	Nov 2019	May 2021	Nov 2021	May 2022
Recommendation	3.49	3.59	3.99	4.08	4.06
Mission	2.92	3.01	4.10	4.20	4.15
Career Training Preparation	3.63	3.72	4.03	4.12	4.09
Program Director/Dean of Nursing	3.65	3.87	4.15	4.17	4.12
Experience at Carrington College	4.01	4.18	4.18	4.25	4.24
Licensure	87.5% yes	90.1% yes	91% yes	83% yes	86% yes
Preparation	3.38	3.3	4.28	4.36	4.27

The information above is college-wide aggregate data reported in Power BI. Power BI is a system in which all colleagues have access to analyze data. Using Power BI, data can

be focused on campus and programmatic levels. Prior to using Power BI, the data was difficult to distribute and access for all colleagues.

Data Analysis – Summary

Looking across all data from May 2019 to November 2021, there has been a steady improvement in most areas. While a slight decrease is noted from November 2021 to May 2022, there were approximately 500 more participants in May 2022 which could account for the change. During the November 2021 Student Survey, a defective survey link caused a portion of the data collected to truncate the campus and program identifiers. Likely this contributed to the 3% drop in overall participation from May 2021 to November 2021. May 2022 saw a 2% increase in participation from the November 2021 Student Survey data.

Looking at the institutional strategic objectives of the College outlined in the Education Master Plan, a positive trend is that the College has exceeded the established thresholds in all categories for three consecutive surveys. The stretch goal was also achieved for the third consecutive survey in every category with exception of the overall participation. The participation rate over the past three surveys ranged from 61-64%, which exceeds the threshold; however, it is shy of the stretch goal. Please see **Exhibit QFE.1-1** Threshold and Stretch Goals – Service to Students

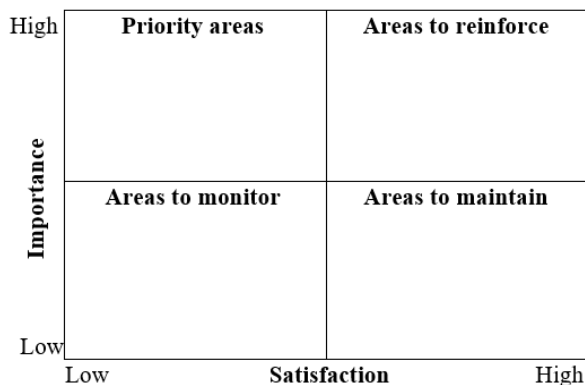
In reviewing the data, student recognition is one area where we have a downward trend, and we see a 0.16 loss from May 2019 to May 2022. To address this concern, Registrar Services has re-instituted the 'Presidents' and 'Deans' lists. Through our Governance Structure, the Student Records Committee reviewed and voted on the standardization of this process. The approved process was implemented across all campuses and provided students recognition for their academic achievements at the end of each term and recognition during the commencement ceremony. Questions surrounding academic satisfaction have seen steady improvement in student satisfaction over the past two years. While there was a drop of 0.02 from the Fall of 2021 to the Spring of 2022, the increase in participants likely indicates no significant growth or decline has occurred. With this rating, maintenance of the academic services provided should be the focus. The response to the pandemic by staff and instructors, as well as the approvals for blended instruction, appear to have been well received by students. Ancillary data indicates students enjoy the flexibility of the virtual and on-campus environment, which reflects that the shift in the instructional delivery method has not had a negative impact on student satisfaction. Courses delivered in the blended modality allow students to experience both in-person and online instruction. Students can utilize simulations, case studies, and other virtual interaction tools to enhance skills in a safe environment.

Action Plans – Campus Specific

The Student Satisfaction Survey results are released to the Campus Leadership Team, Program Directors, and all staff and instructors for the creation of individualized action plans. With the unexpected challenges of 2020, the data from May 2021 was used to create campus or program specific action plans and was integrated into the review for

improvements along with the November 2021 and May 2022 survey results. The following matrix was provided to campuses to visually represent areas where they should prioritize, reinforce, maintain, and monitor.

Template



Accompanying the visual, campuses were given the chart below to complete for each area in which the student satisfaction score was below the stretch goal threshold of 3.75. The Institutional Strategic Objective thresholds were used as a baseline for the creation of the action plans to provide a common starting point which aligns with the College's strategic objectives. Campuses held program, service area, and campus-wide meetings to develop plans to address any needed areas.

Template

Identified Concern	Rational for Improvement	Plan for Improvement	How is Improvement Measured?	Implementation Timeline	Owner(s)

Please reference **Exhibit QFE.1-2** Campus Action Plan and **Exhibit QFE.1-3** Program Action Plan for examples that illustrate the differences in campus and program specific action planning and the utilization of available resources.

Using the May 2021 data, the Albuquerque Medical Assisting (MA) program identified that student recognition scored low and needed to be addressed. Utilizing the action plan template, an action plan was created. Before the action plan was created, the May 2021 score was 3.63. In the Fall of 2021, an increase in satisfaction with recognition was achieved with an increased score of 4.03. The Spring 2022 Student Survey

reflected another increase to 4.09, illustrating that the implemented action plan contributed to increased satisfaction related to student recognition. Please see **Exhibit QFE.1-4** ABQ MA Detailed Plan.

The Reno Associate Degree of Nursing survey results reflected student satisfaction was low in the area of ‘timely responses.’ In response, the faculty created an action plan which implemented a standard operating procedure to ‘email within 48 hours or next academic day in the event of a holiday. Additionally, a review of the Faculty Handbook to reinforce existing deadlines when communicating to students was implemented. The implementation of the plan resulted in a slight increase in student satisfaction from 3.55 to 3.82 between May and November of 2021. This positive trend continued with a score of 3.85 in the Spring of 2022. Please see **Exhibit QFE.1-5** Reno RN Detailed Plan.

In response to the May 2021 data, the Sacramento Dental Assisting (DA) program noted that overall student recommendation of the College was 4.13. Utilizing the action plan template, the DA program developed an action plan to impact students’ recommendation of Carrington College. After completion and realization of the plan, the Fall 2021 survey saw an increase in the recommendation score to 4.21. The Spring 2022 survey noted another increase to 4.28. Along with the increase in the recommendation score, the number of participants in the survey also increased, which is another positive sign that the actions taken by the Sacramento DA program positively affected the students’ perception of the College. Please see **Exhibit QFE.1-6** SAC DA Detailed Plan.

Future Survey Plans

Planning for the administration of upcoming surveys has begun. A test group was identified to address the technical glitch from November 2021, and the survey was tested before college-wide distribution. Upon completion of the test, all necessary corrections were made, and the May 2022 survey was successfully administered. The process of reviewing the survey before distribution will be replicated in all future surveys.

The Student Satisfaction Survey will continue to be administered twice a year. The survey questions will be reviewed and updated prior to the release of the survey, as needed. To ensure survey data is consistent from 2021 and 2022, there are no plans to adjust any questions. After the survey is completed in Fall 2022, the survey will be reviewed, and the questions will likely be updated for 2023. The collected student data will be reviewed to identify trends across campuses, programs, and the College. Follow up with students in ways such as student focus groups will be incorporated into our plans for continuous improvement. Consistent with previous surveys, at the close of each survey, action plans will be created to identify best practices across the College for improvement in the development and delivery of quality instruction.

Status:

In Progress. Expected completion by the end of 2023.

Exhibits for the Quality Focus Essay #1:

Exhibit QFE.1-1 Threshold and Stretch Goals-Service to Students

Exhibit QFE.1-2 Campus Action Plan

Exhibit QFE.1-3 Program Action Plan

Exhibit QFE.1-4 ABQ MA Detailed Plan

Exhibit QFE.1-5 Reno RN Detailed Plan

Exhibit QFE.1-6 SAC DA Detailed Plan

Quality Focus Essay #2-Student Learning Outcomes:

Introduction

During the process of completing the 2019 Institutional Self-Evaluation Report (ISER), Carrington College's Quality Focus Essay (QFE) was developed. The QFE provides Carrington College the opportunity to evaluate and identify areas for improvement in student learning outcomes and achievement.

During the process of writing the 2019 ISER for reaffirmation of accreditation, Carrington College evaluated several student learning and achievement data points. After careful evaluation, Carrington College decided to move forward with the Veterinary Technology (VT) program's Veterinary Technician National Exam (VTNE) first-time pass rates as a student learning and achievement area in need of improvement.

As a part of the Integrated Planning process, student learning outcomes and achievement data is analyzed on a continuous and ongoing basis, but formally on an annual basis. The data is measured against Institutional Set Standards (ISS) and Programmatic Accreditor Standards, in this case the American Veterinary Medical Association (AVMA). The College's ISS for VTNE first-time pass rate is 55%. The AVMA's standard for VTNE first-time pass rates is a three-year rolling average of 50% or higher.

The VT VTNE first-time pass rates, the data at the center of the QFE, is intended to be analyzed in a more comprehensive manner as part of this project. In addition to analyzing the VTNE first-time pass rates, the curriculum, student learning outcome mastery, instructional delivery, and course completion will be analyzed. The aim of the more comprehensive analysis is to develop an action plan that produces a positive impact on the VT VTNE first-time pass rates. Ultimately, the goal would be to produce an analysis and action plan development process that could be extended to other programs across the College.

Although the cumulative yearly and three-year average for the VTNE first-time pass rates are meeting standards, review of the data has revealed inconsistent and sub-standard performance across the different locations from year to year. For example, San Leandro's pass rates have gone from exceeding the standard to below the standard back to exceeding the standard and back to below the standard.

Purpose

The purpose of this project over a five-year span is two-fold. First, this project aims to identify risks and opportunities related to successful student learning and achievement, specifically on the VTNE. Second, this project aims to identify the necessary resources needed to support successful student learning and achievement on the VTNE.

First time pass rate by program

	2019	2020	2021	2022	2019-2021 3yr avg	2020-2022 3yr avg
Pleasant Hill	53%	71%	61%	54%	62%	62%
Sacramento	62%	63%	38%	46%	54%	49%
San Jose	84%	71%	69%	71%	75%	71%
San Leandro	75%	35%	60%	38%	57%	44%
Stockton	52%	32%	48%	67%	44%	49%
College:	65%	54%	55%	55%	58%	55%

Desired Outcomes

The College anticipates that this QFE project will have a positive impact on student learning and achievement and institutional effectiveness by achieving the following desired outcomes:

1. Re-develop the VT curriculum, structured in hierarchical manner, which includes general education science courses that create a foundation for student success by 2021.
2. VTNE first-time pass rates will meet or exceed the ISS and the AVMA three-year rolling average benchmark.
3. Create a VTNE preparatory review process for graduates across all programs.
4. Create faculty instructional delivery training program by 2023.
5. This project will create an analysis and action planning process that could be used across the institution for student learning and achievement success by 2024.

Please see **Exhibit QFE.2-1** QFE Activities and Timeline.

In 2020, the quarterly VT VTNE triage meetings began. The team included the Program Directors (PDs) from all locations, the Vice Provost, the Senior Dean of Regulatory

Affairs, and the assigned Assistant Dean of Accreditation. The agenda for the triage meetings included discussion of current student learning and achievement data, strengths, and gaps.

A few recommendations that were implemented came out of these meetings including paying for graduates VTNE, informing students during new student orientation of the importance of VTNE testing, and graduate outreach for VTNE preparation sessions. Although these recommendations were important to student success, the reasons for the inconsistent performance on the VTNE were still unknown. It was determined that further data points needed to be analyzed and that the Outcomes and Assessment Committee would drive the analysis and action planning for this project.

The Outcomes and Assessment Committee began analyzing data for this project in 2021. The data points they reviewed were retention rates, course completion rates, faculty expertise, faculty turnover, faculty length of employment, student learning outcome (SLO) mastery, program resources, course scheduling, and VTNE pass rates. Retention rates, course completion rates, and SLO mastery data points remained level from 2020 to 2022. The committee's analysis indicates that these data points do not seem to have an impact on the inconsistent performance on the VTNE. The subject matter expertise of the faculty does not appear to be a causal reason either. Their subject matter expertise meets the depth and breadth of the content areas on the VTNE.

The analysis did reveal a few possible causes of the inconsistent performance on the VTNE. After analysis of the program resources, a gap in time was identified for the VetTech Prep resource. The VetTech Prep resource was being utilized in the last term and would expire at the end of that term, so that caused a gap where the students did not have the resource from the time they graduated until they tested. The committee recommended that the subscription time be extended from 90 days to 180 days to cover this gap and allow graduates to have access to this resource while preparing for the VTNE. In addition to extending access to this preparatory resource, the committee recommended that graduates would benefit from structured review sessions post-graduation. The review sessions were structured based on the VTNE content areas. The sessions are held virtually for all program locations and facilitated by a faculty member based on their subject matter expertise. The review sessions were implemented in Q3 of 2021.

The VT curriculum was redeveloped and fully launched in 2021. This project was the recommendation of a VT Program Review. The curriculum was redeveloped by the faculty to better align with contemporary standards and improve student learning and achievement data. As a result of this redevelopment, the VT Program Directors and the Outcomes and Assessment Committee determined that faculty could

use item writing development. An item writing workshop was created and provided to VT faculty in early 2021. Please see **Exhibit QFE.2-2** Item Writing Workshop. The feedback received was that the workshop was very valuable to their development and that the workshop should be given to other programs across the institution.

As a result of the pandemic, the VT program locations experienced many changes in program leadership and faculty. The College determined there was a need to gather the Program Directors together and provide development training in the areas of instructional rigor, item writing, and management of ratios. The goal of this training was to positively impact the Program Directors' skills in providing training in these areas to their faculty. During the training session, student learning and achievement data was reviewed. The scheduling of first term courses was identified as a possible gap due to the student workload in the first term. Modifications were made to the course scheduling to allow for a more balanced student workload to have a positive impact on student learning.

Another gap that was identified because of the changes in faculty is the amount of instructional experience of the faculty. A large percentage of the VT faculty have under a year of experience in the classroom with Carrington College. In order to address this gap, each VT course is going to have a course map developed. The course map is going to include a weekly breakdown of topics, course learning outcomes, assignments, assessments, and skills. Following completion of the course maps, course specific instructional delivery training calls will be held for those faculty who teach the course. The aim of the instructional delivery training calls is to positively impact the student experience through enhancing the faculty members' instructional delivery skills and ultimately improving the student learning outcomes and achievement data.

The action plan is a Vet Tech Summit for all program leaders, which includes Program Directors and Doctors of Veterinary Medicine, to thoroughly review the course content and make recommendations for changes. The Summit took place on March 9, 2022. The VT Summit topics discussed included the re-creation of testing banks for quizzes in term 1, implementing item writing workshops for faculty, best practices on retaining employees, and how to increase the level of communication to the campus. Post VT Summit, the Administrative Team has kept in constant communication with the VT program regarding best practices to implement in the classroom, changes that are going on in the College, and updates on items that were discussed during the Summit. Please refer to meeting minutes from the VT Summit **Exhibit QFE.2-3** VT Summit Meeting Minutes.

Exhibits for the Quality Focus Essay #2:

Exhibit QFE.2-1 QFE Activities and Timeline

Exhibit QFE.2-2 Item Writing Workshop

Exhibit QFE.2-3 VT Summit Meeting Minutes



6.D Carrington College Fiscal Reporting

Midterm Report Response:

The College has in place an integrated system of reviewing, planning, and budgeting to ensure resources are focused on achieving its Mission and fostering continuous improvement.

The College Integrated Planning Process is conducted primarily through college-wide committees and campus committees. During the College Annual Planning process, committees meet to review past outcomes and to make recommendations for the upcoming year. Dialogue and decisions are guided by learning outcomes and achievement data. Please see **Exhibit 6D-1** Carrington College Fiscal Report 2022 for the most recent Annual Fiscal Report.

Exhibits for 6D Carrington College Fiscal Reporting:

Exhibit 6D-1 Carrington College Fiscal Report 2022



7 Exhibits

Exhibit IP.IB1-1 Program Review Canvas Course Shell Overview 2020

Exhibit IP.IB1-2 April 21 Canvas PR

Exhibit IP.IB1-3 Attendance Roster General Education Program Review

Exhibit IP.IB1-4 Screenshots of DA Program Review Course Shell

Exhibit IP.IB1-5 PR Assessment Planning Matrix DH 2022

Exhibit IP.IB1-6 Program Review Executive Summary Dental Hygiene 2022

Exhibit IP.IB1-7 Resource Allocation Rubric DH 2022

Exhibit IP.IB6-IC2.4.5.6-1 Catalog Area of Responsibility Chart

Exhibit IP.IB6-IC2.4.5.6-2 Pre and Post Catalog Flowchart

Exhibit IP.IB6-IC2.4.5.6-3 Catalog Review and Publish Process Flowchart

Exhibit IP.IB6-IC2.4.5.6-4 CoARC Required Updates to College Website

Exhibit IP.IB6-IC2.4.5.6-5 Academic Catalog Page 133 Respiratory Care Technical Standards

Exhibit IP.IB6-IC2.4.5.6-6 CAPTE Required Updates to College Website

Exhibit IP.IB6-IC2.4.5.6-7 Student Survey Results

Exhibit IP.IC9-1 DH-PR Assessment Planning Matrix

Exhibit IP.IC9-2 DH-Resource Allocation Rubric 2022 calibration typodonts

Exhibit IP.IC9-3 DH-Executive Summary

Exhibit IP.IC9-4 DH-SAC EOD DH400 Student Comments

Exhibit IP.IC9-5 Instructor Obs 2021

Exhibit IP.IC9-6 Instructor Obs May to Oct 2022

Exhibit IP.IIA2-1 Power BI data

Exhibit IP.IIA2-2 eLEO Dashboard DA

Exhibit IP.IIA2-3 PALS Meeting Invites

Exhibit IP.IIA2-4 PALS Meeting minutes 12.20.21

Exhibit IP.IIA2-5 Power BI Instructor Observation

Exhibit IP.IIA2-6 IO 1.1.22 to 9.20.22 detail

Exhibit IP.IIA3-1 Learning Outcomes 2020

Exhibit IP.IIA3-2 Learning Outcomes 2021

Exhibit IP.IIA3-3 Assessment and Outcomes Minutes

Exhibit IP.IIA3-4 Assessment and Outcomes Minutes

Exhibit IP.IIA3-5 Assessment and Outcomes Minutes

Exhibit IP.IIA3-6 Canvas Course Shell

Exhibit IP.IIA3-7 Faculty In-Service new SLO Format

Exhibit IP.IIA3-8 Power BI SLOs 2020-2022 Overview

Exhibit IP.IIA11-1 Catalog Updates ILO Comparison
Exhibit IP.IIA11-2 Integrated Planning Committee Meeting Minutes
Exhibit IP.IIA11-3 Aligned IO and EOC 2022
Exhibit IP.IIA11-4 2022 Education Master Plan ILO
Exhibit IP.IIA11-5 Assessment and Outcomes Minutes
Exhibit IP.IIA11-6 Assessment and Outcomes Minutes
Exhibit IP.IIA11-7 Assessment and Outcomes Minutes

Exhibit IP.IIIA14-1 ARCSTSA SVT Attendee PPT
Exhibit IP.IIIA14-2 AAVSB VTNE AVTE
Exhibit IP.IIIA14-3, **IP.IIIA14-4** and **IP.IIIA14-5** 2021 AVTE Conference
Exhibit IP.IIIA14-6 Confirmation of Registration MAERB Workshop
Exhibit IP.IIIA14-7 Screenshot of Webinar/Conference Repository
Exhibit IP.IIIA14-8 Conferences Attended and Scheduled
Exhibit IP.IIIA14-9 Prof Dev Fund Request

Exhibit IP.IIIC1-1 Technology Plan
Exhibit IP.IIIC1-2 Survey Results
Exhibit IP.IIIC1-3 Living Security screenshot

Exhibit IP.IIID5-1 Resource Allocation Rubric

Exhibit 6A.Rec1-1 Academic Excellence Meeting to discuss the SLO Project
Exhibit 6A.Rec1-2 SLO Assessment Cycle
Exhibit 6A.Rec1-3 SLO Map of Programs 2021
Exhibit 6A.Rec1-4 Course Map VN101
Exhibit 6A.Rec1-5 PLO Update Examples
Exhibit 6A.Rec1-6 FSBPT Free Basic Pass Rate Report – PTA Mesa Campus

Exhibit 6A.Rec3-1 Carrington College Strategic Plan 2022-2027
Exhibit 6A.Rec3-2 Committee Structure
Exhibit 6A.Rec3-3 Committee Membership
Exhibit 6A.Rec3-4 Mission Statement Rubric
Exhibit 6A.Rec3-5 Accreditation Committee Meeting Minutes
Exhibit 6A.Rec3-6 Governing Board Meeting Minutes
Exhibit 6A.Rec3-7 Process for Review of the Mission Statement
Exhibit 6A.Rec3-8 VT Executive Summary Report 2021
Exhibit 6A.Rec3-9 Quarterly email-College President
Exhibit 6A.Rec3-10 Assessment and Outcomes Meeting Minutes

Exhibit 6B.1 Third-Party Exam Pass Rates Tracker
Exhibit 6B.2 Feb 2022 PALs Meeting Minutes
Exhibit 6B.3 Nov 21 PALS Meetings
Exhibit 6B.4 Growth Opportunities Customer Voice Graduate Survey
Exhibit 6B.5 Growth Opportunities Customer Voice Employer Survey

Exhibit 6B.6 Academic Excellence Meeting
Exhibit 6B.7 SLO Assessment Cycle
Exhibit 6B.8 SLO Map of Programs 2021
Exhibit 6B.9 FSBPT Free Basic Pass Rate Report – PTA Mesa Campus
Exhibit 6B.10 April 2022 PALS Meeting
Exhibit 6B.11 March 2022 PALS Meeting
Exhibit 6B.12 Vet Tech Summit Meeting Minutes
Exhibit 6B.13 ACCJC 2021 Annual Report
Exhibit 6B.14 ACCJC 2022 Annual Report
Exhibit 6B.15 ISS Floor Standards and Stretch Goals

Exhibit QFE.1-1 Threshold and Stretch Goals-Service to Students
Exhibit QFE.1-2 Campus Action Plan
Exhibit QFE.1-3 Program Action Plan
Exhibit QFE.1-4 ABQ MA Detailed Plan
Exhibit QFE.1-5 Reno RN Detailed Plan
Exhibit QFE.1-6 SAC DA Detailed Plan

Exhibit QFE.2-1 QFE Activities and Timeline
Exhibit QFE.2-2 Item Writing Workshop
Exhibit QFE.2-3 VT Summit Meeting Minutes

Exhibit 6D-1 Carrington College Fiscal Report 2022