



Referral Report for the Committee on Fifth-Year Interim Reports

Prepared by Matt Cardin
VP of Accreditation and Institutional Effectiveness + Accreditation Liaison
mcardin@rangercollege.edu
254.267.7038
Ranger College
1100 College Circle
Ranger, Texas 76470

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Standard 5.4: (Qualified administrative/academic officers)

This standard expects an institution to employ administrative and academic officers with appropriate experience and qualifications to lead the institution. Further, this standard expects an institution to evaluate those administrative and academic officers regularly.

COMMITTEE FINDING:

The narrative and exhibits provided did not demonstrate that the institution regularly evaluated administrative and academic officers.

INSTITUTIONAL RESPONSE:

When Ranger College's fifth-year interim report was submitted in 2018, the College was in process of transitioning to a new system of conducting employee evaluations. The system had not yet been through an annual cycle, and thus there existed no evidence in the form of completed evaluations to demonstrate the effective use of the process. The 2018-2019 evaluation cycle has now been completed, and three examples of completed evaluations of administrative and/or academic officers are attached to show the process in action, with specific details redacted to protect employee privacy.

- [Example 1](#)
- [Example 2](#)
- [Example 3](#)

As described in the College's original narrative response to Standard 5.4, the new process divides employees into new hires and established employees, with a more detailed evaluation required for the former group. Both sets of employees participate in the setting of professional goals for themselves under the direction of their supervisor, with mid-year and end-of-year conferences being used to reflect on successful or unsuccessful achievement of these goals. New employees (those who have been with the College less than three years), as well as established employees who received a poor review the previous year, are required to undergo a more thorough "traditional" evaluation. The example evaluations above include two for established employees and one for a new employee (with all three being academic or administrative officers), so that both types and levels of evaluation are represented. In one case, the employee chose not to fill out the goal-setting sheet by hand but instead appended a typed and printed version.

One important lesson emerging from this first annual cycle is that RC needs to invest more time and attention in training supervisors and other employees to use the new system, including both its documentation and its overall intent. In particular, more training is needed in how to set SMART goals and how to hold a truly worthwhile evaluation conference. At least one high-level supervisor gravitated back toward the former evaluation process, which was almost wholly paper-based and lacking an element of human interaction and real guidance to help supervisees reflect on their past year's performance and the new year's opportunities for growth. This is already being taken into account by the institution as the new academic year dawns. The Human Resources director recently reviewed the

new evaluation system at an [Administrative Council meeting](#), and professional development training has been scheduled to ensure that the system is deployed effectively across the board.

CR 8.1 (Student achievement)

This standard expects an institution to identify, evaluate, and publish goals and outcomes for student achievement appropriate to the institution's mission, the nature of the students it serves, and the kinds of programs offered. Further, this standard expects an institution to use multiple measures to document student success.

COMMITTEE FINDING:

The institution listed two publications in which it reported on goals and outcomes for student achievement—the institutional resume and the annual accountability report. However, based on review by the Committee, neither of those publications included the goals (target levels of performance) that the institution has established for its success metrics. The institution should provide evidence that those goals are published.

INSTITUTIONAL RESPONSE:

RC's goals and outcomes for student achievement are published in its Strategic Plan 2018-2021, which is available on the College's website as a right-hand menu link on the [About Us page](#) (see the very bottom of the link list), thus placing it two clicks away from the site's homepage at www.rangercollege.edu. As previously stated and documented in RC's fifth-year compliance certification, Goal 2 of the Strategic Plan focuses on student success, with Outcomes 2.2 and 2.7 serving as the official institutional statements that establish RC's success metrics for student success. Additionally, a subset of webpages on the main site is currently in development to focus on accreditation and institutional effectiveness. These pages will be published in October 2019, and they, too, will present RC's student success goals, along with longitudinal data that tracks the College's progress in achieving them.

Standard 8.2.a (Student outcomes: educational programs)

This standard expects an institution to identify expected student learning outcomes, assess the extent to which it achieves those outcomes, and provide evidence of seeking improvement based on analysis of the results for each of its educational programs.

COMMITTEE FINDING:

Based on the Committee's review, the institution has recently adopted a new approach to educational program assessment. Provided assessment reports from the 2015-2017 years indicated inconsistency in the quality of assessment practice across divisions and programs and provided no clear evidence of seeking improvements in student learning through the use of assessment results. The new assessment approach has not yet been in place long enough to demonstrate whether these issues have been

resolved. The institution should provide evidence that each of its educational programs has identified expected outcomes, has assessed the extent to which it has achieved its outcomes, and has provided evidence of seeking improvement based on analysis of results.

INSTITUTIONAL RESPONSE:

Ranger College reached the end of the first annual deployment of its new PLO assessment system in August 2019. Sample results are here attached from various programs in AY 2018-2019, both academic and workforce, to demonstrate that the system is indeed operational and producing valuable data, and that RC is both “closing the loop” by acting on the data and paying attention to the workings of the system itself in an effort to continue improving and optimizing it.

- AY 2018-2019 PLO Reports: Associate of Arts and Associate of Science
 - [Humanities Division](#)
 - [Social/Behavioral Sciences Division](#)
 - [Mathematics Division](#)
 - [Science Division](#)
 - [AA/AS Cross-Sectional Report](#)
- 2018-2019 PLO Reports: Workforce
 - [Cosmetology](#)
 - [Welding](#)
 - [Nursing](#)

Significantly, this initial “run” of the new system uncovered important information related not only to the achievement of program learning outcomes but to the use of the new assessment system itself. For instance, it identified the need for more centralized coordination of the science division’s assessment activities for the purpose of producing valid data (something noted and described in the science division report). It also brought to light the need for greater centralized coordination from the Office of Accreditation and Institutional Effectiveness, which oversees assessment activities, to ensure that assessment efforts encompass sufficient numbers of the college’s dual credit, ITV, and online course sections to produce useful comparisons between these and its face-to-face and regular college course sections.

About the AA/AS Reports: The four division-level reports for the AA and AS degrees show that separate rounds of assessment were conducted in Fall 2018 and Spring 2019, and that the organization of the different elements of the assessment process (Goals, Objective, Measures, Targets, etc.) was handled differently in the spring than in the fall. The fall run was an initial effort, and the revisions in the recording of the data in the spring assessments were the result of meetings and discussions between the academic Division Chairs and the VP of Accreditation and Institutional Effectiveness. The approach adopted in Spring 2019 is much more logical and effective with its hierarchical organization of the different elements, which shifts everything “up” one level in the hierarchy from the previous semester’s approach.

Also note that the Cross-Sectional Report has been greatly helpful to the academic divisions, as it presents numerous bar charts that analyze the AA/AS assessment efforts according to such factors as

distribution of assessments by division, location, course delivery method, PLO number, etc., and PLO performance by division, PLO number, location, instructor type, course type, course delivery method, and more. Insights arising from this report include the fact that, as already stated, greater oversight of collective academic assessment activities is needed in order to ensure that all PLOs receive equal emphasis and coverage, and that all divisions make sure to distribute their assessment activities effectively to capture information pertinent to location, course type, and so on. This is especially pertinent for an institution like RC with its very large population of dual credit students and a growing number of online students; PLO assessments must necessarily target dual credit and online course sections to ensure that learning outcomes are being achieved for these students as well as regular college students. Additional lessons learned and actions implemented based on 2018-2019 PLO assessment results for the AA/AS program are laid out in the respective reports. In the future, the four academic divisions will be reported in a single, unified PLO report, with each division focusing exclusively on tightly pre-specified PLOs in order to avoid the relative lopsidedness seen in the current report, which shows a great deal of coverage given to some PLOs and relatively little to others.

After having compressed this first assessment cycle into a single academic year for the purpose of obtaining a complete set of results to serve as a baseline and a learning opportunity, RC is now transitioning to a [two-year cycle](#) of assessing PLOs for its Associate of Arts and Associate of Science programs.

About the Welding Report. For this first round of assessing the welding PLOs, the assessments were conducted exclusively at RC's Erath County Center, where the Coordinator of the Welding Programs is based. Three of the ten welding PLOs were assessed as a trial run of the new system. In addition to producing the necessary PLO data, this effort yielded various lessons about the assessment process itself. These are laid out in the report, and they are currently informing work that is underway— involving the VP of Accreditation and IE, the Director of Dual Credit Enrollment Programs, the Dual Credit Welding Liaison, and the Coordinator of Welding Programs—to expand the scope of learning outcomes assessment to encompass the Ranger campus and the dual credit schools where the College offers its Level I Welding Certificate. Note that, given the recursive nature of the instruction that takes place in RC's two welding certificate programs and AAS program, multiple courses can legitimately be designated and as sites of assessment for a given PLO, with the actual course or courses to be used for this purpose varying from assessment cycle to assessment cycle depending on the interaction of the assessment cycle calendar with available course schedules. The curriculum map included as an attachment in the report identifies the courses that have been designated as assessment sites for each PLO, and the text of the report identifies which courses were used to assess the three PLOs addressed in the most recent phase of the current assessment cycle.

Also, and significantly, RC recently hired someone to serve as the first Division Chair for Workforce Programs, and this individual will play a central role in overseeing PLO assessment activities for welding and helping to ensure that they comprehensively cover the full scope of RC's activities in this area.

During AY 2019-2020, RC's welding programs will assess all ten welding PLOs.

About the Cosmetology Report. As described in the College's Fifth-Year Interim Report, the Cosmetology Operator and Cosmetology Instructor programs were among the few instructional

programs at RC where learning outcomes assessment was legitimately functional during the past several years. However, improvements were still possible, and cosmetology has now been enfolded into the newly developed PLO assessment system. To begin with, the Coordinator for Cosmetology Programs, working with her chief instructor, revised the [PLOs for both programs](#) (Cosmetology Operator and Cosmetology Instructor). Additionally, the curriculum map was revised as a more careful targeting of assessments was conducted. The attached report represents the fruit of these efforts. It also represents the first time that cosmetology PLO assessments have been recorded in Weave, thus bringing the general approach and format into line with that of other programs. Intensive professional development was conducted for the cosmetology department by the VP of Accreditation and IE to ensure that both the Program Coordinator and the instructional faculty understand the basic theory of learning outcomes assessment and the best practices associated with it.

About the Nursing Report. Nursing is another area at RC where learning outcomes assessment was functioning as intended. However, it, too, can be improved, and these improvements are presently underway. Conversations between the Office of Accreditation and IE, the Dean of Nursing, and the Director of Vocational Nursing are presently underway for the purpose of substantially revising the approach to PLO assessment that is used by both the Associate Degree Nursing (AASN) and Vocational Nursing programs. An approach that deploys specific assessments in carefully targeted course sections throughout a student's journey through either program will produce more valid and useful data than an approach in which the student's performance on the state licensing examination, after graduating from the program, serves as an "all or nothing" assessment of whether the program's PLOs were met. The VP of Accreditation and IE has met twice with the Director of Vocational Nursing, who is deep into developing a new system, and conversations have been started with the Dean of Nursing for the purpose of launching the same revision. The Vocational Nursing program is presently on track to conduct the first round of its revised assessment system late in the Fall 2019 semester. Plans are afoot for the Associate Degree Nursing program to launch its own revised assessment system in Spring 2020. In the meantime, the attached nursing report simply extends the data collected by the previous version by adding new licensure pass rate data and retention data where it is available.

Standard 13.6 (Federal and state responsibilities)

This standard expects that an institution (a) is in compliance with its program responsibilities under Title IV of the most recent Higher Education Act as amended and (b) audits financial aid programs as required by federal and state regulations.

COMMITTEE FINDING:

The institution provided the "Independent Auditor's Report on Compliance for Each Major Program and on Internal Control over Compliance Required by the Uniform Guidance and the State of Texas Uniform Grant Management Standards" from the financial audit ending August 31, 2017. The institution discussed some findings related to financial aid administration from the audit in FY 2015 and 2016. However, the institution did not furnish evidence in the narrative to support compliance with the standard.

INSTITUTIONAL RESPONSE:

As stated in the original response to this standard, RC conducts annual external audits of its financial aid programs as mandated by federal and state regulations. These audits include tests of compliance with applicable federal laws and regulations, plus reviews of internal controls used in administering federal financial assistance programs. As evidence of compliance with SACSCOC Standard 13.6, the College provided five pages comprising a key section of its total external audit for the year ending August 31, 2017, showing an unmodified opinion and no audit findings related to RC's program responsibilities under Title IV of the most recent Higher Education Act as amended.

To reinforce and expand upon this, [key portions of the annual audit ending August 31, 2018](#), are here attached. Highlighted portions on p. 72 of the Schedule of Findings and Questioned Costs list the major programs that were tested, including federal financial aid programs. Page 73 of this same schedule shows that no federal or state award findings were noted. Also provided are the equivalent pages from the 2018 audit report that were previously provided for the 2017 audit report, containing the auditor's Report on Compliance for Each Major Federal and State Program. Highlighted are the portions providing the auditor's opinion on compliance, stating that "the College complied, in all material respects," with requirements related to "each of its major federal and state programs," along with and the auditor's statement that they had identified no deficiencies in internal control over compliance.

Additionally, further evidence is here provided to share more details about 1) the auditor's findings related to financial aid administration in FY 2015 and 2016, and 2) RC's successful work in addressing these. Attached are pdfs detailing the College's [2015 and 2016 audit resolutions](#). The first of these was submitted to the College's Board of Regents with the October 2016 financial statements related to progress from the twenty-four audit findings from the Fiscal Year 2015 Audit Report. The Federal Award finding related to financial aid for that year was number 2015-023 (highlighted on the pdf). The second was submitted to the Board with the September 2017 financial statements related to progress from the five audit findings from the Fiscal Year 2016 Audit Report. The Federal Award finding related to financial aid for that year was number 2016-05 (highlighted on the pdf). As detailed in these documents, in 2015 RC's Director of Financial Aid began to manually review each financial aid applicant to insure the student's eligibility while solutions to the breakdown in Poise ERP, the College's financial accounting management software system, were sought. In 2016 technicians at Poise identified and fixed the programming error that had caused the problem. Even so, RC's Director of Financial Aid went ahead and completed the task of manually reviewing and verifying all student applications. Regarding the comments in red related to finding 2016-05, in August 2017 two of the College's hard drives that housed student data crashed. The last back-up dated to May 2017, thus creating a three-month gap in data. Following this crash, all transactions from the May backup were re-entered, most of them manually. This is the reason for the comments in red expressing a possible concern over data accuracy as related to "the recent Poise data situation." Fortunately, the College's 2017 audit revealed no findings from the testing performed by the auditors, indicating that accuracy of data was successfully preserved.

Not insignificantly, testing performed by RC's independent auditors was increased for FY 2016, 2017, and 2018 because of previous findings. Moreover, the testing for Title IV funds in FY 2016 and 2017 was performed by an auditor with 20 years of experience in performing audit testing for Title IV funds. The successful results for 2017 and 2018 have already been discussed above. The upshot is that RC is indeed

in compliance with Standard 13.6. It complies with its program responsibilities under Title IV of the 1998 Higher Education as amended, and it audits financial aid programs as required by federal and state regulations.

Standard 13.7 (Physical resources)

This standard expects an institution to ensure adequate physical facilities and resources, both on and off campus, that appropriately serve the needs of the institution's educational programs, support services, and other mission-related activities.

COMMITTEE FINDING:

The institution provided evidence that it has adequate physical facilities and resources on campus and at its off-campus centers. The institution offers dual credit college classes to students in 41 high schools. The institution stated that it "is not responsible for maintaining or operating high school campuses, classrooms, or facilities; such responsibility falls to the high school partner districts themselves." The institution also provided a sample of a Memorandum of Agreement which stated that the School District was responsible for providing a classroom for college-level learning. However, the institution did not provide evidence that the physical facilities at the off-campus high schools were adequate.

INSTITUTIONAL RESPONSE:

As originally stated, dual enrollment locations are responsible for the facilities in which teaching occurs. K-12 schools in Texas do not assess institutional effectiveness in the way that higher education institutions do, nor do they maintain the types of plans, programs, and documentation that colleges and universities commonly cite in demonstrating compliance with the standard (e.g., facilities master plans), so equivalent direct evidence of the adequacy of their facilities is not available. However, these locations are required to abide by Texas Education Agency accreditation requirements, which include standards for school facilities and their construction. These standards are outlined in Texas Administrative Code Chapter 61: School Districts, Subchapter CC, Commissioner's Rules Concerning School Facilities, [rules 61.1033 and 61.1036](#). They cover both new construction and renovations, and they address such issues and items as minimum space requirements, construction quality, educational adequacy of facilities, minimum requirements for libraries, and certification of design and construction. Additionally, RC faculty overseeing courses that require special instruction (e.g., science laboratories) visit the high school campus(es) to ensure equivalence to on-campus facilities.

Schools in Texas are also required by [Texas Education Code 37.108](#) to participate in a [school district safety and security audit](#) that follows a three-year reporting cycle for the purpose of "identifying hazards, threats, and vulnerabilities that might pose a danger to life or property and/or may interfere with a safe, secure and healthy environment that is conducive to teaching and learning." As seen in the attached [model template for audit reports](#), these audits include information on such facilities-related matters as building access (including signage, main entrance, alarm system, and access to buses and parking), grounds and building exterior (including fencing and gates, walkways, and windows), building interior (including entrance hallways, classroom doors and windows, lighting, cafeteria, and

gymnasium), and science laboratories. Completed audit reports are submitted to the [Texas School Safety Center](#) (TxSSC) at Texas State University. In a phone call on August 22, 2019, the TxSSC confirmed that all of the required reports from RC's dual credit partner school districts were submitted for the most recent reporting cycle ending in 2017.