SACSCOC™
SOUTHERN ASSOCIATION OF COLLEGES AND SCHOOLS
COMMISSION ON COLLEGES

REPORT OF THE REAFFIRMATION COMMITTEE
FOR INSTITUTIONS APPROVED FOR A
DIFFERENTIATED REVIEW
(Updated December 2022)

Statement Regarding the Report

The Board of Trustees of the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) is responsible for making the final determination on reaffirmation of accreditation based on the findings contained in this committee report, the institution's response to issues contained in the report, other assessments relevant to the review, and application of SACSCOC policies and procedures. Final interpretation of the Principles of Accreditation *and final action on the accreditation status of the institution rest with SACSCOC Board of Trustees.*

Name of the Institution: **Louisiana State University at Eunice**
Eunice, LA

Date of the Review: **October 2-5, 2023**

SACSCOC Staff Member: **Dr. Lynne S. Crosby**

Chair of the Committee: **Dr. Matteel D. Knowles**
Vice President for Student Services
Greenville Technical College
Greenville, SC

Part I.   Overview and Introduction to the Institution

The Report of the Reaffirmation Committee is the final committee analysis and report that includes the findings of the Off- and On-Site Reaffirmation Committees. It will be forwarded to the institution for a formal response. The report and the institution's response are forwarded to SACSCOC's Board of Trustees for action on reaffirmation of accreditation.

Nature and History of the Institution

Louisiana State University Eunice, commonly referred to as LSU Eunice, is an open admissions public institution within the Louisiana State University System located in Eunice, Louisiana. Founded in 1964 and currently serving 3,623 credit students, the institution has spent decades serving as an educational cornerstone, providing a robust selection of associate degrees, technical diplomas, certificates, continuing education programs, and transfer curricula that meet the needs of both traditional and non-traditional students. Known for its dedication to student success, LSU Eunice boasts a highly qualified faculty, state-of-the-art facilities, and an engaging campus life that supports holistic student development.

Purpose of the On-Site Review Committee Visit

The purpose of the On-Site Reaffirmation Committee was to review the institution's response to the Off-Site Reaffirmation Committee report and findings, review the institution's QEP, and review the required Department of Education standards and off-campus and distance education programs. The Committee visited the Ochsner Lafayette General Orthopedic Hospital, Lafayette, LA.

Special Acknowledgements

The On-Site Reaffirmation Committee would like to extend special appreciation to Louisiana State University at Eunice Chancellor, Dr. Nancy Sorenson; the Board of Supervisors; Dr. Paul Fowler, Director of Institutional Effectiveness and Accreditation; Ms. Tanva Huval, Administrative Assistant III, Office of Institutional Effectiveness and Accreditation; and other administrators, students, faculty and staff for their time, flexibility, cooperation and responsiveness prior to and during the on-site visit.

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Part II.	Assessment of Compliance

Section 1: The Principle of Integrity

1.1   The institution operates with integrity in all matters.
(Integrity) **[CR; Off-Site/On-Site Review]**
(Note: This principle is not addressed by the institution in its Compliance Certification.)

The Off-Site Reaffirmation Committee found no evidence to suggest that the institution operates with a lack of integrity.

The On-Site Reaffirmation Committee supports the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

Section 2: Mission

2.1   **The institution has a clearly defined, comprehensive, and published mission specific to the institution and appropriate for higher education. The mission addresses teaching and learning and, where applicable, research and public service.**
(Institutional mission) **[CR]**

The mission of the institution is clearly defined as a comprehensive, open admissions public institution of higher education that offers associate degrees, technical diplomas, certificates, continuing education programs, and transfer curricula.

The mission is comprehensive as it addresses the impact of offering a high-quality, low-cost education that spans the liberal arts, sciences, business and technology, pre-professional, and professional areas on behalf of a diverse population and the pursuit of lifelong learning.

The mission is published consistently in the Academic Catalog and Employee Handbook, which are both available on the website. The Off-Site Reaffirmation Committee noted that nine goals are published on the About Us welcome page on the institution's website, and these goals differ from the goals published in the Academic Catalog and Employee Handbook.

The mission statement is specific in that it explains the institution's commitment to the educational and cultural needs of its service area, specifically by offering necessary certificate and associate degree programs, addressing area workforce needs, promoting matriculation to area 4-year colleges, and undertaking public service activities to improve the quality of life in the service area.

The mission is appropriate to higher education and addresses teaching and learning in that the institution is committed to academic excellence and is focused on the integration

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of knowledge, the development of the whole person, the mastery of skills and competencies necessary for lifelong learning, the transferability of programs, and preparation for employment opportunities.

Section 4: Governing Board

4.1 **The institution has a governing board of at least five members that:**
  (a)   **is the legal body with specific authority over the institution.**
  (b)   **exercises fiduciary oversight of the institution.**
  (c)   **ensures that both the presiding officer of the board and a majority of other voting members of the board are free of any contractual, employment, personal, or familial financial interest in the institution.**
  (e)   **is not controlled by a minority of board members or by organizations or institutions separate from it.**
  (f)   **is not presided over by the chief executive officer of the institution.**
  (Governing board characteristics) **[CR]**

The institution has a governing board of seventeen members that:

a.   is the legal body with specific authority over the institution in accordance with Louisiana State Constitution of 1974 Part VIII Section 7.A. The Louisiana State University (LSU) Board of Supervisors has legal authority over the institution per the Board of Supervisors Bylaws Article I. The LSU Organizational Chart provides a list of institutions under the supervision and management of the President of LSU to which the Chancellor of the institution reports.

b.   exercises fiduciary oversight of the institution in accordance with the Rules of the Board of Supervisors Article I. In addition, the Board approves any matter both directly and indirectly regarding the finances of the institution in accordance with Board of Supervisors Bylaws Article VII, Section 2. The LSU Board of Supervisors approves the budget as demonstrated by operating budgets of September 7, 2018, September 13, 2019, September 11, 2020, and September 10, 2021.

c.   ensures that both the presiding officer of the board and a majority of other voting members are free of any contractual, employment, personal, or familial interest in the institution under Louisiana Code of Governmental Ethics Article VII, Section 7, p.17. LSU Board of Supervisors acknowledges, and signs as evidence a copy of the Code of Ethics. The LSU Board of Supervisors must report campaign contributions made to the person who appointed them if the amount exceeds Louisiana Code of Governmental Ethics, Section VI-A &D. The institution provided biographies of each board member and copies of financial disclosures of members.

d.   is not controlled by a minority of board members or by organizations or institutions separate from it in accordance with Louisiana Constitution of 1974 Article VIII, section 7-B, which outlines the term limits and selection process for board members. A quorum of ten Board of Supervisors is required to conduct official business per Bylaws Article III, Section 4 with a majority of seven

favorable votes for a motion to be passed in accordance with Bylaws Article III, Section 5.

f.   is not presided over by the chief executive officer in accordance with Article IX, Section 4, which states a chancellor shall be named by the Board. A person shall not hold two positions in which one would be a supervisory role to the second in accordance with Louisiana R.S. 42:64.

4.2   The governing board

4.2.d   defines and addresses potential conflict of interest for its members.
        (Conflict of interest)

The governing board defines and addresses potential conflict of interest from its members by the Louisiana R.S. 42:1101 et seq. The statutes specifically address such conflicts as acceptance of gifts in Louisiana R.S. 42:1111 and the entering of contracts with the LSU system in Louisiana R.S. 42:1113. The Board of Supervisors is required to submit a financial disclosure in accordance with Louisiana R.S. 42:1124 of which examples of disclosure are provided.

4.2.f   protects the institution from undue influence by external persons or bodies.
        (External influence)

The governing board protects the institution from undue influence by external persons or bodies. The Board's composition is composed of members on overlapping six-year terms in accordance with Article VIII section 7-B of the Louisiana Constitution of 1974. The Louisiana Code of Governmental Ethics states public servants must protect the institution from undue influence by external persons or bodies. The Board of Supervisors receives annual ethics training and the institution provided documentation of party related disclosures which are signed by the board members. Financial disclosure statements are documented to disclose any political contributions to the appointing authority. The dismissal of a board member requires cause and due process as stated in Article 10 Section 24 of the Louisiana Constitution.

4.2.g   defines and regularly evaluates its responsibilities and expectations.
        (Board self-evaluation)

The governing board has clear delineation of its responsibilities as identified in the Louisiana Constitution of 1974 and through the Board of Supervisors By-Laws. The By-Laws provide definition of the Board's officers and staff, meetings, order of business, committees, and authority of the Board, along with other functions. The Off-Site Reaffirmation Committee reviewed an extensive orientation presentation that is provided to all incoming Board of Supervisors members.

The governing board also demonstrates regular evaluation of its expectations. An annual self-evaluation of the Board of Supervisors is required to be conducted, and the past three years of evaluation results are documented to confirm that the board regularly evaluates its responsibilities and expectations.

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4.3   **If an institution's governing board does not retain sole legal authority and operating control in a multiple-level governance system, then the institution clearly defines that authority and control for the following areas within its governance structure: (a) institution's mission, (b) fiscal stability of the institution, and (c) institutional policy.**
(Multi-level governance)

In its report, the institution indicated it is a member of the Louisiana State University (LSU) and Agriculture and Mechanical College and is governed by the LSU Board of Supervisors.

Section 5: Administration and Organization

5.1   **The institution has a chief executive officer whose primary responsibility is to the institution.**
(Chief executive officer) **[CR]**

The institution has a chief executive officer whose primary responsibility is to the institution. The authority of the Louisiana State University Board of Supervisors to appoint a chief executive officer (chancellor) is given by Louisiana R.S. 17:3351 Part B. The rights and responsibilities of the chief executive officer are defined in section 4, paragraph A. Specific responsibilities of the institution's chief executive officer can be found in the institution's Policy Statement 3. The chief executive officer was appointed on May 31, 2019.

5.2   **The chief executive officer has ultimate responsibility for, and exercises appropriate control over, the following:**

5.2.a   The institution's educational, administrative, and fiscal programs and services.
(CEO control)

The chief executive officer has ultimate responsibility for and exercises appropriate control over the institution's educational, administrative, and fiscal programs and services. The chief executive officer is given the authority to operate and manage the institution by Article IX, Section 4. Evidence of reporting structure is found in the institution's Organizational Chart that demonstrates the responsibilities of the chief executive officer. Selected cabinet meeting minutes are provided to demonstrate the supervisory role of the chief executive officer of the institution's educational, administrative, and fiscal programs and services.

5.2.b   The institution's intercollegiate athletics program.
(Control of intercollegiate athletics)

The chief executive officer has ultimate responsibility for and exercises appropriate control over the institution's intercollegiate athletics program. The organizational chart shows the athletic director reports directly to the chief executive officer. The institution provided evidence of implementation of the reporting structure in a May 5, 2022, email and a letter of intent signed by the chief executive officer dated June 1, 2022.

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5.2.c The institution's fund-raising activities.
(Control of fund-raising activities)

The chief executive officer has ultimate responsibility for, and exercises appropriate control over, the institution's fund-raising activities. The executive director reports to the chief executive officer in accordance with the institution's Organizational Chart. The institution provides evidence of compliance by providing signed Approval of Fundraising Event or Activity Forms.

5.4 **The institution employs and regularly evaluates administrative and academic officers with appropriate experience and qualifications to lead the institution.**
(Qualified administrative/academic officers) **[Off-Site/On-Site Review]**

The Off-Site Reaffirmation Committee's review of resumes detailing education, professional experience, and other qualifications indicates the institution employs administrative and academic officers who have the appropriate experience and qualifications. The institution provided two examples of evaluations for administrative and academic officers which indicate administrative and academic officers are regularly evaluated.

The On-Site Reaffirmation Committee reviewed listings for several administrators, including the Registrar and Director of Admission, Director of Housing and Residence Life, Site Coordinator, Director of Dual Enrollment and LSUE Academy with a summary of respective responsibilities, educational credentials, and professional experience all of which possess appropriate experience and qualifications. In addition, the institution demonstrates it employs individuals with responsibilities, educational qualifications, professional experience possessing appropriate qualifications including the Vice Chancellor for Academic Affairs and Provost; Vice Chancellor of Business Affairs, Interim Dean of Student Affairs; Academic Dean of Arts and Sciences; Academic Dean of Health Sciences, Business Technology, and Public Protection and Safety; and the Executive Director of Library and Student Support Services. Posting for administrative positions state specifically titles, level of position such "professional" and a listing of responsibilities for the position.

the On-Site Reaffirmation Committee interviewed the Chancellor and the Vice Chancellor for Academic Affairs and Provost and reviewed documents such as the institution's organizational charts and Policy Statement 03 *Responsibilities and Concerns of University Personnel,* stating administrative positions and respective duties for the Chancellor, Vice Chancellor for Academic Affairs and Provost, Vice Chancellor of Business Affairs, Dean of Student Affairs, Academic Deans, Academic Program Directors, and Academic Department Chairs; and sample evaluation documents for several staff (including evaluations for several administrators over a series of years); and affirms the findings of the Off-Site Reaffirmation Committee.

Section 6: Faculty

6.1 **The institution employs an adequate number of full-time faculty members to support the mission and goals of the institution.**
(Full-time faculty) **[CR; Off-Site/On-Site Review]**

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The institution clearly explains that it employs an adequate number of full-time faculty members to support the mission and goals of the institution. The institution described the mission of the institution and how the number of faculty positions supports the mission. The institution also provided its definitions of full- and part-time faculty and described the responsibilities of faculty members, including how faculty perform traditional functions in non-traditional ways, such as high school dual enrollment, online teaching modalities, accelerated online and face-to-face formats, and summer instructional sessions. The institution also addressed high school dual enrollment faculty. The institution provided the number of full- and part-time faculty across several years, the number of faculty compared to SACSCOC Peer Institutions, and student to faculty ratio compared to its peer institutions. The average full-time teaching load across the fall semesters over the past four years is 14.0 credit hours. In addition, credit hour production across the past four fall semesters illustrates that full-time faculty produce between 66.5% to 76.5% of credit hours. These data demonstrate the adequacy of the institution's full-time faculty to support the mission and goals of the institution.

The On-Site Reaffirmation Committee reviewed faculty load documents, credit hour reports, and the definitions of full-time vs. part-time instructors; further, the Committee interviewed the Vice Chancellor for Academic Affairs and Provost, the Dean of Arts and Sciences, and multiple program coordinators and affirms the findings of the Off-Site Reaffirmation Committee.

6.2   **For each of its educational programs, the institution**

6.2.a   Justifies and documents the qualifications of its faculty members.
(Faculty qualifications)

The institution related the mission of the institution to its qualifications for faculty. The institution provided procedures and guiding principles to recruit, identify, interview, hire, and evaluate faculty. While most of the institution's faculty members had documented qualifications, the Off-Site Reaffirmation Committee identified 36 faculty members whose qualifications were unclear. A list is located on the *Request for Justifying and Documenting the Qualifications of Faculty* form, located at the end of this report.

The On-Site Reaffirmation Committee reviewed documentation such as a full copy of the LSU System Permanent Memorandum 23 on the "Ranks, Promotions, and Policies Governing Appointments and Promotions of Academic Staff," which articulates performance expectations, teaching and instructional effectiveness standards, and appropriate academic training for both program courses and transfer courses.

The On-Site Reaffirmation Committee also reviewed a comprehensive faculty roster table that detailed academic training, transcripts, and any relevant additional qualifications, such as industry experience, certifications, and licenses which affirmed the qualifications of all faculty members; and conducted interviews with the Director of Respiratory Care, an Assistant Professor of Accounting, an Assistant Professor of Computer Information Technology, the Faculty Senate Chair and Social Sciences Chair, an Associate Professor of Fine Arts, an Associate Professor of Psychology, a Professor of English, an Assistant

Professor of Communications, and the Registrar in support of the institution's case for compliance.

6.2.b Employs a sufficient number of full-time faculty members to ensure curriculum and program quality, integrity, and review.
(Program faculty) **[Off-Site/On-Site Review]**

The institution provided data by program for a four-year period. Data showing the number of sections and credit hour production taught by full-time and part-time faculty was disaggregated by location, delivery method, and dual enrollment. The institution linked back to the narrative for CR 6.1 to outline the responsibilities of full-time faculty related to program quality, integrity and review, including service on faculty search committees and the Courses and Curriculum Committee, and academic advising. Additional data in the form of program size charts, a table illustrating the number of faculty by program, faculty workload and overload tables, and credit hour production by program illustrate that, in general, the institution has a sufficient number of full-time faculty in each of its educational programs. However, the Off-Site Reaffirmation Committee could not locate evidence that showed the Associate in Criminal Justice and Associate in Applied Science in Fire and Emergency Services programs had a sufficient number of full-time faculty members or a rationale explaining why these programs did not need full-time faculty to ensure curriculum and program quality, integrity and review.

The On-Site Reaffirmation Committee reviewed an outline of the responsibilities of full-time faculty related to program quality, integrity and review, including service on faculty search committees and the Courses and Curriculum Committee, and academic advising. Additional data reviewed by the On-Site Reaffirmation Committee including program size charts, a table illustrating the number of faculty by program, faculty workload and overload tables, and credit hour production by program illustrate that, in general, the institution has a sufficient number of full-time faculty in each of its educational programs.

The On-Site Reaffirmation Committee reviewed an organizational chart indicating faculty are grouped into two divisions, including the Division of Arts and Sciences, and the Division of Health Sciences, Business, Technology, and Public Protection and Safety. The On-Site Reaffirmation Committee also reviewed specific guidelines for faculty workloads and the Board of Supervisors Regulations (Articles I and II); as well as the institution's Employee Handbook, which provided definitions of full-time faculty, both term and tenured, the minimum and maximum workload for full-time faculty, and a definition of part-time faculty. Faculty responsibilities are described in the Board of Supervisors Regulations Article 1, Section 2-D and the Employee Handbook, and include, but are not limited to, establishing standards for instruction and grading, degree requirements, courses and curricula, and criteria for the membership of the faculty. The institution also provided data tables displaying faculty-to-student ratios in Nursing and Allied Health which demonstrate adherence to the program accreditation standards. The On-Site Reaffirmation Committee reviewed the institution's Institutional Summary Form, which demonstrated the organization of 14 academic programs by similarity and shared faculty and fluctuations in full-time as compared to part-time faculty (offered in Table 6.2b-2), thus revealing a

decrease of full-time and increase in part-time faculty from 2016 to 2022. Table 6.2b-7 indicates that full-time faculty teach 67.1% of program courses, while part-time faculty teach 32.9% of program courses.

In addition, the On-Site Reaffirmation Committee reviewed the tables of institutional data displaying faculty workloads and overloads from fall 2019 to fall 2022. Also, according to pg. 54 of the institution's employee handbook, the maximum number of credit hours that may be assigned to a full-time faculty member is 15 or 21 contact hours. Data the institution provided from Table 6.2b-21 indicate that full-time faculty generate 90.7% of lecture-based credit hour production at the LSU Eunice site and 51.7% of the online instruction. Part-time faculty are responsible for 96.5% of credit hour production at the dual enrollment sites.

The On-Site Reaffirmation Committee reviewed evaluations of part-time faculty from 2021-2022 and 2022-2023, curriculum documents prepared by part-time faculty and approved through appropriate channels, and various email exchanges between the part-time program faculty and students on advising, registration, transcripts, and major changes. The Committee also reviewed position descriptions for part-time Criminal Justice faculty and for the part-time Coordinator of Fire and Emergency Services Program, which indicates the expectations of part-time program faculty in maintaining the quality and integrity of the programs.

The On-Site Reaffirmation Committee reviewed longitudinal data indicating the steady decline of enrollment in both the Criminal Justice and Fire and Emergency Services program. The institution indicated that, given the low enrollment, the quality, integrity and review of the program can be adequately maintained by part-time faculty. The On-Site Reaffirmation Committee interviewed the Criminal Justice program coordinator, who described the curriculum review process and the general maintenance of program quality and integrity.

The On-Site Reaffirmation Committee conducted interviews with the Director of Respiratory Care, an Assistant Professor of Accounting, an Assistant Professor of Computer Information Technology, the Faculty Senate Chair and Social Sciences Chair, an Associate Professor of Fine Arts, an Associate Professor of Psychology, a Professor of English, an Assistant Professor of Communications, and the registrar. During these interviews, the On-Site Reaffirmation Committee determined the process by which programs and curricula are reviewed, which is led by the faculty and brought before the Courses and Curriculum Committee for approval. Next, the General Education Committee endorses courses deemed to be general education content. Program faculty interviewed by the On-Site Reaffirmation Committee, such as Accounting and Computer Information Technology faculty, confirmed that advisory boards also contribute to program quality and integrity.

6.2.c   Assigns appropriate responsibility for program coordination.
         (Program coordination) **[Off-Site/On-Site Review]**

         The institution has three levels of program coordination responsibilities: academic department chairs, academic program directors, and academic

program coordinators. Institutional Policy Statement 03 governing responsibilities and concerns of university personnel provided an overview of roles of department chairs and program directors. Duties of program coordinators were included in a generalized job description.

The institution provided a chart of program coordination by discipline-related areas so that applied programs were grouped with transfer programs in some cases. Illustrations of program coordinator involvement in curriculum changes and program advisory board meetings were also included. The Off-Site Reaffirmation Committee was unable to determine whether the program coordinators for Computer Information Technology and the Associate in Science in Agriculture programs have appropriate education and training for their assigned responsibilities.

The On-Site Reaffirmation Committee reviewed documentation such as credentials and rosters related to program coordination as well as the delineation of program coordination expectations. The Committee interviewed the program directors for nursing, diagnostic medical sonography, radiologic technology, computer information technology, and respiratory care, and the dean for arts and sciences. The institution provided clear evidence of the appropriate educational background for all program coordinators. The institution effectively documented program coordinators as fulfilling the role's requirements; and that program coordinators, including Computer Information Technology and Agriculture program coordinators, possess the knowledge and ability to participate in curriculum changes, community and professional interactions, and general program management. The On-Site Reaffirmation Committee's interviews with the above-referenced program directors confirmed program coordinators play an active role in supporting the programs they oversee. The On-Site Reaffirmation Committee verified the institution's program coordinators meet the requirements for their roles and possess the knowledge and ability to participate in curriculum changes, community and professional interactions, and general program management; and determined the institution has provided sufficient documentation to demonstrate it assigns appropriate responsibility for program coordination.

Section 7: Institutional Planning and Effectiveness

7.1　**The institution engages in ongoing, comprehensive, and integrated research-based planning and evaluation processes that (a) focus on institutional quality and effectiveness and (b) incorporate a systematic review of institutional goals and outcomes consistent with its mission.**
(Institutional planning) **[CR]**

The institution demonstrates its commitment to ongoing planning and evaluation through the annual processes and calendar described in the Planning and Assessment Manual. There is a well-defined expectation supported by evidence that all units complete the Annual Assessment Plan sequence, which is designed to promote ongoing progress toward the achievement of the institution's strategic goals. The Off-Site Reaffirmation Committee noted that an Outcomes Not Yet Met report is presented annually to the Chancellor's Cabinet and Extended Cabinet. An additional ongoing planning component of the Annual Assessment Plan cycle is the inclusion of budget requests for upcoming

years via the Resource Request Form available on the institution's Institutional Effectiveness webpage. It should be noted that while budget planning processes are described as annual, only one year of evidence is provided and the ongoing aspect of these processes cannot be verified by the Off-Site Reaffirmation Committee. Similarly, there is one AY2021-2022 strategic plan template (Student Success) attached as evidence and could not locate these templates for the other three strategic goals. The institution's planning and evaluation processes are comprehensive. There are four strategic goals that support the institution's mission, and Annual Assessment Plans are linked to these strategic goals. Each year, outcomes are reported by Institutional Effectiveness, and ultimately the Chancellor's Cabinet and Extended Cabinet determine that the units of the institution are upholding the mission of the institution. While the institution provided three examples of a Resource Request Form, the Committee was unable to find additional examples and details of the budgetary aspect of the institution's planning and evaluation process.

The institution's planning and evaluation processes are robust and include all units at the institution, however the Off-Site Reaffirmation Committee was unable to confirm the integration of the institution's planning. As described by the institution, there is a strong planning and evaluation component in the Annual Assessment Planning process that is functioning well, with the caveat noted above regarding the Resource Request Forms, which makes it difficult for the Committee to determine how integrated the budget planning process is at the institution. In section 2.2 of the institution's narrative, the institution mentions that units annually review and revise goals, objectives, and forecasts, however the Committee could not find examples.

The Off-Site Reaffirmation Committee notes the research-based reports provided in the Additional Planning section on student success and retention, and these are important queries related to the early impact of the Achieving the Dream initiative on the institution. The Committee was unable to find research-based reports tied to the institution's other three strategic goals of student access, expanding partnerships, and continuous improvement.

There is a clear focus on institutional quality and effectiveness in the institution's planning and evaluation activities. The Off-Site Reaffirmation Committee notes the institution's reflection about the early contribution of Achieving the Dream to student success and retention. The annual process of reporting outcomes to the Chancellor's Council and Extended Council is noteworthy, as is the highlighting of Outcomes Not Yet Met.

The documentation provided does show the systematic review of goals and outcomes via the implementation of the institution's Planning and Evaluation Model. Each planning unit does link outcomes to the four strategic goals of the institution which are part of the institution's mission. The Off-Site Reaffirmation Committee recognizes that delay of the next iteration of revision to the mission statement and strategic plan may impact the institution's ability to document the relationship between the mission and planning and evaluation processes, and notes the evidence provided to that effect.

The On-Site Reaffirmation Committee acknowledges the institution conducts annual planning and evaluation exercises involving all areas of the institution and actively participates in research-based initiatives designed to improve outcomes of the current strategic goals. The Committee conducted interviews with the Chancellor, Vice

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Chancellor of Business Affairs, Registrar, Director of Institutional Effectiveness and Accreditation, Director of Strategic Communication, Director of Information Technology and Institutional Research, Director of Police, Executive Director of Library and Student Support, and Program Director of Radiologic Technology to verify the planning and evaluation process at the institutional level and how institution-wide planning effects the decision-making process while adequately providing a basis for budgetary and resource allocations. The On-Site Reaffirmation Committee also reviewed additional documentation such as information about strategic goal development, a five-year capital outlay plan, an athletic master plan, the budgeting process, and the most current Outcomes Assessment Plan, indicating the institution has an ongoing, comprehensive, and integrated planning and evaluation process in place to support the institution's case for compliance.

7.2 **The institution has a QEP that (a) has a topic identified through its ongoing, comprehensive planning and evaluation processes; (b) has broad-based support of institutional constituencies; (c) focuses on improving specific student learning outcomes and/or student success; (d) commits resources to initiate, implement, and complete the QEP; and (e) includes a plan to assess achievement.**
(Quality Enhancement Plan)

The institution's Quality Enhancement Plan is called, "ON TRACK" and focuses on creating gateway mathematics and English corequisite courses. The institution addressed all components of this standard in a satisfactory manner. See Part III for additional information.

Section 8: Student Achievement

8.1 **The institution identifies, evaluates, and publishes 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. The institution uses multiple measures to document student success.**
(Student achievement) **[CR; Off-Site/On-Site Review]**

The institution has identified six criteria to document student achievement: Six-Year Completion Rate (National Student Clearinghouse) – the institution's Key Student Completion Indicator (KSCI), Student Retention, Completion, Licensure Completion Rates, Gateway Course Completion, and Graduate Employment and/or Continuing Education. The institutions addressed all six criteria of student achievement, and documentation of outcomes is provided for several years (going back to Fall 2018). All outcomes are presented in the context of a goal, rationale, threshold of acceptability, and specific improvements implemented for each year. The Off-Site Reaffirmation Committee notes the thorough disaggregation of the institution's KSCI, the Six-Year Completion Rate, by ethnicity, gender, Pell Grant status, age, and participation in the institution's Pathways to Success program. While the observed equity gaps in completion are significant, particularly for the institution's Black students, the institution is participating in the Achieving the Dream initiative. There are extensive institutional responses underway that show the promise of significant impact on the criteria of Completion, Retention, and Gateway Course Completion. In regard to the institution's response to the criteria of Graduate Employment and/or Continuing Education, specifically the Medical Coding and Billing program outcome, it appears the minimum threshold was not met. The Off-Site Reaffirmation Committee could not find additional

discussion of the institution's strategies to improve student achievement of the Medical Coding and Billing program outcome.

For all six criteria of student achievement, the institution demonstrates the appropriateness of each measure by explaining the connection to the mission statement and strategic goals of the institution. All criteria align with the mission of the institution. It is stated that the six criteria (which include goals, rationales, and thresholds of acceptability) were approved by the Chancellor's Cabinet in 2021, however the Committee could not locate documentation confirming this approval as evidence of the institution's commitment to the selected student achievement criteria. This additional information would allow the Committee to confirm the institution's determination of its appropriate measurable goals and outcomes. The thresholds of acceptability are explained well by the institution, as each achievement metric is accompanied with sufficient rationale.

The institution publishes its Student Achievement Data annually on the Institutional Effectiveness webpage and maintains a published archive of past years of Student Achievement Data.

The On-Site Reaffirmation Committee reviewed documentation such as improvement plans that capture graduate employment/continuing education for graduates in two academic programs (Medical Billing and Coding & Human Resource Management). By moving completion of the graduate employment/continuing education survey to commencement, the institution will be able to capture data that is often difficult to obtain from students six months after graduation.

The On-Site Reaffirmation Committee reviewed meeting minutes that demonstrated the institution's commitment to the selected student achievement criteria. It is important to note that in 2021, the institution became an Achieving the Dream institution which further signifies the commitment to using data to improve student success.

The Committee conducted interviews with the Vice Chancellor of Academic Affairs, Interim Dean of Students and Director of Financial Aid, Registrar, Director of Institutional Effectiveness and Accreditation, Director of Human Resources, Director of Strategic Communication, and Director of Information Technology; and verified the institution routinely analyzes disaggregated data and identifies/implements improvement strategies designed to improve the achievement of at-risk student populations.

In addition, the On-Site Reaffirmation Committee reviewed additional documentation such as Post-Graduation Employment – Continuing Education – Alumni Surveys that were completed at graduation, and minutes from Chancellor's Cabinet Meeting that occurred on April 27, 2021, in support of the institution's case for compliance.

8.2 **The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the areas below:**

    8.2.a Student learning outcomes for each of its educational programs.
            (Student outcomes: educational programs) **[Off-Site/On-Site Review]**

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The institution provides thorough documentation of student learning outcomes from AY 2019-2020, AY 2020-2021, and AY 2021-22 of an ongoing planning and assessment process in which all of its educational programs participate annually. This process is outlined in the institution's Annual Planning and Evaluation Model. Student learning outcomes (SLO) from all academic programs and modalities at the institution are included as evidence, and, with a few (explained) exceptions, conform to the institution's course syllabi. There is a common Outcomes Assessment Template that all educational programs directors/chairs— with assistance from the Director of Institutional Effectiveness and Accreditation as needed—are expected to follow to document identified student outcomes, to assess the extent to which it achieves these outcomes, and to provide evidence of seeking improvement based on analysis of results.

The Off-Site Reaffirmation Committee notes that expected outcomes are identified and documented for all of the institution's educational programs. While the Annual Planning and Evaluation Model provides an overview of the SLO process, the Committee could not locate evidence that explains the institution's commitment to three SLOs per program (with occasional deviations to two or four). Given the statement in the institution's narrative that the faculty ultimately determine program outcomes, the Committee could not find an explanation or rationale for the default pattern of one professional competency SLO, one retention SLO, and one placement SLO per educational program.
The Off-Site Reaffirmation Committee also notes that evidence of assessment of outcome achievement is provided for all educational programs. The Committee recognizes that the assessments of professional competency are for the most part well-documented and appropriate. The Off-Site Reaffirmation Committee also noticed instances of assessment design, such as the decision by several programs in the Division of Arts and Sciences to rely on an optional exam (Peregrine General Education Exam), that results in limited assessment data. Likewise, the assessment of placement outcomes by the institution provided limited results.

The Off-Site Reaffirmation Committee observed that programs such as Accounting Technology, Computer Information Technology, Fire and Emergency Services, and Human Resource Management, display a pattern of generalized/repetitive improvement responses.

The Off-Site Reaffirmation Committee found evidence of seeking improvement in the tables provided for each of the institution's educational programs. The documentation shows healthy interaction and exchange of ideas between Institutional Effectiveness and program faculty. There are also likewise a few instances of faculty emails and discussion about improvement, however the Off-Site Reaffirmation Committee notes that there is limited evidence of faculty-driven response of seeking improvement in response to annual SLO results. The Committee was unable to find sufficient supporting evidence of faculty engagement in the outcomes and seeking improvement processes.

Overall, the Off-Site Reaffirmation Committee notes the following:

- the need for the institution's rationale and expectations for the number and type of student learning outcomes assessed per cycle,

- the reliance on the optional Peregrine General Education exam assessment by a majority of the programs in the Division of Arts and Sciences, and
- a pattern of use of generalized improvement responses in some program assessment reports.

In addition, the Committee was not able to clearly understand the role and appropriate level of faculty involvement in the assessment process.

The On-Site Reaffirmation Committee reviewed the previous three years of student learning outcome reports from each of the institution's educational programs. Each educational program has identified student learning outcomes and regularly evaluates these outcomes using a variety of assessment methods. Outcomes vary by program and where appropriate, program accreditation standards may have influenced the development of the learning outcomes. The Committee verified that the institution assesses student learning outcomes across all instructional modalities and reports assessment results annually to the Director of Institutional Effectiveness and Accreditation.

The On-Site Reaffirmation Committee conducted interviews with numerous academic administrators and faculty to confirm the institution's process and faculty involvement in both the development of appropriate student learning outcomes and plans of improvement. Interviews included the Vice Chancellor of Academic Affairs, Dean of Arts and Sciences, Director of Institutional Effectiveness and Accreditation, Director of Nursing, Director of Respiratory Care, Program Coordinator and Associate Professor of Management, Coordinator of Criminal Justice, Social Science Chair and Associate Professor of Early Childhood Education, Professor of English, Associate Professor of Communication, Associate Professor of Computer Information Technology, Associate Professor of Fine Arts, and Associate Professor of Psychology.

Through the review of above-referenced documentation and interviews, the On-Site Reaffirmation Committee verified the institution assesses student learning outcomes and provided evidence of seeking improvement based on the analysis of the results.

Section 9: Educational Program Structure and Content

9.1 **Educational programs (a) embody a coherent course of study, (b) are compatible with the stated mission and goals of the institution, and (c) are based on fields of study appropriate to higher education.**
(Program content) **[CR; Off-Site/On-Site Review]**

The institution demonstrates that the educational programs are compatible with its stated mission. A link to the institution's mission statement was provided along with a discussion of how the educational programs are appropriately aligned with the mission.

The institution provides a lengthy discussion of the coherency of the institution's programs. Coherency was evidenced in the institution's Academic Catalog, as illustrated

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for multiple programs across the transfer associate, associate, associate of science, associate of applied science, and certificate of technical studies programs.

Finally, the institution described how information from the Louisiana Workforce Commission is used to inform program development. The role of the Courses and Curriculum Committee and external evaluation procedures were also described to further evidence the programs' foundation on fields of study appropriate to higher education.

The On-Site Reaffirmation Committee found the institution demonstrates educational programs are compatible with its stated mission. The Committee examined the institution's mission statement along with documentation of how educational programs are appropriately aligned with the mission.

The Committee reviewed the institution's documentation of the coherency of its institution's programs. Coherency was evidenced in the institution's Academic Catalog, as illustrated for multiple programs across the transfer associate, associate, associate of science, associate of applied science, and certificate of technical studies programs. The institution described how it uses information from the Louisiana Workforce Commission to inform program development.

The On-Site Reaffirmation Committee reviewed the 2021-2022 LSU Catalog, transfer articulation agreements with the University of Louisiana at Lafayette and McNeese State University, Associate of General Studies, Associate of Science, Associate of Applied Science, and Certificates of Technical Studies, and confirmed programs and fields of study are directly linked to its mission and embody a coherent course of study. The On-Site Reaffirmation Committee interviewed an Associate Professor of Math, an Assistant Professor of Computer Information Technology, the Director of Nursing, a Professor of Radiologic Technology, the Coordinator of Criminal Justice, the Dean of Arts and Sciences, and the Registrar in support of the institution's case for compliance; and affirmed the findings of the Off-Site Reaffirmation Committee.

9.2   **The institution offers one or more degree programs based on at least 60 semester credit hours or the equivalent at the associate level; at least 120 semester credit hours or the equivalent at the baccalaureate level; or at least 30 semester credit hours or the equivalent at the post-baccalaureate, graduate, or professional level. The institution provides an explanation of equivalencies when using units other than semester credit hours. The institution provides an appropriate justification for all degree programs and combined degree programs that include fewer than the required number of semester credit hours or its equivalent unit.**
        (Program Length) **[CR; Off-Site/On-Site Review]**

        The institution operates under the guidelines from the Louisiana Board of Regents Academic Affairs Policy 2.15 governing the requirements for certificates and degrees. The institution provided a table listing the fifteen associate degrees and credits required, linking each program to the Academic Catalog listing. Each program requires at least 60 semester hours. Forms for curriculum changes were included as well as evidence of the development of the Associate in Science in Agriculture and development and modification of the Associate in Health Sciences degrees. The institution does not use academic units other than semester hours.

The On-Site Reaffirmation Committee confirmed the institution operates under the Louisiana Board of Regents Academic Affairs Policy 2.15 guidelines, governing the requirements for certificates and degrees. The Committee reviewed documentation such as a table listing the fifteen associate degrees and credits required, linking each program to the Academic Catalog listing, and each program requires at least 60 semester hours. The On-Site Reaffirmation Committee reviewed the forms for curriculum changes related to the development of the Associate in Science in Agriculture and development and modification of the Associate in Health Sciences degrees.

The On-Site Reaffirmation Committee interviewed the Registrar and the Dean of Arts and Sciences, both of whom confirmed the process for curriculum changes. The Committee also reviewed Faculty Senate Bylaws and the Curriculum Development Manual and interviewed an Associate Professor of Math who had recently served as the chair of the Courses and Curriculum Committee. The institution does not use academic units other than semester hours. The On-Site Reaffirmation Committee interviewed the Faculty Senate Chair and Social Science Chair, the Director of Nursing, and the Registrar in support of the institution's case for compliance and affirmed the findings of the Off-Site Reaffirmation Committee.

9.3 **The institution requires the successful completion of a general education component at the undergraduate level that:**
(a) **is based on a coherent rationale.**
(b) **is a substantial component of each undergraduate degree program. For degree completion in associate programs, the component constitutes a minimum of 15 semester hours or the equivalent; for baccalaureate programs, a minimum of 30 semester hours or the equivalent.**
(c) **ensures breadth of knowledge. These credit hours include at least one course from each of the following areas: humanities/fine arts, social/behavioral sciences, and natural science/mathematics. These courses do not narrowly focus on those skills, techniques, and procedures specific to a particular occupation or profession.**
(General education requirements) **[CR; Off-Site/On-Site Review]**

The institution provides documentation that a coherent rationale was used to determine the general education component of each degree. The institution follows the Louisiana Board of Regents (BOR) Academic Affairs policy and the Statewide General Education Requirements as identified by SACSCOC. Documentation was provided in the Academic Catalog, BOR policy (Academic Affairs Policy 2.16: Statewide General Education Requirements), and the Statewide General Education Requirements (Requirements for Degree). The Curriculum Development Manual provides a detailed description of how courses are reviewed each year.

As stated in the Compliance Certification Report, all associate degree programs require a minimum of 15 semester credit hours of general education courses. The institution's Academic Catalog identifies the number of general core education courses required for each degree offered. The courses are identified in the 2021-2022 Academic Catalog. The Louisiana BOR Master Course Articulation Matrix was provided to demonstrate how credits transfer across the state colleges and universities. The Curriculum Development Manual provides a detailed description of how courses are reviewed each year.

As mentioned above, general education curriculum is determined by BOR policy. The institution follows the BOR Statewide General Education requirements which describes the categories of general education courses required. General education requirements are identified in the Academic Catalog and the provided degree plans. Documentation of faculty-audited degree plans is provided for each associate degree program.

According to the narrative there are six college-level general education core competencies that degree students attain prior to graduation.

The institution referred to the institution's Academic Catalog for a detailed list of General Education courses offered. After review, the Off-Site Reaffirmation Committee found that the several courses identified under Humanities do not meet Humanities guidelines, i.e., several courses are skills based rather than pure humanities. These courses include Fundamentals of Communication, Interpersonal Communication, Public Speaking, Elementary French I, Elementary French II, Intermediate French I, Intermediate French II, Elementary Spanish I, and Elementary Spanish II. While some humanities courses do not meet the pure humanities requirement, the General Education requirements of associate of science degrees and associate of arts degrees require at least three credit hours in fine arts, satisfying the requirement that at least one course is in humanities/fine arts. However, the General Education requirements of the associate of applied science degrees do not require a course in fine arts. Therefore, it does not appear the associate in applied science degrees requires at least one course in humanities/fine arts that does not narrowly focus on those skills, techniques, and procedures specific to a particular occupation or profession.

The On-Site Reaffirmation Committee reviewed documents such as assessment data for general education outcomes, course syllabi, program course outlines, and program planning documents. In addition, the Committee interviewed the Pathways Advisor, the Faculty Senate Chair, and program coordinators from criminal justice, computer information technology, math, English, psychology, and the Dean for Arts and Sciences. As a result, the Committee verified students in all programs complete the requisite breadth and scope of General Education requirements. The Committee found students are expected to complete general education requirements that satisfy the Louisiana BOR requirements and the expectations for general education.

Section 10: Educational Policies, Procedures, and Practices

10.2 **The institution makes available to students and the public current academic calendars, grading policies, cost of attendance, and refund policies.**
(Public information) **[Off-Site/On-Site Review]**

The Off-Site Reaffirmation Committee's review of the documents provided on the website and the Academic Catalog (on-line) indicates the institution makes information related to academic calendars, grading policies, cost of attendance and refund policies readily available to students. The information provided is clear with appropriate direction for a student to utilize the given information. The institution provided examples of syllabi to document implementation of the grading policies.

The On-Site Reaffirmation Committee reviewed documents such as the academic catalog, student handbook, the academic calendar, college grading policy, refund policy,

and cost of attendance, and conducted interviews with the Registrar/Director of Admissions, the Director of Institutional Effectiveness and Accreditation, the Vice Chancellor for Academic Affairs and Provost, the Vice Chancellor of Business Affairs, and Director of Strategic Communication in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

10.5 **The institution publishes admissions policies consistent with its mission. Recruitment materials and presentations accurately represent the practices, policies, and accreditation status of the institution. The institution also ensures that independent contractors or agents used for recruiting purposes and for admission activities are governed by the same principles and policies as institutional employees.**
(Admissions policies and practices) **[Off-Site/On-Site Review]**

The Off-Site Reaffirmation Committee reviewed the institution's admission policies, which reflect consistency with the mission. Admission policies related to freshmen, transfer, international, former, and dual credit students were also reviewed by the committee. The policies are made available to the students in the Academic Catalog.

The Committee reviewed the job descriptions of the Director of Outreach and Recruitment and Admissions Counselors, and the Admissions Counselor On-Boarding Checklist. The Committee also reviewed the institution's 2022 Noel Levitz Student Satisfactory Survey results, Bengal Ambassador Handbook, and tour script.

The institution provided several recruitment documents; however, these documents did not contain the institution's accreditation status; therefore, the Off-Site Reaffirmation Committee was unable to determine if the institution accurately represents its accreditation status in its recruitment materials or locate a statement explaining that the institution does not include the accreditation status in its recruitment materials, if applicable.

The Committee reviewed the MOU with LSU A & M in Baton Rouge to provide marketing and recruitment and other services in support of the institution's offering of the Associate of General Studies through LSU Online. The institution stated that it does not utilize any independent contractors or agents for the purpose of admissions or recruiting.

The On-Site Reaffirmation Committee reviewed the academic catalog, the student handbook, the financial aid consumer webpage and the public disclosures section of the institution's website. In addition, the On-Site Reaffirmation Committee interviewed the Director of Outreach and Recruiting, the Registrar, Vice Chancellor for Academic Affairs and Provost, and Director of Dual Enrollment and LSUE Academy in support of the institution's case for compliance.

10.6 **An institution that offers distance or correspondence education:**
   (a)   ensures that the student who registers in a distance or correspondence education course or program is the same student who participates in and completes the course or program and receives the credit.
   (b)   has a written procedure for protecting the privacy of students enrolled in distance and correspondence education courses or programs.

(c)   ensures that students are notified, in writing at the time of registration or enrollment, of any projected additional student charges associated with verification of student identity.
(Distance and correspondence education) **[Off-Site/On-Site Review]**

The Compliance Certification demonstrated how the institution ensures that the student who registers for a distance education course is the same student who participates in and completes the course or program and receives the credit. This was accomplished by describing the initial contact with the student and the student information system (myLSUE). The institution also described the LMS (myCourses), and the multi-factor authentication process students follow to access the institutional systems.
The written procedures for protecting the privacy of students enrolled in distance education courses or programs were provided and reviewed. Access to the institution's Procedures for Distance Education and Correspondence Education, Privacy and Release of Student Records, Information Security Policies, and Security of Data General Policy is provided via several avenues, including the Student Handbook, Student Code of Conduct, and the institution's website.

The institution described how it ensures that students are notified, in writing at the time of registration or enrollment, of any projected additional student charges associated with the verification of student identity. The Registration Guide for both the fall 2022 and spring 2022 is provided to illustrate the additional fees for online or telework courses, along with Course and Fee Summary that includes a statement about a possible fee for identity verification and exam proctoring for online courses.

The institution does not offer correspondence education.

The On-Site Reaffirmation Committee reviewed documents such as the institution's academic catalog and student handbook and conducted interviews with the institution's librarian and the Executive Director of Library and Student Support Services in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

10.7   **The institution publishes and implements policies for determining the amount and level of credit awarded for its courses, regardless of format or mode of delivery. These policies require oversight by persons academically qualified to make the necessary judgments. In educational programs not based on credit hours (e.g., direct assessment programs), the institution has a sound means for determining credit equivalencies.**
(Policies for awarding credit) **[Off-Site/On-Site Review]**

The institution provides documentation that it has a published policy to determine the amount and level of credit awarded for its courses, regardless of format or mode of delivery, in the Faculty Handbook and Academic Catalog. The narrative indicated that the institution only offers courses that result in the award of credit hours. Policy oversight is managed by the Courses and Curricula Committee with a structure for approvals that includes the signature of the Dean (Division Head), the SACSCOC Accreditation Liaison, the Campus Courses and Curricula Chair, the Vice Chancellor for Academic Affairs and Provost, and the Chancellor. The Courses and Curricula Committee is made up of elected representatives from each of the academic divisions. The committee must

review all requests for new courses and requests for an increase or decrease in credit hours of existing courses.

The Off-Site Reaffirmation Committee reviewed multiple examples of adding and modifying courses along with adding and/or changing a program.

The Off-Site Reaffirmation Committee found ample discussion about the policies and procedures involved with determining the amount and level of credit for its courses. However, the Committee could not locate information about the academic qualifications of individuals who make the necessary judgments.
The institution noted that the Vice Chancellor for Academic Affairs and Provost's signature was no longer required for the Fire and Emergency Services and Criminal Justice Articulation Agreement forms, and a new form is in the process of being created. The narrative discusses a November 4, 2020, meeting, and the Committee could not locate the meeting minutes. An email was provided that detailed the process for submitting these forms.

The On-Site Reaffirmation Committee confirmed the institution does not have any educational programs not based on credit hours, and that it both publishes and implements policies for determining the amount and level of credit awarded for coursework in accordance with policies published by the Louisiana State University Board of Supervisors Regulations, Article I, Section 2.B.2. The On-Site Reaffirmation Committee reviewed documentation such as the Louisiana Board of Regents "seat time" policy for distance learning, Louisiana State University standards and policies, and a list of programs with rationale for the established course numbering system.

The On-Site Reaffirmation Committee also reviewed the 2021-2022 Courses and Curricula Committee roster, sample new course additions, the Curriculum Development Manual, the Fire and Emergency Services Articulation agreement, and the Criminal Justice articulation agreement. Policy oversight is managed by the Courses and Curricula Committee with a structure for approvals that includes the signature of the Dean (Division Head), the SACSCOC Accreditation Liaison, the Campus Courses and Curriculum Chair, the Vice Chancellor for Academic Affairs and Provost, and the Chancellor.

Recent policy changes cited in the institution's Focused Report indicated that the Vice Chancellor of Academic Affairs and Provost's signature is no longer needed on articulation forms. The On-Site Reaffirmation Committee interviewed an Associate Professor of Math who had recently served as the Chair of the Courses and Curricula Committee and confirmed the signature policy change and offered the rationale that the signature of a dean was sufficient for articulation agreements. The On-Site Reaffirmation Committee interviewed the Vice Chancellor of Academic Affairs and Provost who also confirmed the articulation agreement approval process as well as the curriculum approval process.

Moreover, the On-Site Reaffirmation Committee confirmed the Courses and Curricula Committee consists of elected representatives from each academic division. The On-Site Reaffirmation Committee reviewed the qualifications of the individuals who make the necessary judgments, including a review of the credentials of the individuals involved in the process of awarding credit, and found them to be sufficient. In addition, the On-Site Reaffirmation Committee verified the institution's Courses and Curricula Committee

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reviews all requests for new courses and requests for an increase or decrease in credit hours of existing courses.

The On-Site Reaffirmation Committee interviewed the Director of Respiratory Care, an Assistant Professor of Accounting, an Assistant Professor of Computer Information Technology, the Faculty Senate Chair and Social Sciences Chair, an Associate Professor of Fine Arts, an Associate Professor of Psychology, a Professor of English, an Assistant Professor of Communications, and the Registrar, and affirmed adherence to the aforementioned process.

Section 11: Library and Learning/Information Resources

11.1 **The institution provides adequate and appropriate library and learning/information resources, services, and support for its mission.**
(Library and learning/information resources) **[CR]**

The table "Print Books in Library Circulation – Number of Items" separates the 66,544 print books in the library's collection into general Library of Congress Call Numbers, however the Off-Site Reaffirmation Committee was unable to find details regarding the library's collections and the number of resources available to support the specific programs of study at the institution. The Committee was unable to locate documentation to support the adequacy and appropriateness of library and learning/information resources, services, and support for the institution's mission, such as ongoing analysis of usage data connected to these programs of study, or peer comparisons that the collection is adequate and appropriate when compared to other institutions.

The institution documents there are no ILL requests. According to the institution's narrative, "In recent years, the number of ILL requests at [the institution] has declined to zero, which is an indicator that the collection is meeting the needs of its users." The Committee was unable to find additional information or documentation to explain the reason(s) for the decline in ILL requests.

The narrative states, "Although financial resources are now invested into the consortium and digital assets, the library does still house a print collection that consists of book and periodical material reflecting over 55 years of library collection development and building." The narrative states, "Since [the institution] relies on LOUIS for access to resources, there is currently no formal collection development policy." LOUIS is The Louisiana Library Network, a consortium that consists of membership by all public institutions of higher education in Louisiana – approximately 47 institutions.

LOUIS features electronic resources and is separate and different from the 66,544 print volumes which are contained in the library. The Committee was unable to locate a formal plan to ensure print books are kept current (i.e., how materials are discarded and purchased with the help of faculty), for each program, such as health sciences and computer technology. The Committee was unable to find data to support the currency of the print collection and resources, such as age analysis, acquisition statistics, scheduled weeding. It is unclear whether new print volumes have been added to the collection or the process used to maintain the 55-year-old collection.

The library's website contains "policy" information, such as LeDoux Library instruction Lab Policy and Online Obituary Index Requests, however the Committee was unable to

confirm that these have been reviewed and approved through proper institutional procedures. The "Online Obituary Index Requests" requires a charge of $1.00 per page/ per obituary.

The Off-Site Reaffirmation Committee notes an overall lack of evidence in the form of feedback from students (both on and off campus) and faculty and staff to support the institution's justification of the appropriateness and adequacy of its library and learning/ information resources. Almost all of the feedback supplied as evidence in the narrative comes from the two surveys conducted institution-wide over a three-year period by the Institutional Effectiveness group. For example, the Gear2Geaux program is described in the narrative. This program allows students to checkout laptops, mobile hotspots, microphones, web cams, and graphing calculators, however the Committee could not locate feedback from student and faculty on the program to indicate this resource is adequate and appropriate to support the needs of students. While Chat service logs contain questions, the Committee could not find evidence of the follow-up responses from library staff. The website contains request forms, and the Committee did not find evidence regarding these forms. Overall, the Off-Site Reaffirmation Committee was unable to determine whether library and learning/information resources, services, and support are adequate and appropriate for the institution and its mission.

The On-Site Reaffirmation Committee found the institution has a print collection numbering 66,544 developed over many years, and that the institution relies heavily on LOUIS, a consortium of approximately 47 institutions of higher education in the state of Louisiana, for access to print and electronic resources to support student career choices at the institution. The Committee confirmed LOUIS routinely provides ad hoc committees to determine the adequacy of its resources.

The On-Site Reaffirmation Committee found the institution's print collection housed within the institution's Library has an average publication date of 1976. The Committee verified the institution develops the local collection through donations from faculty and the community. The Committee confirmed that some new items are purchased, if requested, to support a new instructional program; and that library staff occasionally delete items from the library's collection as shelf space becomes limited. The On-Site Reaffirmation Committee interviewed the Executive Director of Library and Student Support Services and examined documentation such as the institution's draft written collection development policy which is currently in progress and confirmed it will be a helpful resource to assist library staff in the management of Library resources both digital and print.

Section 12: Academic and Student Support Services

12.1   **The institution provides appropriate academic and student support programs, services, and activities consistent with its mission.**
(Student support services) **[CR Off-Site/On-Site Review]**

The institution provides a wide variety of services to not only students, but also faculty and staff. These services are delivered on campus and virtually. The institution provided a plethora of information confirming the services that are offered. Information included advisor training, orientation, handbooks for student organizations, faculty professional development, and a multitude of social services including food pantry, mental health counseling, a health clinic and more. This information is made aware to

the students through an email sent the first day of classes titled 'Your Complete Guide to [the institution]' which includes links to the student handbook, website, and many other important areas. The institution clearly offers the necessary student services for students in the residence halls, commuting, or taking classes online.

The On-Site Reaffirmation Committee reviewed the Student Handbook and Academic Catalog, and conducted interviews with the Interim Dean of Student Affairs and Director of Financial Aid, the Vice Chancellor of Academic Affairs and Provost, the Registrar, the Director of Dual Enrollment and LSUE Academy, the Executive Director of Library and Student Support Services, students, and faculty in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

12.4 **The institution (a) publishes appropriate and clear procedures for addressing written student complaints, (b) demonstrates that it follows the procedures when resolving them, and (c) maintains a record of student complaints that can be accessed upon request by SACSCOC.**
(Student complaints) **[Off-Site/On-Site Review]**

The institution defines a student complaint to students as any report submission by a prospective, current, or former student through the institution's official web-based system using the appropriate form. This is defined and described in the Student Handbook. The students who wish to file a complaint must fill out a student complaint form located on the institution's website. The institution provided complaint logs for several different complaint and appeal processes. The institution maintains all of the complaints in a single location electronically in the student affairs office and maintains a log that can be accessed as needed. The log includes the following elements: submission date/time, case number, complainant and student ID, nature of the complaint, involved persons/departments, case owner, and status.

The Off-Site Reaffirmation Committee reviewed appeals related to conduct, grade, traffic, and financial aid. All policies and processes appeared to be followed.

The On-Site Reaffirmation Committee reviewed pertinent documents and logs such as general complaints, Title IX complaints, and various appeals and conducted interviews with the Interim Dean of Students, Vice Chancellor of Academic Affairs and Provost, and Registrar in support of the institution's case for compliance and affirms the findings of the Off-Site Committee.

12.6 **The institution provides information and guidance to help student borrowers understand how to manage their debt and repay their loans.**
(Student debt)

In 2021 the institution contracted with Inceptia to assist students with understanding how to manage and repay their debt. Inceptia consists of ten (10) online learning modules that include pre and post-tests. All student loan borrowers must complete the debt and repayment module before loans are disbursed. This program, with its marketing and focus on students, provides the necessary information and guidance for student borrowers.

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Section 13: Financial and Physical Resources

13.1 **The institution has sound financial resources and a demonstrated, stable financial base to support the mission of the institution and the scope of its programs and services.**
(Financial resources) **[CR]**

The institution demonstrates sound financial resources and a stable base to support the institution's mission as demonstrated by the steady support from state appropriations, tuition and fee revenue, grants, and auxiliary revenue. The institution is included as part of the Louisiana State University System audit with the most recent 2022 audit being included as evidence for the Off-Site Reaffirmation Committee. The institution has a foundation that has adequate resources available for unrestricted use.

The institution provided a schedule of unrestricted net assets exclusive of plant, pension and OPEB liability that demonstrated a stable amount of assets. The institution demonstrated that it has enough liquid assets to cover short-term liabilities.

The institution demonstrated that even with enrollment declines that the operating revenue per FTE has been consistent over the past five years and expense increases have been kept to a minimum.

13.2 **The member institution provides the following financial statements:**
   (a)   **an institutional audit (or Standard Review Report issued in accordance with *Statements on Standards for Accounting and Review Services* issued by the AICPA for those institutions audited as part of a system-wide or statewide audit) for the most recent fiscal year prepared by an independent certified public accountant and/or an appropriate governmental auditing agency employing the appropriate audit (or Standard Review Report) guide.**
   (b)   **a statement of financial position of unrestricted net assets, exclusive of plant assets and plant-related debt, which represents the change in unrestricted net assets attributable to operations for the most recent year.**
   (c)   **an annual budget that is preceded by sound planning, is subject to sound fiscal procedures, and is approved by the governing board.**
(Financial documents) **[CR]**

The institution is included as part of the annual Louisiana State University System audit and the institution submitted audits for Fiscal Years 2019, 2020, 2021, and 2022 (the most recent fiscal year). In addition to the annual system-wide financial statement audits, the state legislative auditors conduct procedural audits every two years and the institution provided procedural audits reports for 2016-2018, 2018-2020 and 2020-2022. The procedural audit noted findings that the institution is addressing.

The institution provided a schedule of unrestricted net assets exclusive of plant, pension and Other Postemployment Benefits (OPEB) liability that demonstrated a stable amount of assets. The institution demonstrated that it has enough liquid assets to cover short-term liabilities.

The institution demonstrated sound annual budget planning that involved input from across the institution and was tied to the mission and priorities of the institution. Proof of

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approval by the Board of Supervisors was provided in the form of meeting minutes from September 2019, 2020, 2021, and 2022.

13.3 **The institution manages its financial resources in a responsible manner.**
(Financial responsibility)

The institution submitted evidence of managing its financial resources in a responsible manner. The institution is experiencing enrollment and funding declines, but the institution provided evidence of sound planning, to include seeking additional grant opportunities and adjusting expenses to manage resources in a responsible manner.

The internal reorganization that was evidenced by the combining of leadership roles also demonstrated sound planning to meet reduced revenues.

13.6 **The 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. In reviewing the institution's compliance with these program responsibilities under Title IV, SACSCOC relies on documentation forwarded to it by the U. S. Department of Education.**
(Federal and state responsibilities) **[Off-Site/On-Site Review]**

The institution demonstrated that it is in compliance with its program responsibilities under Title IV. The institution has not been placed on the reimbursement method or required to provide a letter of credit. The institution received two student complaints received by Federal Student Aid Information Center (FSAIC), U.S. Department of Education, and those have been resolved as demonstrated by the evidence, including emails documenting final action by the FSAIC.

The institution's financial aid program is audited every other year in a group audit. The institution provided the 2018-2019 and 2020-2021 audits. The state office of financial aid also performs an audit and the institution had one finding that had no impact on Title IV funds. The Louisiana Office of Student Financial Assistance (LOSFA) audits state grants to ensure that the institution is in compliance with federal and state regulations. The Spring 2021 audit contained one finding that was resolved and did not impact Title IV funds.

The On-Site Reaffirmation Committee reviewed the Title IV program approval letter, program participation agreement, the 2018-2019, and 2020-2021 multi-campus audits, and the LSU System's 2018 internal audit. In addition, the On-Site Reaffirmation Committee interviewed the Director of Financial Aid/Interim Dean of Students and Vice Chancellor of Business Affairs in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

13.7 **The institution ensures 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.**
(Physical resources) **[Off-Site/On-Site Review]**

The institution demonstrated that there are adequate physical facilities and resources, both on and off campus, which meet the needs of students and mission-related

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activities. Evidence related to this included ample square feet and long-term and short-term master facility plans. The building conditions as rated by the Board of Regents show all buildings in satisfactory condition or under remodel.

Faculty, staff, and student satisfaction surveys were conducted, and the results demonstrated institutional effectiveness in this area. The needs of the educational programs appeared to be met based on availability and utilization reports that show appropriate space currently available and for future needs and through agreements with other institutions and locations to provide appropriate space for the programming needs. The institution has a strong capital outlay plan for the next five years.

The institution also provided evidence of a strong information technology structure. It addressed expanded capabilities, upgraded fiber, cloud services, multi-factor authentication and other cyber security upgrades.

Institutional levels of property insurance are appropriate and documented. The institution provided evidence of inventory processes and verification along with a written equipment management program.

The On-Site Reaffirmation Committee reviewed documentation such as the Board of Regents' State Inventory System of listing of buildings respective conditions; a color-coded main campus map with clearly marked buildings, streetways, and designated parking for students, faculty and staff; facilities satisfaction ratings; the $84 million plus Five Year Capital Outlay Plan for numerous projects to be completed from 2023-2028 with associated costs and year for each project; a listing of physical facilities key accomplishments by description and expenditures from 2012 to 2022; a listing of Louisiana institutions providing the institution's space utilization of classrooms and laboratories, and a facilities master plan. The Committee also verified evidence of the institution's plans for new baseball, softball, soccer stadiums, a Performance and Athletic Center, and improvements for the basketball program.

The On-Site Reaffirmation Committee also reviewed documentation such as a scheduled preventive maintenance plan, maintenance records, and visual plans and drawings; and confirmed the institution has adequate space for classrooms, and for academic and support services. The Committee toured the main campus and the Ochsner Lafayette General Orthopedic Hospital off-campus instructional site, and verified facilities are adequate to meet spatial and safety needs.

The On-Site Reaffirmation Committee toured the main campus and confirmed the institution's classrooms and labs are spacious; and that the institution's science and healthcare classrooms were adequately equipped. The Committee verified the institution's main campus is well maintained with large areas for students to study both inside and outside the classroom. The Committee confirmed faculty have private offices with technology and furnishings suitable for office hours, assistance to students, and workspace; and that the library is comfortable, open, and accommodated for different study areas for students and other users.

The On-Site Reaffirmation Committee reviewed photographs and descriptions of six (6) off-site dual enrollment sites and confirmed they have adequate and well-maintained classrooms equipped with computers and technology for instructional support; and that each site ensures access for students with student support services and access to

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Library resources, both digitally and via faculty. The Committee confirmed that faculty teaching at the dual enrollment sites have office spaces and that they serve as resources for student support during office hours.

The On-Site Reaffirmation Committee conducted interviews with the Director of Facilities and the Chancellor and reviewed evidence in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

Section 14: Transparency and Institutional Representation

14.1 **The institution (a) accurately represents its accreditation status and publishes the name, address, and telephone number of SACSCOC in accordance with SACSCOC's requirements and federal policy; and (b) ensures all its branch campuses include the name of that institution and make it clear that their accreditation depends on the continued accreditation of the parent campus.** *(Publication of accreditation status)* **[Off-Site/On-Site Review]**

The Off-Site Reaffirmation Committee found evidence of the institution accurately representing its accreditation status in the following publications: 2023 Academic Catalog, the Employee Handbook, the Institutional Effectiveness Public Disclosure Website, and the Financial Aid Consumer Information Website.

The institution does not have branch campuses.

The On-Site Reaffirmation Committee reviewed documents such as the institution's 2023 Academic Catalog, the Employee Handbook, and the institution's website, and conducted interviews with the Director of Strategic Communication, the Director of Information Technology, and the Human Resources Manager in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

14.3 **The institution applies all appropriate standards and policies to its distance learning programs, branch campuses, and off-campus instructional sites.** *(Comprehensive institutional reviews)* **[Off-Site/On-Site Review]**

The institution provided summaries associated with all applicable standards and linked to the institution's response to these standards, which made it clear that standards and policies are appropriately applied to distance learning and off-campus instructional sites.

The On-Site Reaffirmation Committee reviewed documents such as the institution's catalog, registration schedule, and conducted interviews with the Vice Chancellor of Academic Affairs and Provost, Dean of Arts and Sciences, Interim Dean of Student Affairs, Registrar, Director of Institutional Effectiveness and Accreditation, Director of Information Technology and Research, Dual Enrollment Coordinator, Coordinator of Online Learning in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

14.4 **The institution (a) represents itself accurately to all U.S. Department of Education recognized accrediting agencies with which it holds accreditation and (b) informs those agencies of any change of accreditation status, including the imposition of**

public sanctions. (See SACSCOC policy "Accrediting Decisions of Other Agencies.")
(Representation to other agencies) **[Off-Site/On-Site Review]**

In documentation presented in the Compliance Report, the institution demonstrated that it represents itself accurately to the three accrediting agencies that are recognized by the U. S. Department of Education. This documentation included comparative information from self-studies, substantive change reports, and follow-up reports to SACSCOC, ACEN, and the Joint Review Committee on Education in Radiologic Technology.

The institution has two programs, the Associate of Science in Nursing and the Associate of Science in Radiologic Technology, which hold program accreditation by organizations recognized by the U.S. Department of Education.

In documentation provided by the institution, there was miscommunication after March 30, 2016, from the institution's Division of Nursing to the senior leadership of the institution about the recent accreditation status from ACEN. The Chancellor was not informed that the nursing accreditation status had changed from continuing accreditation to continuing accreditation with conditions. Consequently, the Chancellor's Office did not inform the SACSCOC office of the change in status. However, SACSCOC was informed by ACEN of the change in status. The notice to SACSCOC from ACEN resulted in contact from SACSCOC to the Chancellor's Office. By providing documentation the matter with the SACSCOC Office was clarified and accepted. The institution provided a follow-up report to ACEN which resulted in the removal of the conditions in August 2018. In order to prevent this type of miscommunication with the other accreditation agencies in the future, Policy Statement Number 84 was modified to require Division Heads to send letters from the accrediting agencies to the Institution's Accreditation Liaison. The Accreditation Liaison will inform senior leadership of the accreditation status. Senior Leadership will inform the appropriate officials at the other two accrediting agencies of any change in accreditation status.

The On-Site Reaffirmation Committee reviewed documents such as the institution's self-study reports and letters from program accreditation bodies for the Associate of Science in Nursing program and for the Associate of Science in Radiologic Technology program, confirming accreditation. In addition, the Committee interviewed the Director of Institutional Effectiveness and Accreditation, the Vice Chancellor for Academic Affairs and Provost; and the Interim Dean, Division of Health Sciences, Business, Technology, and Public Protection and Safety in support of the institution's case for compliance and affirmed the Off-Site Reaffirmation Committee's findings.

14.5 **The institution complies with SACSCOC's policy statements that pertain to new or additional institutional obligations that may arise that are not part of the standards in the current *Principles of Accreditation*.**
(Policy compliance)
(Note: For applicable policies, institutions should refer to the SACSCOC website [http:/www.sacscoc.org])

14.5.a **"Reaffirmation of Accreditation and Subsequent Reports"**
Applicable Policy Statement. If an institution is part of a system or corporate structure, a description of the system operation (or corporate structure) is submitted as part of the Compliance Certification for the decennial review. The

description should be designed to help members of the peer review committees understand the mission, governance, and operating procedures of the system and the individual institution's role within that system.

Documentation: The institution should provide a description of the system operation and structure or the corporate structure if this applies.
(*Policy compliance: "Reaffirmation of Accreditation and Subsequent Reports"*)

14.5.b **"Separate Accreditation for Units of a Member Institution"**
Applicable Policy Statement. If the Commission on Colleges determines that an extended unit is autonomous to the extent that the control over that unit by the parent or its board is significantly impaired, the Commission may direct that the extended unit seek to become a separately accredited institution. A unit which seeks separate accreditation should bear a different name from that of the parent. If the Southern Association of Colleges and Schools Commission on Colleges determines the unit should be separately accredited or the institution requests to be separately accredited, the unit may apply for separate accreditation from any institutional accrediting association that accredits colleges in that state or country.

Implementation: If, during its review of the institution, SACSCOC determines that an extended unit is sufficiently autonomous to the extent that the parent campus has little or no control, SACSCOC will use this policy to recommend separate accreditation of the extended unit. No response is required by the institution.
(*Policy compliance: "Separate Accreditation for Units of a Member Institution"*)

The following description of the system operation and structure was provided in the institution's report. The institution, as a member of the Louisiana State University (LSU) and Agriculture and Mechanical College, is governed by the LSU Board of Supervisors. The Louisiana Constitution of 1974 Article VIII Section 7-A identifies the Board of Supervisors as the management board, and the institution was established in 1964 by the Louisiana Legislature through Louisiana R.S. 17:1521.

The Off-Site Reaffirmation Committee found no evidence that any extended unit of the institution is autonomous to the extent that control of the unit by the parent is significantly impaired.

Additional observations regarding strengths and weaknesses of the institution.
(optional)

The Off-Site Reaffirmation Committee encourages the institution to review its file naming convention of supporting documents to ensure that personal identifiable information or names are not a part of the file name.

The Committee notes that in March 2023, SACSCOC revised the required accreditation statement in its *Institutional Obligations for Public Disclosure* policy again after the institution submitted its Compliance Certification Report. The Off-Site Reaffirmation Committee encourages the institution to review the recently revised *Institutional Obligations for Public Disclosure* policy statement to ensure the institution makes the necessary revisions to its statement that is published in several of its publications.

Part III.   Assessment of the Quality Enhancement Plan

Brief description of the institution's Quality Enhancement Plan

The Quality Enhancement Plan (QEP), "ON-TRACK," focuses on creating gateway English and mathematics corequisite courses, along with the necessary support structures, to improve success in the first general education English composition and mathematics courses. The QEP aligns with state mandated policy regarding the elimination of standalone developmental education courses and uses successful completion of gateway general education English and gateway general education mathematics courses, and achievement of gateway general education English and gateway general education mathematics courses' student learning outcomes, as the basis for assessment. The QEP requires the restructuring of gateway general education English and gateway general education mathematics course offerings into corequisite formats in lieu of traditionally sequenced developmental education pathways. The Plan is comprehensive and includes assessment protocols based on two expressed goals and four objectives regarding completion and achievement increases for gateway general education English and gateway general education mathematics courses.

Analysis of the Quality Enhancement Plan

A.   ***Topic Identification***.   *The institution has a topic identified through its ongoing, comprehensive planning and evaluation processes.*

The institution's commitment to ongoing comprehensive planning and evaluation processes is evident in the identification of the QEP topic. This process began with the institution's selection in 2021 as one of the seven colleges chosen by Achieving the Dream (ATD) to be part of the Rural Cohort Institute in Building Resiliency in Rural Communities for the Future of Work. This initiative prompted a deep examination of longitudinal student achievement, which revealed declines in success metrics.

Through investigations such as "An Investigation into Overall Success and Withdrawal Rates for AY 2020 – 2021" and "An Investigation into Longitudinal Retention Rates," the institution gleaned valuable insights. These examinations revealed fluctuations in course completion and retention rates. As a response, the institution underwent an administrative reorganization and established a Learning Commons to address areas needing improvement.

In 2022, significant state policy changes regarding developmental education mandated that all new first-time students starting fall 2023 be placed directly into general education English composition and mathematics courses relevant to their majors. These data-driven findings and policy alterations provided a solid framework for pinpointing areas in need of enhancement within the institution.

To distill these insights, the institution developed a concise one-page memorandum summarizing the investigation results. This memorandum served as a reference point for discussions with major stakeholders, marking the initial step toward potential QEP topics. A QEP Committee, representing a diverse cross-section of faculty, staff, and

students, was established with the crucial task of selecting a QEP that could have a substantial impact on student learning within available resources.

The QEP topic, "ON-TRACK," emerged from a rigorous three-year development process that integrated lessons learned from previous institutional initiatives and aligned with both institutional needs and state policy mandates. The QEP Committee initially generated a list of seven possible topics for consideration. A survey on these topics was distributed to all faculty, staff, and eligible students, leading to the elimination of three topics.

The following top four topics were then presented to the Faculty Senate for input:

1. Improve engagement of first-year students
2. Improve online learning
3. Improve academic advising
4. Improve supports for mathematics and/or English

Through data-driven discussions, "improving online learning" was excluded as a viable topic during one Faculty Senate meeting. In subsequent meetings, elements from the remaining topics were synthesized to create a more manageable and assessable focus over five years. The QEP Committee reviewed the Faculty Senate's recommendations and conducted a vote, with "Improving supports for mathematics and/or English" receiving the majority of QEP Committee members' votes. This topic was further refined into "ON-TRACK (Targeting Retention and Achievement of Core Knowledge)" as the chosen QEP.

B. ***Broad-based Support.*** *The plan has the broad-based support of institutional constituencies.*

The QEP has garnered support from institutional constituencies, reflecting its inclusive and collaborative development processes. Key stakeholders, including the Faculty Senate, Staff Senate, Student Government Association, and 133 first-year students across seven course sections, were actively engaged in discussions, underscoring the QEP's inclusive identification process.

Throughout the QEP development, the institution made a concerted effort to involve stakeholders, fostering a collective approach to address student needs. Notably, the incorporation of relevant data from concurrent student success initiatives and studies ensured input from constituents already involved in related efforts across the institution.

C. ***Focus of the Plan***. *The institution identifies a significant issue that focuses on improving specific student learning outcomes and/or student success.*

The institution's focus is clear, targeting overall student success (Objective 1) and specific student learning outcomes (Objective 2) through two goals.

Goal 1: Seeks to increase student learning in the gateway general education English course. The goal has two specific objectives:

- **Objective 1:** Successful completion of the gateway general education English composition course.

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- **Objective 2:** Increase the achievement of student learning outcomes.

Goal 2: Seeks to increase student learning in gateway general education mathematics courses, specifically MATH 1015, MATH 1029, MATH 1020, and MATH 1021. This goal has two specific objectives:

- **Objective 1:** Successful completion of the gateway general education mathematics courses.
- **Objective 2:** Increase the achievement of student learning outcomes.

The institution's two QEP goals center on the improvement of student success in the gateway general education English course and the improvement of student success in gateway general education mathematics courses. With the goals of improving student learning and therefore success in completing gateway general education English and mathematics, the institution developed support lab experiences for both English and mathematics. These combined class sessions offer an opportunity for students to receive timely tutoring, and instructors have the opportunity to offer immediate feedback and targeted support.

Curricular changes for ENGL 0101-ENGL1001 were made by English faculty and motivated by the goal of improving the writing skills of students, and adjustments include reducing the number of essays during the semester from four to three, thereby giving the student four to five weeks to complete each essay and consequently, more time to develop and learn the writing and revision process and the MLA format. Instructors across all sections are advised to follow the "Master Pacing" guidelines which are highlighted in Appendix I. With the goal of optimizing coverage of students' needs, credit-bearing instructors and support course instructors are assigned to each course section and must adopt a uniform attendance policy.

Unlike English, the Mathematics track for students is contingent on their major or program, since MATH 1015 is Applied College Algebra, MATH 1021 is College Algebra, or Math for STEM majors, and MATH 1029 is Introduction to Contemporary Mathematics, or Liberal Arts Mathematics. For all three sets of paired Mathematics courses, grade calculation includes proctored tests, homework, un-proctored assignments, and a proctored final exam. As with the English paired class, Mathematics classes will have a credit-bearing instructor and a support instructor, with each assigned specific duty. Master Pacing guidelines have been articulated for each of the Mathematics paired classes, and while attendance is stated as important to student success, no specific policy on the number of missed classes is listed for Mathematics as it was for English. Both the English and Mathematics paired courses have online options, which was cited by faculty as an important option for students who may be unable to come to campus due to family and work responsibilities.

Demonstrating improvement in student learning outcomes entails the submission of an essay for the gateway general education English course and addressing "embedded SLO questions" for the gateway general education mathematics courses. Given that the 11 student learning outcomes (within Objective 2 of each goal) are already embedded in the existing course structures, the outcomes do not appear to incur an additional administrative burden. This structured approach ensures a clear and targeted focus on enhancing student learning outcomes and achieving overall student success.

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D.   ***Institutional Capability for the Initiation, Implementation, and Completion of the Plan***.   *The institution provides evidence that it has committed sufficient resources to initiate, implement, and complete the QEP.*

The institution's commitment to the QEP is evidenced through its financial commitment, human resources strategy, and allocation of resources.

Financial Commitment: The institution has sufficient funding for the QEP's initiation, implementation, and completion. The commitment extends beyond the predetermined timeline, exemplified by the reallocation of funds from discontinued courses, grants, and lab fees. This substantial financial dedication underscores a long-term investment in the QEP's success, with salaries representing the majority of ongoing costs. With an impressive allocation of over five million dollars for QEP-related operations, the institution's financial commitment is more than adequate.

Human Resources: The institution's approach to human resources is fiscally prudent. By relying on three 12-month administrators to oversee implementation and assessment, the institution optimizes its existing workforce. The administrators' job duties have been adjusted to align with their proportional responsibilities for the QEP. This strategic allocation of human resources demonstrates sustainable integrated planning and budgetary practices, without necessitating additional expenditures.

Resource Allocation: The institution has allocated resources for faculty support, supplies, and advertising, which demonstrates its commitment to the QEP's success. However, as demand for corequisite courses increases due to expanded access, it may become necessary to reevaluate resource allocation to effectively meet the evolving needs of students. Still, the institution's dedication to resource allocation for the QEP remains evident.

The institution's commitment to the QEP is clear based on its financial dedication, human resources strategy, and resource allocation.

E.   ***Assessment of the Plan***.   *The institution has developed an appropriate plan to assess achievement.*

The institution's assessment plan is well-defined, aligning closely with the QEP's two primary goals (Goal 1 and Goal 2) along with their corresponding objectives (Objective 1.1, 1.2, 2.1, and 2.2). Each objective encompasses both indirect and direct assessment methods, establishing a comprehensive framework structured around three key elements:

1. **Methodology:** This component serves as the foundation for assessing the successful completion and achievement outcomes of gateway general education English and mathematics courses.

2. **Benchmark and Rationale:** These elements establish a baseline for measurement, drawing from historical data and forming the reasoning behind the assessment targets.

3. **Target and Rationale:** This section outlines the specific achievement targets and the reasoning behind these goals.

Regarding the specifics for both gateway general education English and mathematics courses:

Gateway General Education English Courses:

Objective 1.1 (Indirect Assessment) aims to increase successful completion rates. The methodology relies on course success rates, encompassing all students enrolled on census days during each academic year (fall and spring). Successful completion is defined as achieving final grades of A, B, C, or P. The benchmark is set using Academic Years 2010-2011 through 2022-2023 success data rates as a reference point, while the target seeks to meet or surpass these rates.

Objective 1.2 (Direct Assessment) seeks to increase achievement based on defined learning outcomes. Four specific learning outcomes are identified for gateway general education English courses. The methodology involves the evaluation of final essays and multiple-choice assessments. Historical data from Academic Year 2015-2016 and AY 2022-2023 are used to establish tentative benchmarks and targets, with varying targets for each learning outcome.

Gateway General Education Mathematics Courses:

Objective 2.1 (Indirect Assessment) is designed to increase successful completion rates in gateway general education mathematics courses. The methodology mirrors that of English courses, using course success rates for all students enrolled during census days in each academic year (fall and spring). Successful completion includes final grades of A, B, C, or P. The benchmark for College Algebra is established using the longitudinal value average percentage derived from success data rates of three courses (MATH 1015, MATH 1020, and MATH 1021). The target aligns with this benchmark's longitudinal value average percentage success data rate.

Objective 2.2 (Direct Assessment) aims to elevate achievement through learning outcomes. Two sets of learning outcomes are defined for gateway general education mathematics courses (a total of seven learning outcomes). The methodology involves the use of embedded SLO questions for the assessment process. Historical data from Academic Year 2010-2011 and Academic Year 2022-2023 are employed to set tentative benchmarks and targets for each learning outcome, except for MATH 1029, which has a tentative target of 70% as it has not yet been offered. The targets align with the historical data and the 70% target for MATH 1029.

This structured assessment plan establishes defined goals, methods, and benchmarks for evaluating achievement and successful completion.

Analysis and Comments for Strengthening the QEP

After reviewing the institution's QEP proposal, and participating in interviews and group discussions with faculty and staff, the On-Site Reaffirmation Committee noted the following strengths of the institution's QEP:

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- The QEP was developed through an inclusive and intentional process, involving faculty, staff, and student stakeholders across various committees.
- The QEP aligns with state policy mandated changes.
- The QEP integrates several interrelated success initiatives.
- The institution has a clearly defined topic, "ON-TRACK," which reimagines developmental education student needs through corequisite offerings and support structures.
- The student learning outcomes are clearly defined.
- There are significant financial resources allocated to execute and sustain the QEP.

The On-Site Reaffirmation Committee identified the following opportunities for improvement for the institution's consideration:

- Review QEP oversight and develop a clear set of responsibilities for QEP leadership
- Examine the benefits of comingling in corequisite courses.
- Develop structured professional development process.
- Consider synchronous or hybrid corequisite courses instead of asynchronous corequisite courses.
- Create and implement mid-course iterative course assessments.
- Develop an integrated process to align student supports to identified gaps from mid-course iterative course assessments.
- Integrate a credential of value into the support course.

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Part IV.   Third-Party Comments

If an institution receives Third-Party Comments, the institution has an opportunity to respond to those comments and the On-Site Reaffirmation Committee reviews the response as part of its comprehensive evaluation of the institution.

The Committee should check one of the following:

_X_   No Third-Party Comments submitted.

_____   Third-Party Comments submitted. *(Address the items below.)*

> *1. Describe the nature of the Comments and any allegations of non-compliance that may have been part of the formal Third-Party Comments;*
>
> *2. Indicate whether the Committee found evidence in support of any allegations of non-compliance.*
>
> *If found to be out of compliance, the Committee should write a recommendation and include it in Part II under the standard cited with a full narrative that describes why the institution was found to be out of compliance and the documentation that supports that determination.   In this space, reference the number of the Core Requirement, Comprehensive Standard, or Federal Requirement and the recommendation number cited in Part II.*
>
> *If determined to be in compliance, explain in this space the reasons and refer to the documentation in support of this finding.*

APPENDIX A

Roster of the Off-Site Reaffirmation Committee	Roster of the On-Site Reaffirmation Committee
Dr. Karen A. Bowyer - **CHAIR** President Emeritus Dyersburg State Community College Memphis, TN	Dr. Matteel D. Knowles – **CHAIR** Vice President for Student Services Greenville Technical College Greenville, SC
Dean Celeste H Allis Dean, Arts and Sciences Rockingham Community College Wentworth, NC	Dr. Shawn Adams Vice President of Student Affairs Georgia Piedmont Technical College Clarkston, GA
Dr. Michael V. Ayers Vice President of Academic Affairs (Retired) Southeastern Community College Tabor City, NC	Dr. Angela L. Ash Professor of History Owensboro Community and Technical College Owensboro, KY
Dr. Addie Boone Associate Vice President for Career-Technical Education Southwest Mississippi Community College Summit, MS	Dr. Harry L. Cooke Director of Libraries Gaston College Dallas, NC
Kimberly A. Bradshaw Vice President of Administrative Services and CFO Stanly Community College Albemarle, NC	Dr. Marilyn Murphy Fore President Horry-Georgetown Technical College Conway, SC
Dr. Ben Cloyd Vice President of Effectiveness & Enrollment Mississippi Delta Community College Moorehead, MS	Dr. Russell W. Howton Dean of Planning, Research & Student Success Bevill State Community College Jasper, AL
Dr. Brent Gregory President East Central Community College Decatur, MS	David Kuipers Vice President for Academic Affairs Columbus Technical College Columbus, GA
Mrs. Elaine Stem Director of Library Services Vance-Granville Community College Henderson, NC	Dr. Desmond Lewis (QEP) Associate Vice Chancellor, College Readiness Houston Community College Houston, TX
Mr. Steven T. Woodburn Chief Student Affairs Officer Ashland Community and Technical College Ashland, KY	OBSERVER Dr. Leslie Harper Worthington Director of Institutional Effectiveness Technical College of the Lowcountry Beaufort, SC
SACSCOC STAFF COORDINATOR Dr. Geoffrey C. Klein Vice President	SACSCOC STAFF COORDINATOR Dr. Lynne S. Crosby Vice President

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APPENDIX B

Off-Campus Sites or Distance Learning Programs Reviewed

Off-Campus Instructional Site

Ochsner Lafayette General Orthopedic Hospital
4212 West Congress, Suite 1000
Lafayette, Louisiana 70506
United States

The On-Site Reaffirmation Committee verified that the Ochsner Lafayette General Orthopedic Hospital is one of the institution's off-campus instructional sites, providing instruction in the Associate of Science in Nursing and the Associate of Applied Science in Surgical Technology. Only the program level courses are offered at this site after the student has completed all pre-requisite courses necessary to be admitted to the programs. All instruction is delivered in person.

The institution employs a Director of Nursing as the site administrator as well as nine instructors for the nursing program. The Director and instructors all share time between this site and the main campus. The Surgical Technology program employs a Director of Surgical Technology and two instructors for the program. The Surgical Technology program is only offered at this site and is not offered at the main campus.

The instructors and students have access to institutional and instructional support through the staff on the main campus including all library resources, student affairs resources, financial aid resources, and student support services. All assessments are aligned with classes on the main campus for the nursing program and simulation labs and training equipment for nursing are similar to the equipment available on the main campus. To date, all assessments show no significant differences in educational attainment between the two sites. The Surgical Technology program has classroom space, access to a computer lab, materials storage, and a training laboratory that is sufficient for training in the program.

The On-Site Reaffirmation Committee conducted interviews with the two program directors and several of the instructors, and reviewed evidence that the programs receive the support and resources needed to successfully conduct training. The Committee also conducted interviews with students from both programs, confirming evidence of equitable support services and training as well as expectations for success in the field.

All facilities and equipment were appropriate for the training and the site budget demonstrates a strong commitment to the support and success of both programs in addition to future opportunities for partnership with the associated hospital.

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Distance Education

The On-Site Reaffirmation Committee affirmed the institution has been approved to offer distance education courses and programs since 2009 and that 25.7% of students in Fall 2022 were enrolled fully online. The Committee verified the institution's online programs are a part of "LSUE Online." As such, the On-Site Reaffirmation Committee reviewed the Academic Year 2023-2024 Catalog and Student Handbook, the institution's website, examples of online course syllabi, and other documents related to online teaching and learning and conducted interviews with faculty, staff, and students regarding its distance education programs and services.

Specifically, the On-Site Reaffirmation Committee conducted interviews with the Vice Chancellor of Academic Affairs and Provost, Dean of Arts and Sciences, Interim Dean of Student Affairs, Coordinator of Online Learning, Director of Information Technology, Director of Institutional Effectiveness and Accreditation, and faculty members associated with distance learning. Staff members indicated that if students do not currently have access to a reliable computer, students may check out a computer at the library; and that access to academic and support services are available either online or in-person similar to students taking classes on-campus. The On-Site Reaffirmation Committee also conducted interviews with two students who discussed their experiences in both face-to-face and online classes. Students stated that faculty support and responsiveness was similar to face-to-face classes, and that academic and support service information is located within their online class.

The On-Site Reaffirmation Committee verified the institution utilizes Moodle as its online learning management system; and asynchronous instruction is employed in degree and certificate online program offerings, allowing students to complete coursework around work schedules, family commitments, and other priorities. The Committee confirmed that all associate degree and certificate programs which offer 50% or more in an online format have a program coordinator to assist with facilitating daily functions in conjunction with academic administrators. To ensure the quality of online course offerings, the institution utilizes an internal quality matters process to evaluate the design of those courses. The Committee found that online faculty are held to the same qualifications as faculty teaching traditional courses and hold similar responsibilities. Regardless of instructional method, full-time and part-time faculty are a part of the institutional effectiveness process at the institution by collecting assessment data and seeking continuous improvement of program and student learning outcomes.

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APPENDIX C

List of Recommendations
Cited in the Report of the Reaffirmation Committee

The On-Site Reaffirmation Committee did not issue any recommendations.

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