

## Preparing to read your feedback report . . .

*Your feedback report contains Baldrige Examiners' observations based on their understanding of your organization. The Examiner team has provided comments on your organization's strengths and opportunities for improvement relative to the Baldrige Criteria. The feedback is not intended to be comprehensive or prescriptive. It will tell you where Examiners think you have important strengths to celebrate and where they think key improvement opportunities exist. The feedback will not necessarily cover every requirement of the Criteria, nor will it say specifically how you should address these opportunities. You will decide what is most important to your organization and how best to address the opportunities.*

*If your organization has applied previously, you may notice a slight change in the report. Key themes, which serve as an overview or executive summary of the entire report, now comprise four sections rather than three: (a) Process Item strengths, (b) Process Item opportunities for improvement, (c) Results Item strengths, and d) Results Item opportunities for improvement.*

*Applicant organizations understand and respond to feedback comments in different ways. To make the feedback most useful to you, we've gathered some tips and practices from prior applicants for you to consider:*

- Take a deep breath and approach your Baldrige feedback with an open mind. You applied to get the feedback. Read it, take time to digest it, and read it again.
- Especially note comments in **boldface type**. These comments indicate observations that the Examiner team found particularly important—strengths or opportunities for improvement that the team felt had substantial impact on your organization's performance practices, capabilities, or results and, therefore, had more influence on the team's scoring of that particular Item.
- You know your organization better than the Examiners know it. If the Examiners have misread your application or misunderstood information contained in the application, don't discount the whole feedback report. Consider the other comments, and focus on the most important ones.
- Celebrate your strengths and build on them to achieve world-class performance and a competitive advantage. You've worked hard and should congratulate yourselves.
- Use your strength comments as a foundation to improve the things you do well. Sharing those things you do well with the rest of your organization can speed organizational learning.
- Prioritize your opportunities for improvement. You can't do everything at once. Think about what's most important for your organization at this time, and decide which things to work on first.
- Use the feedback as input to your strategic planning process. Focus on the strengths and opportunities for improvement that have an impact on your strategic goals and objectives.

## KEY THEMES—PROCESS ITEMS

Grand Rapids Community College (GRCC) scored in band 4 for Process Items (1.1–6.2) in the Consensus Review of written applications for the Malcolm Baldrige National Quality Award. For an explanation of the process scoring bands, please refer to Figure 6a, Process Scoring Band Descriptors.

An organization in band 4 for Process Items typically demonstrates effective, systematic approaches responsive to the overall requirements of the Criteria, but deployment may vary in some areas or work units. Key processes benefit from fact-based evaluation and improvement, and approaches are being aligned with organizational needs.

**a. The most important strengths or outstanding practices (of potential value to other organizations) identified in GRCC’s response to Process Items are as follows:**

- Senior leaders demonstrate visionary leadership through their personal involvement in setting GRCC’s vision, mission, RAIDER values, and ends as they establish systematic approaches and deploy key processes. Work life is centered on the mission, vision, RAIDER values, and ends. Each work unit has goals, objectives, and core competencies based upon values and stakeholder requirements. The mission, vision, and values (MVV) are reviewed yearly through the Strategic Planning Process (SPP) and are deployed to all stakeholders through a variety of communication and feedback strategies, including the performance review system and team/committee operations. Additionally, senior leaders personally demonstrate core values by championing College Action Projects (CAPs) and Strategic Goals (SGs) to impart the importance of the MVV to each of the college’s internal and external stakeholder segments, and to ensure that plans cascade down into and beyond the department level. Senior leaders also establish measures for tracking CAP effectiveness. The MVV and ends are further integrated across the college, and feedback is incorporated for key learning in the last phase of the SPP. Finally, senior leaders and other faculty and staff further GRCC’s MVV and ends through a variety of involvements with local community, state, and other organizations.
- GRCC maintains a focus on the future through its systematic and well-deployed SPP, which is integrated and aligned with organizational data, information technology (IT), and information communication systems. The SPP, which aligns with the budget process via departmental CAPs, is designed to take into account key stakeholders and key challenges with its four phases of visioning, planning, deployment, and evaluation (Figure 2.1-1). Each phase includes critical key factors related to the mission, vision, strategic challenges, stakeholders, and action plans. The SPP helps GRCC align its strategic challenges with its Learning-Centered Focus Areas (LCFAs) and SGs, and to take advantage of its strategic leadership throughout deployment of department plans and budgets. The senior team champions the CAPs, and key management teams of the College Planning Council (CPC) develop the LCFAs and SGs in related daily operations and decision making. Further, the Environmental Scan (ES) makes use of information such as the Voice of the Customer (VOC) and other learning processes. This alignment and integration assist GRCC in becoming more agile in adhering to key elements of the

environment and in responding to the changing priorities and challenges it has identified. GRCC has established a measurement system consisting of a Process-Based Management (PBM) Model, the VOC process, a dashboard (DB) measurement system, and Baldrige reviews. This system provides GRCC with multiple methods of feedback in order to implement key changes each year.

- GRCC maintains a strong focus on its stated value of innovation (Figure P.1-1), and the organization leverages and integrates innovation into its academic and infrastructure programs. The college creates a focus on the future by developing innovative programs and benchmarking for innovation with companies such as 3M and IDEO. GRCC, through the development of the Innovation Workspace, the Sustainability Initiative, and other programs, demonstrates leadership in this key area. The organization uses the ES, the SPP, and the goal of increasing its ability to provide leadership in the areas of innovation and sustainability to achieve its objective to be a role model in these key areas. In addition, the PBM model and the DB measurement system track performance relative to innovation and facilitate the implementation of innovative processes and programs. All of the above enable GRCC to promote innovative ideas and program generation, as well as to exemplify the organization's dedication to the core value of managing for innovation.

**b. The most significant opportunities, concerns, or vulnerabilities identified in GRCC's response to Process Items are as follows:**

- Although GRCC has a mature, well-developed, and integrated SPP, it is not clear how approaches lead to evaluation and cycles of improvement in many areas. For example, although GRCC has a process for reporting and responding to violations of legal and ethical behavior, it is not clear how the process incorporates cycles of improvement to identify better methods over time, refinements, or innovation for approaches to ensure legal and ethical behavior or to foster organizational sustainability. Further, although GRCC has several activities in place for training, it is not clear how diversity training or awareness occurs. Additionally, in these and other items, GRCC does not address the "how" in terms of approach and process implementation. Further, it is unclear how the key factor of the PBM model addresses learning and cycles of improvement. The lack of systematic evaluation and improvement of approaches and processes may lead to a loss of focus on improving processes, loss of agility in addressing strategic challenges, and inability to ensure the most effective use of limited resources given the organization's strategic challenge of overcoming state funding reductions and enhancing learning.
- GRCC states four reasons (P.1b [3-4]) why working with partners, collaborators, and key suppliers is a key factor in its processes; however, it appears that there are gaps in the deployment of key processes for these entities. For example, it is not clear whether GRCC's communication process and the legal and ethical behavior processes are deployed, aligned, or integrated with these stakeholder segments. It is also unclear how feedback is requested from suppliers, or how it is used to improve processes or to create cycles of improvement or collaboration. How data and information are shared with suppliers or how the information is used in day-to-day management, such as with the bookstore or food service units, is not evident. Further, it is not clear how the college

communicates its expectations, key performance information, RAIDER values, and legal and ethical requirements to its suppliers and partners, or what performance measures/ indicators the college uses to help manage or assess its performance. Gaps in deployment and integration of key processes to these partners, collaborators, and suppliers may cause all parties to experience miscommunication and unknown expectations, which may create a strategic challenge in the future.

- Although GRCC indicates that competitive and comparative data are key factors in its strategic planning and strategy development processes, it is unclear how it identifies, collects, segments, and uses these data to create cycles of improvement or to deploy key processes within the college. Further, GRCC identifies national comparisons as an important key factor. However, how national comparisons are used is unclear. Other than data from certifying and accreditation bodies and from some state comparisons, it remains unclear where other comparative data, such as from peer organizations outside the state, are used to create opportunities. Without such comparative and competitive data, GRCC may not know what goals or targets to set for itself in a variety of areas, and it may be unable to address its key challenges with knowledgeable data from external competitors or comparators. Finally, it is unclear how GRCC uses its internal student-, faculty-, and employee-segmented data to obtain a clear comparative view of how each of these segments feels about the variety of issues faced by the college.

## **KEY THEMES—RESULTS ITEMS**

GRCC scored in band 2 for Results Items (7.1–7.6). For an explanation of the results scoring bands, please refer to Figure 6b, Results Scoring Band Descriptors.

For an organization in band 2 for Results Items, results typically are reported for several areas of importance to the Criteria requirements and the accomplishment of the organization’s mission. Some of these results demonstrate good performance levels. The use of comparative and trend data is in the early stages.

### **c. Considering GRCC’s key business/organization factors, the most significant strengths found in response to Results Items are as follows:**

- GRCC shows solid financial results, which are improving from year to year. For example, General Fund Net Assets (Figure 7.3-1), College-generated Revenue (Figure 7.3-2), Net Direct Debt per Capita (Figure 7.3-5), and Training Solutions Profitability (Figure 7.3-8) all show GRCC doing “better” over a sustained period of time, from 2003 to 2007. Given GRCC’s strategic challenge of overcoming state funding reductions and its competitive environment with other in-state competitors, these results illustrate that GRCC is achieving its action plans of maintaining financial stability and enhancing revenue generation. These action plans may be especially important for GRCC to achieve its mission and to support a learning environment that promotes student success.
- GRCC’s results address many areas of importance across Criteria Categories, with generally improving performance over a three- to five-year period. When compared to

peer, in-state, and national organizations, results in some key measures such as Workforce Placement Rate (Figure 7.1-9), First-Time Pass Rates (Figure 7.1-12), Western Michigan Perception of Schools (Figure 7.2-13), and the financial results listed above are equal to or better over time than comparative entities. Additionally, in some areas such as legal and ethical behavior and audit results, GRCC has a perfect “zero complaints/discrepancies” record over a five-year period. Performance in these areas appears to reflect the effectiveness of the college’s planning approach and deployment to many key areas. This performance may also indicate progress toward achieving GRCC’s overall intent of sustaining its position as a role-model community college in Michigan, as well as to become a role model for the entire nation.

**d. Considering GRCC’s key business/organization factors, the most significant opportunities, vulnerabilities, and/or gaps (related to data, comparisons, linkages) found in response to Results Items are as follows:**

- GRCC indicates that student and other stakeholder segments are important, as indicated in Student Segments, Stakeholders, and Key Requirements (Figure P.1-3). However, no evidence of segmented results is indicated in a number of key performance areas where GRCC notes that it has surveys and data. Examples of these missing segment results are Graduate Rate (Figure 7.1-5), Course Success (Figure 7.1-6), Transfer Rate (Figure 7.1-7), Student Satisfaction (Figure 7.2-1), Student Engagement—Community College Survey of Student Engagement (CCSSE; Figure 7.2-5), and other key results across Criteria Categories. Without results for key student and stakeholder segments, it may be difficult for the college to distinguish the different needs of different segments. It may also be difficult to plan and deploy processes to address segments and to determine the effectiveness of its planning across all student, employee, and program segments. Finally, without segmented results, GRCC may not fully understand the performance of various segmented employee or student groups and may have difficulty translating performance information into learning cycles for improvement or innovation.
- Although GRCC generally has good to excellent results in a variety of areas, such as legal and ethical behavior and audit results, and provides some comparative data and benchmarks within Michigan, many results do not include comparative or competitive data, even though GRCC identifies comparative and competitive data as a strong effort on its part. GRCC lacks some comparisons and use of external institutional data, as well as goals and targets set by the comparison organizations, to provide a guide as to what other institutions and state or national benchmark organizations report. Comparisons are missing for many Process Items and outcomes in the areas of leadership, student and stakeholder data, measurement and knowledge management, workforce focus, and process management. Additionally, when some comparisons are made, it is not clear if they are the correct comparisons with the correct competitors or benchmarks. Without relevant comparisons or stated goals, GRCC may have difficulty evaluating its true progress and managing its performance in a rapidly changing competitive marketplace, which may inhibit its ability to meet its strategic challenges.

## DETAILS OF STRENGTHS AND OPPORTUNITIES FOR IMPROVEMENT

### Category 1 Leadership

#### 1.1 Senior Leadership

Your score in this Criteria Item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

#### STRENGTHS

- The GRCC leadership team has a well-defined leadership structure, with integration of the Board of Trustees (Board), staff, and faculty that allows for timely decision making and agility through the use of the Performance Excellence Model (PEM), the SPP, and a DB measurement system, all of which allow GRCC to focus on results. Together, the Board, the President's Executive Council (PEC), the College Leadership Council (CLC), and the Academic Governing Council (AGC) collaborate regularly to ensure two-way communication and responses to stakeholder needs. The MVV and ends are made operational through the five Learning-Centered Focus Areas (LCFAs) and align with key processes through the PBM model. Learning and improvement take place through the Knowledge Management Process (KMP) and a yearly review using the Baldrige Criteria and Academic Quality Improvement Program (AQIP) standards, all of which align with the SPP.
- Legal and ethical behavior are priorities for senior leaders who have established an Ethics Monitoring System (EMS) that consists of an Ethics Statement, a process for reporting ethics violations, and the establishment of procedures for responding to reports of potential violations. GRCC provides examples of violations to stakeholders and has created a series of ethics policies in the areas of lobbying, purchasing, harassment, academic freedom, drug awareness, and other key areas of concern. Policies are documented and widely distributed. The EMS and policies are reviewed with new staff at new employee orientation, and training is provided on a yearly reoccurring basis. The EMS has resulted in zero ethical breaches, and 100% of the workforce and 100% of independent board members have been trained from 2003 to 2008.
- Senior leaders create an environment for organizational performance improvement, a focus on the future, and the accomplishment of the college's mission and objectives through several systematic approaches, such as the SPP and PBM model. This environment may motivate GRCC towards process improvement and innovation, as evidenced by its emphasis on innovation as defined in the RAIDAR values. Senior leaders oversee the implementation of CAPs and review progress toward their achievement. Senior leaders use the DB measurement system and the Academic Program Review (APR) to determine program effectiveness and progress, and to identify opportunities for improvement. GRCC uses a formal Sustainability Initiative and Plan that focuses on economic, environmental, and social equity sustainability. Senior leaders also focus on learning and innovation, which are embedded in the ends, mission, and RAIDER values. The PBM encourages a focus on assessment and learning steps, which lead to improvements. Initiatives such as the Innovation Workspace and

Innovation Curriculum are examples of how senior leaders encourage breakthrough change and innovation. The Leadership Development Program (LDP) and succession management approaches are examples of how senior leaders create a focus on the future.

#### OPPORTUNITIES FOR IMPROVEMENT

- Although GRCC deploys the MVV to all stakeholders through written communications and marketing initiatives, it is not clear how senior leaders personally reflect a commitment through their actions. Further, it is not clear who sets the MVV for the organization. A lack of clarity on the setting of the MVV, who is involved, and in what combination the MVV is set, as well as a lack of clarity of how senior leaders' personal actions reflect a commitment to GRCC's values, may make it difficult for GRCC to clarify the roles of the key leadership teams and demonstrate personal commitment to the organization's ends.
- Although GRCC has a process in place that addresses the methods of communication used, what is to be communicated to whom, and how frequently the communication occurs, it is not clear how learning and integration take place. Senior leaders engage the workforce and encourage two-way communication, but how feedback from these processes are used to create cycles of improvement or how they are then integrated into the planning and learning processes are unclear. Without this organizational learning, it may be difficult to integrate GRCC's values and strategic advantages of responsiveness and innovation.
- Although the Strategic Plan provides a foundation for a focus on actions and priorities to achieve them, and there is evidence of deployment and alignment through the DB and CAP review, no evidence of cycles of learning or improvement are evident. Without such learning and evidence of systematic improvements to approaches, it may be difficult for GRCC to effectively address its overall strategic challenges and maximize its strategic advantages.

## 1.2 Governance and Social Responsibilities

Your score in this Criteria Item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

### STRENGTHS

- The Board of Trustees ensures management and fiscal accountability through the deployment of the Policy Review and Development Process (PRDP). Examples of policies include executive limitations, the Governance Process, and Board-President relations. The Board also reviews financial reports at monthly meetings and budget work sessions, and it conducts external audits with a Certified Public Accountant (CPA) firm and Michigan State Audit to ensure the effectiveness of an internal controls structure. GRCC follows up on actions taken so that changes to internal controls are implemented and deployed through public agendas, meetings open to the public, televised sessions, and minutes that are posted for review. Accrediting bodies such as the Michigan Board of Nursing and American Occupational Therapy Association have standards to ensure that academic and support activities meet or exceed industry requirements. Finally, the Board reviews and evaluates the Chief Executive Officer (CEO) and the leadership system to ensure that stakeholder interests are safeguarded and integrated with the MVV.
- GRCC evaluates the performance of all senior leaders. The Board appoints a subcommittee to evaluate the President concerning GRCC’s progress against the ends and vision. The subcommittee provides the review to the board, which uses it to set compensation, benefits, and professional development needs. Senior leaders are evaluated by the President using the Performance Development Discussion (PDD) system. Senior leaders are evaluated on their contributions to the MVV, ends, SGs, leadership effectiveness, and participation on teams using the 360-degree approach. In addition, the Board conducts a self-assessment and committee assessment yearly. Each Board member completes an assessment tool relating strengths and weakness, and suggesting areas of improvement. This system may ensure that GRCC meets its MVV and ends of accountability to the community and stakeholders.
- GRCC addresses the adverse impacts on its communities and stakeholders by establishing numerous community “listening posts.” GRCC deploys its approach by the solicitation of public input through the “Community Conversations” (CC) Process and by the participation of leadership on community boards and other volunteer groups, allowing frequent interaction with community leaders to discover concerns or requirements. The Board conducts CCs two or three times a year to seek input on GRCC’s performance. Outcomes are documented and provided to the leadership at team meetings. All listening post and conversation data are compiled and entered into the EC and evaluated during the SPP. This process allows GRCC the agility to address issues currently or during the next year’s SPP. GRCC manages risk, regulations, and legal requirements through various departments and teams such as the CLC, the AQIP process, the Risk Management Team (RMT), and the Crisis Management Team (CMT). Each team identifies requirements to address during the planning process design.

## OPPORTUNITIES FOR IMPROVEMENT

- Although GRCC provides evidence of a systematic approach and deployment of its governance system, it is not clear how systematic improvements to approaches are made. As an example, even though the Board reviews the audits, and results are provided to various leadership teams, it is not evident how those results contribute to systematic learning or are integrated into the planning processes. Without learning and integration, it may be difficult for GRCC to develop cycles of improvement to meet its responsibilities to achieve the core value of organizational and personal learning.
- Although GRCC has a systematic approach and provides evidence of deployment in addressing adverse impacts, it is not evident that there is a system to support continuous systematic improvements of the CC process. Although the results are documented and indicated in the EC, there is no evidence of learning to improve the process. Without learning and improvement of this approach, it may be difficult for GRCC to keep current with the needs of community stakeholders or to communicate issues back to the community. Additionally, while GRCC shows active support in strengthening its key communities, a service area is defined, the Delta Strategy is used, and leaders are engaged on local boards, the process to improve support for communities is not clear. Without cycles of improvement, it may be difficult for the college to strengthen its support of key communities.

## Category 2 Strategic Planning

### 2.1 Strategy Development

Your score in this Criteria Item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

#### STRENGTHS

- **The Strategic Planning Process (SPP) has four phases: phase 1–visioning; phase 2–planning; phase 3–deployment; and phase 4–evaluation. GRCC revisits long-term strategy every three years and short-term strategy annually. During each cycle, GRCC reviews the mission, vision, RAIDER values, and ends. The SPP is managed through the SGs, LCFAs, and CAPs. Senior leaders champion CAPs and SGs to ensure that plans are cascaded into the department levels. The champions establish the measures for tracking CAP effectiveness and identify the actions to be taken. The SPP is aligned with the MVV, ends, strategic advantages, and strategic challenges.**
- As a part of the annual SPP process, each department develops a plan to align with the SGs. DBs are deployed at the unit level, linking the dashboard measures with the SGs. Measures, action plans, and targets are reviewed annually. The Environmental Scan includes tracking market changes as well as stakeholder needs and requirements. The improvement process includes a review of DB measure results and feedback from AQIP-related activities.
- Strategic objectives are captured in LCFAs, SGs, and CAPs. CAPs are identified in the SPP (Figure 2.1-2). Longer-term time horizons for CAPs are three years and short-term horizons are every year. Data are reviewed annually in order to set new objectives. All departments identify CAPs annually and are required to discuss challenges and opportunities. These discussions extend to the department, team, and individual levels; focus on short- and long-term objectives; and establish priorities to address strategic challenges. The ends are deployed to all departments by the President who meets individually with process champions and their teams. CAPs are matched against the key strategic challenges described in GRCC Strategic Challenges and Goals (Figure P.2-4), and the SPP process allows the college to maintain a focus on the future.

#### OPPORTUNITIES FOR IMPROVEMENT

- The visioning phase of the SPP gives clear evidence of learning and improvement, such as formation of LCFA teams to review and refine objectives and assignment of senior leaders as CAP champions; however, little evidence of cycles of learning or improvement is shown for the other three phases of the planning process. Without attention to systematic cycles of learning and improvement, it may be difficult for GRCC to sustain its ability to execute the Strategic Plan.
- It is clear that each department is responsible for completing a template that addresses strategic objectives. However, it is unclear how strategic objectives are deployed or how

templates are developed throughout the college constituencies. Without a plan for deployment and template development across the organization, the college may have difficulty fully addressing opportunities for innovation in educational programs, offerings, services, and operations.

## 2.2 Strategy Deployment

Your score in this Criteria Item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

### STRENGTHS

- As a part of phase 3 (deployment) of the SPP, planning templates, which include SGs, CAPs, and DB measures and targets, are distributed to each department. Senior leaders champion each of the CAPs and discuss expectations with the department heads for achieving them. Departments develop plans to address CAPs and request funding as a part of the budget development process. Once the SPP is finalized and approved, meetings are held to communicate the Strategic Plan to all faculty and staff. Measures are established for plan implementation and outcomes, which are tracked over time to ensure the plan's effectiveness. Plans are aligned with the budget process through the deployment phases. The SPP aligns with the MVV and ends, as well as college and departmental DBs, which allows GRCC to focus on the future.
- The SPP is evaluated semiannually. The CLC reviews action plans with staff and faculty, who are involved with CAPs through the Progress to Plan (PTP). Mid-course corrections are possible through the Quarterly Dashboard Review. Lagging performance on dashboards triggers modified plans by the CAP team or the CLC. Listening posts have been used to establish the need to change direction on CAPs. Feedback from listening posts presented the need for off-campus sites, a need that is now being deliberated by the Dean's Council. The evaluation phase of the SPP involves input from key communities that have influence over the direction of the plan through listening posts.
- Short- and long-term action plans and key human resource (HR) plans (Figure 2.1-2) are designed to address the CAPs. Performance Projections (Figure 2.2-2) and DBs provide data, which are aligned with the SPP. Dashboards are designed to link to the CAPs and LCFAs. Each of the CAPs has an action plan for each of the five LCFAs, which are further linked to SGs, measures, and main objectives. Short- and long-term plans are embedded in the CAPs and SGs, which also include HR plans. These plans are deployed through the departments by senior leaders who champion the CAPs, as described in 2.1(a). CAPs are aligned with strategic challenges and dashboard measures, and they are embedded in the budget process.

### OPPORTUNITIES FOR IMPROVEMENT

- The SPP includes a number of opportunities for evaluation through listening and learning, such as the listening posts and various team quarterly reviews. However, few improvements to the process are evident as a result of these listening opportunities. Without evidence of systematic improvements, it may be difficult for the organization to determine how the SPP reacts to changes in student and stakeholder markets and changes in workforce capability and capacity, or how GRCC ensures that the overall system reinforces organizational alignment.

- Performance measures (Figure 2.1-2) are listed for each SG and reflect expected improvements through CAPs; however, Performance Projections (Figure 2.2-2) show few comparatives. Therefore, it may be difficult for the organization to determine how targets and comparisons should be chosen, or how feedback on missing targets is provided. Without clarity on these matters, it may be difficult for the organization to determine if such improvements will sustain GRCC’s position as a role-model community college in Michigan and advance it as a role model for the nation; maintain its competitive position; and exceed expectations for students and stakeholders. Without appropriate comparisons, it also may be difficult for the organization to compare benchmarks and goals to past performance and to understand needs for improvement.

## Category 3 Student, Stakeholder, and Market Focus

### 3.1 Student, Stakeholder, and Market Knowledge

Your score in this Criteria Item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

#### STRENGTHS

- Student Segments and Accommodations (Figure 3.1-1) identifies GRCC’s key student segments: developmental, minority, first-year, dual enrollment, dislocated workers, and special populations. Student segments and their requirements are determined as part of the SPP, during the visioning phase, and these requirements are updated each year. Data from the ES and VOC are used to determine segments, education needs within GRCC’s market area, and special needs for groups of students. Changes in student segment needs are based upon consideration of special needs, gaps in satisfaction, and service accommodation needs as found in the ES and VOC data. Determination of market segments and stakeholder requirements are integrated into the SPP.
- GRCC’s Student and Stakeholder VOC Methods (Figure 3.1-2) are systematic and designed to address a wide variety of stakeholders. Stakeholder surveys are deployed at varying rates and frequencies from daily to annually. These data are analyzed to determine key requirements, needs, and changing expectations. Student complaint data are used to refine GRCC’s understanding of student and stakeholder needs. Feedback from community leaders is also used for input into stakeholder requirements. Using a variety of stakeholder feedback methods helps the college plan educational programs, offerings, and services.
- The Student Affairs Department (SAD) has the responsibility to understand student needs and identify methods to become more student- and stakeholder-focused. Institutional Research and Planning (IRP) and SAD distribute aggregated and analyzed data, while VOC data are evaluated during the SPP to determine the need for new education or support services. Information from feeder schools and potential students is gathered through one-on-one discussions during school visits and articulation agreements. Data from the variety of VOC methods are analyzed and used to better satisfy student and stakeholder needs and desires.

#### OPPORTUNITIES FOR IMPROVEMENT

- While GRCC assesses the VOC as a part of the PBM cycle, and the VOC appears to be well deployed, evidence of systematic improvements is unclear. Learning and improvement cycles may be in the early stages. Without systematic cycles of learning and improvement, it may be difficult for GRCC to keep current with changes in stakeholder needs and requirements, as well as stay current with changing directions within the educational community.
- It is unclear how GRCC gains knowledge about students who are currently served by other education providers. Although the primary competitors are listed in the Organizational

Profile, it may be difficult for the college to understand how its population of potential students are served by other providers. Without this knowledge, it may be difficult for GRCC to ensure that it meets the requirements of students and stakeholders and to develop new services.

### 3.2 Student and Stakeholder Relationships and Satisfaction

Your score in this Criteria Item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

#### STRENGTHS

- **GRCC’s stakeholder relationship-building methods are identified in Figure 3.2-1. These methods extend to all students and stakeholders and are in line with GRCC’s commitment to sustaining strong student and stakeholder relationships, as well as generating loyalty. Key access mechanisms for students include the Enrollment Center, which is designed to centralize intake services to students into one single location. Student Services is responsible for the determination and deployment of contact requirements for all stakeholders. GRCC employs outreach programs with all feeder schools and 25 adjacent high schools to help to reach future students. These approaches address stakeholder segments. Learning Corners offer General Educational Development (GED) and English as a Second Language (ESL) preparation and credit classes for at-risk populations. Improvement cycles related to the student intake process have resulted in the opening of the Enrollment Center, Learning Environments Project, First-Year Experience, Learning Corners, concurrent enrollment agreement, joint grant proposals, and transfer guides. These initiatives are aligned with the college’s mission, vision, ends, and core values of responsiveness and service.**
- The Complaint Management Process and student suggestion boxes are used to manage student complaints. A cross-functional complaint team meets quarterly and prepares summary reports for the Dean’s Council and the CLC. Comment cards are reviewed by Student Affairs and forwarded to the appropriate office for action. All employees are trained and empowered to handle complaints on the spot. The PBM is used to guide process owners in improvement annually.
- The Satisfaction Determination Process is embedded in the VOC process and kept current through multiple annual evaluations by the Student Affairs Leadership Team, as well as by annual evaluations by process owners and/or teams. CCSSE, CCs, and Advisory Teams are all used to determine the satisfaction of students and stakeholders. Trends, benchmarks, and results are reviewed to enhance the knowledge of faculty and staff to improve service offerings. Follow-up calls are placed to those who voice complaints, write negative comments, or suggest improvements on comment cards. These processes are used to inform stakeholder needs as well as the Student Service Excellence Guidelines (Figure 3.2-2), which are deployed to all faculty and staff, including new employees at orientation.

#### OPPORTUNITIES FOR IMPROVEMENT

- **Although the Process Based Management (PBM) Model is used throughout the college, cycles of learning and improvement for the Complaint Management Process and the Satisfaction Determination Process are not evident. There is no evidence of a systematic improvement approach related to the determination of student engagement through the**

**CCSSE, student satisfaction through the VOC, or stakeholder satisfaction through CCs and Advisory Teams. Without the evaluation and improvement of these processes, it may be difficult for GRCC to know if it is reaching all of its stakeholders and determining how to meet their needs.**

- It is unclear how the Complaint Management Process is deployed to stakeholders, such as the key constituents (e.g., alumni, retirees, donors, and friends) listed in Figure 3.2-1. There is no evidence how data from complaints are used to minimize student dissatisfaction. Without a clear complaint management system that can be accessed by all students and stakeholders, it may be difficult for GRCC to determine how it can make agile course corrections to processes that service and support these stakeholders.
- Although GRCC has a systematic approach to determine the satisfaction and engagement of students through the CCSSE and the satisfaction of stakeholders through CCs and Advisory Teams, it is not clear how GRCC keeps approaches to determine satisfaction current with educational services and directions.

## Category 4 Measurement, Analysis, and Knowledge Management

### 4.1 Measurement, Analysis, and Improvement of Organizational Performance

Your score in this Criteria Item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

#### STRENGTHS

- **GRCC uses the PBM Model (Figure 6.1-3), the SPP (Figure 2.1-1), and the DB measurement system to select, collect, align, track, and integrate data for measures of organizational performance. The organizational performance measures are cascaded from senior leaders to process owners, monitored at the department level, aligned with LCFAs and the SPP, and reviewed quarterly. By aligning the PBM, SPP, and DB, the organization may be able to improve process management and organizational performance, as well as anticipate and respond to unexpected organizational or external changes.**
- The DB measures are integrated into three of the four phases of the SPP (Figure 2.1-1): phase 2 (planning: reset college dashboard), phase 3 (deployment: reset department dashboards), and phase 4 (evaluation: conduct quarterly dashboard review process). The DB tracks organizational measures, is reviewed quarterly, and is evaluated annually. By tracking, reviewing, and evaluating college performance measures, GRCC may be able to analyze performance for organization-wide improvement.
- GRCC uses three methods to ensure that the results of organizational performance reviews are incorporated into the evaluation and improvement of key work processes. Methods include communicating to key process owners, evaluating processes with the PBM Model (Figure 6.1-3), and aligning the measurement system with key processes as illustrated in the Performance Excellence Model (PEM) (Figure 1.1-1). By identifying methods to ensure that the results of performance reviews are incorporated into the evaluation of key work processes, GRCC has the opportunity to improve key work processes, contribute to organizational strategic planning, and anticipate and respond to rapid or unexpected organizational or external changes.

#### OPPORTUNITIES FOR IMPROVEMENT

- Although GRCC refers to the monitoring of process-level measures for tracking daily operations in each department, it is not clear how the data and information from process-level measures are used to support organizational improvement. Without evidence of how data and information are used to monitor and improve daily operations, it is unclear how the results of the organizational performance analysis and review contribute to organizational decision making and innovation.
- GRCC identifies sources of comparative data (Figure P.2-2) and provides a detailed analysis of results from the Community College Survey of Student Engagement (CCSSE) every other

year to the CLC, Dean’s Council, School of Arts and Sciences, and Student Affairs Leadership Team. However, it is not clear how comparisons from the National Community College Benchmark Project (NCCBP), the Personal Assessment of the College Environment (PACE), The Avalon Group (TAG), or the state are used to assess performance. Without the use of comparative data, GRCC may find it challenging to respond rapidly to changing organizational needs and challenges.

- In the Dashboard (Figure 4.1-1), GRCC includes the key indicators of community perception and employer perception as “To Be Determined (TBD)”; however, community and employee perception may relate to GRCC’s core MVV and ends (Figure P.1-1). Without identifying key indicator measures, GRCC may be missing opportunities to measure how it is meeting the requirements of these two LCFAs.
- Although GRCC encourages the use of the PBM Model (Figure 6.1-3) to improve key processes and services, it is unclear how the PBM process is reviewed or improved. Without review of this process, GRCC may find it difficult to assess organizational success, performance relative to competitors, and progress relative to strategic objectives and action plans in order to respond to changing organizational needs and challenges in its internal and external environments.

## 4.2 Management of Information, Information Technology, and Knowledge

Your score in this Criteria Item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

### STRENGTHS

- GRCC’s Information Technology (IT) architecture permits data and information accessibility. A Campus-Wide Information System (CWIS) provides widespread access to information and data to the faculty, staff, students, suppliers, partners, collaborators, community, and other stakeholders. IT is accessible anywhere on campus via a college network, college Web pages, and CWIS. In addition, the college is wired, with a wireless network canopy that covers 100% of the campus for 24/7 access. With opportunities for data and information access, college students and stakeholders have the access and availability for needed data and information. This is evidence that GRCC considers the needs of its stakeholders, including students, the workforce, suppliers, partners, and collaborators.
- GRCC has several methods in place to maintain the leading-edge for its technical infrastructure. For example, several cross-functional teams are in place: the Learning Environment and Space Planning (LET) Team meets monthly and establishes classroom standards and plans for needed upgrades, and the CWIS and Blackboard leadership teams meet regularly to review the Blackboard and its functionality. In addition, classroom and laboratory computers are on a three-year replacement cycle, and process and procedures exist to ensure software and hardware are current. By using various methods to keep the technical infrastructure current, GRCC may maintain a leading-edge technology capability and meet the continued growth and challenges of current technology infrastructure, as well as enhance workforce recruitment and retention, to prepare the workforce for changing capability and capacity needs.
- GRCC ensures organizational data, information, and knowledge accuracy, integrity, reliability, timeliness, security, and confidentiality by several methods, such as an information security policy; Secure Socket Layer (SSL) and Internet protocol (IP) encryption to protect passwords and data; a detailed hiring process; the PDD system; education, training, and development initiatives; screen sources for hardware and software; defined specifications; unique identifications for all users; hardware specifications; daily back ups; redundant systems; and a secondary data center. By establishing several methods to ensure the accuracy, integrity, reliability, timeliness, security, and confidentiality of data, GRCC may continue to provide efficient and effective data, information, and knowledge.
- GRCC manages organizational knowledge in multiple ways, such as through the Knowledge Management Process (KMP), to ensure the safety and security of information and transfer of organizational knowledge. GRCC also manages knowledge through the Knowledge Collection and Transfer Methods (Figure 4.2-1) that consists of four steps: identify, collect, store, and transfer. The organization also puts a focus on documentation, shared access, timely analysis and review of process outcomes, technology-facilitated methods for transferring knowledge, and CAP to review methods to collect and transfer knowledge, and it

is developing a repository system. By creating processes to collect and transfer knowledge, GRCC may continue to build its knowledge assets and manage organizational knowledge and sustainability.

#### OPPORTUNITIES FOR IMPROVEMENT

- GRCC provides help desk assistance to faculty and staff, as well as the Student Technology Help Desk that provides frontline technology support for students. However, it is not clear how GRCC ensures that hardware and software are user-friendly, and there is no evidence of policies and procedures that assess software for user-friendliness. Without such a systematic process, GRCC's ability to ensure the quality and availability of needed hardware and software availability for staff, faculty, students, and other stakeholders may be challenged.
- It is not clear how GRCC deploys needed data and information to satellite campuses or how data and information are transferred to off-campus facilities and locations. Because a significant portion of the workforce and student segments are located at these locations, it may be difficult to determine how data and information are deployed to all students and stakeholders.
- Although GRCC includes a list of types of knowledge to collect for knowledge management (Figure 4.2-1), it is not clear how these types are documented or what process is used to determine key data and knowledge. Without identifying and documenting specific key data and knowledge, GRCC may not be able to collect and transfer workforce knowledge; transfer relevant knowledge; identify, share, and implement best practices; or assemble and transfer relevant knowledge for use in the organizational strategic planning process to ensure that it is managing organizational knowledge.

## Category 5 Workforce Focus

### 5.1 Workforce Engagement

Your score in this Criteria Item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

#### STRENGTHS

- **GRCC uses PACE every two years and the Staff Opinion Survey (SOS) annually to determine key factors that affect workforce engagement and satisfaction. Other methods such as Learning Day, exit interviews, focus groups, and informal discussions supplement the major surveys. GRCC identifies four key engagement and satisfaction factors that drive initiatives to improve workforce satisfaction; these factors are work that adds value, role in decision making, collaborative work environment, and professional development opportunities. Workforce engagement occurs via a team-based culture and cross-functional teams such as CAP, PBM, and Workspace teams. To assess workforce engagement and satisfaction, GRCC also uses PACE and SOS, supplemented by Baldrige-based assessments and other methods. Workforce engagement is assessed informally by workforce involvement and participation in various activities, as well as by informal feedback from employees. The multiple methods used by GRCC to assess workforce engagement and satisfaction may show the college's commitment to its factor of faculty and staff retention (Figure P.2-1).**
- GRCC uses a formal performance management system for all workforce segments identified in the Organizational Profile (P.1a[3]) that supports high-performance work and workforce engagement. Performance management approaches include a faculty evaluation process, performance development discussions and learning plans for staff and nonunion employees, and various methods for union work groups. Workforce goals and development plans are aligned with the MVV and ends. Strategic initiatives cascade from division to department to individual work goals. The management system addresses several workforce requirements and expectations, such as a role in decision making, a collaborative work environment, and opportunities for development.
- GRCC uses several approaches to address workforce learning and development, such as the Learning Academy, Woodrick Diversity Learning Center, a tracking system, the Web site, distance learning, and instructional technologies. Learning needs are determined via surveys, Learning Days, and performance discussions. Professional development is a key factor for the workforce; therefore, GRCC provides a college-wide approach to ensure holistic learning for employees. Learning days are aligned with the SPP by incorporating themes that are applicable to the current year's goals, as well as by incorporating learning opportunities that are aligned with CAPs and core competencies. The workforce development system addresses organizational performance improvement and innovation through DB training for all leaders. This training provides the leaders with necessary skills to facilitate an understanding of, to implement, and to use the measurement system.

## OPPORTUNITIES FOR IMPROVEMENT

- **It is not clear how workforce development approaches foster an organizational culture conducive to motivating the workforce in some areas. Diversity education is a core competency and workforce requirement; however, it is not clear how the workforce benefits from the community's diverse ideas, cultures, and thinking. Also, it is not clear how the college systematically ensures the participation of employees in the Learning Academy, which is a key organizational factor related to workforce development.**
- It is not evident whether GRCC has a clear approach to leadership development. Although the college's Leadership Institute is in the early stages of development, it is not clear how leaders are chosen to participate or if all have equal opportunities. Also unclear is the breadth of leadership opportunities available or how this plan contributes to effective succession planning for senior leadership positions. Without systematic and clearly defined approaches to leadership development, it may be difficult for the college to fulfill its workforce requirement of the opportunity for development. Without clear cycles of learning and improvement, it also may be difficult for the college to effectively manage career progression for its workforce.
- Although it is stated that engagement and satisfaction results are integrated with other measures on the college DB, as well as DBs at other levels, no examples are evident to show how analyses of these results are used to identify opportunities for improvement. Without clear integration of workforce engagement and satisfaction results with other professional results, it may be difficult for GRCC to meet its strategic challenge of faculty and staff recruitment and retention.

## 5.2 Workforce Environment

Your score in this Criteria Item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

### STRENGTHS

- GRCC hires, recruits, and places employees using a formal hiring process that includes position authorization forms and written justifications with approval from Vice Presidents (VPs) and the President’s Executive Council (PEC). The Human Resources Department and leaders develop recruitment and affirmative action strategies, as well as provide orientation activities such as the Faculty Institute, to ensure that new employees understand the culture and skills needed to perform their jobs. This process may help GRCC focus on its strategic factor of recruitment and retention of faculty and staff.
- GRCC manages and organizes the workforce to accomplish work using four major divisions: Academic and Student Affairs, Organizational Development, Learning Resources and Technology Support, and Financial Services. Each division has VPs, Deans, Associate Deans, and Directors. All work units are charged with meeting the mission, goals, and objectives and are aligned with ends and RAIDER values. Job descriptions reinforce the core competencies and RAIDER values, and all employees are expected to collaborate and work in teams toward these ends. These processes work toward a collaborative work environment, which the college has determined to be a key engagement and satisfaction factor for faculty and staff.
- GRCC ensures workplace health, safety, and security using the team-based culture. The Employee Wellness Team, the Risk Management Team, and Personal Enrichment Team all contribute to work place health. The Risk Management Team is responsible for safety and stresses ergonomic issues and safety training. Other activities include a Web site, fitness center, “Ask a GRCC Nurse,” an Employee Wellness Team, Weight Watchers at Work, monthly health newsletter, mapped indoor walking routes, and the President’s Health and Wellness Award, which is presented annually to a role-model employee. This focus on workforce health and safety provides employees with the environment needed to exhibit GRCC’s value of service.

### OPPORTUNITIES FOR IMPROVEMENT

- Although GRCC assesses workforce capability via the Faculty Profile and the Selection Appointment Activity Record; and skill sets are monitored, updated, and regularly documented by employees and supervisors; it is not clear if the approach is systematic or to what extent the workforce capability assessment is deployed to all identified workforce segments. Also, no evidence is provided to support cycles of learning and improvement for the Faculty Profile and Selection Appointment Activity Record. For example, GRCC identifies the strategic factor of workforce retention and capacity, but it is not clear if there are measures or a process in place to effectively assess this. Without clear measures, GRCC may not be able to adequately assess workforce capability and capacity.

- Although GRCC has a formal hiring process, it is not clear how the process captures the diverse ideas, cultures, and thinking of the hiring community. Also, it is not clear how improvements are made to the process or how it is fully integrated and aligned throughout GRCC. Without capturing the diverse ideas, cultures, and thinking of the hiring community, GRCC might not be able to fulfill its ends for a diverse workforce.
- Although GRCC uses a variety of services and benefits to ensure workplace health, safety, and security, it is not clear how information is gathered from the workforce to meet the needs of all employees. Nor is there evidence to support a fully deployed, systematic process for workplace health, safety, and security that is integrated and aligned to meet organizational needs and goals. Without such a process, the organization may be hindered from achieving its mission and vision.

## Category 6 Process Management

### 6.1 Work Systems Design

Your score in this Criteria Item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

#### STRENGTHS

- GRCC follows a systematic process to identify its core competencies during the visioning phase of the SPP. The organization uses the process to stay sensitive to changing conditions, to reinforce existing competencies, and to identify new competencies to meet its goal of competitive advantage. The core competencies are directly linked to the mission and CAPs (Figure 6.1-1) and facilitate agility to changing needs. Additionally, GRCC strives to maximize internal resources to achieve its objectives. GRCC outsource functions for which in-house expertise is not available, such as the bookstore and food services. Decision making is conducted by senior leadership and integrated into the SPP. Leveraging internal resources to achieve objectives while using external resources for support functions allows GRCC to focus on its core competencies and strengthen its competitive advantage.
- GRCC's Key Processes, Requirements, and Measures (Figure 6.1-2) are directly related to core competencies and are well-aligned and integrated to meet the ends. Process owners use a systematic approach, the PBM model, to understand, reflect, and create learning environments that maximize student learning, meet the critical needs of stakeholders, and contribute to organizational success.
- GRCC deploys the four-step PBM model of plan, do, assess, and learn (Figure 6.1-3), integrated with the VOC to design, redesign, and innovate processes, in order to achieve the college's goals and ensure that processes and innovations are aligned with LCFAs, CAPs, and SGs. Programs like General Learner Outcomes, Course Approval and Review Process, Academic Quality Improvement Program, Financial Aid Customer Express Initiative, and Program Review are used during the assess and learn step (deployment) of the PBM model.
- Emergency readiness, including disaster management, prevention, and business continuity, is addressed by the Crisis Response System (CRS), with an approach designed to apply to all emergency situations. The approach is hierarchical, decentralized, and uses an Emergency Planning Team, a Crisis Management Team, a Crisis Response Team, and an Emergency Phone Alert System, to deploy the CRS information and manage emergencies. The process includes regular drills, feedback, and learning, and it is linked and integrated with training, Learning Day, and professional development. This is consistent with GRCC's RAIDER values and linked to the key stakeholder requirement of responsiveness.

#### OPPORTUNITIES FOR IMPROVEMENT

- Although there is some mention of inputs from stakeholders, it is unclear how GRCC incorporates partners, collaborators, and key suppliers into the work system, process design,

and redesign. This process may be particularly important since some of the collaborators also happen to be competitors. Without input from these key segments, it may be difficult for the college to determine how these work systems address the requirements of all stakeholder groups.

- **Although GRCC refers to process variability and its importance, it is not clear how this is defined, measured, or responded to among the different processes. Process variability can affect the quality and consistency of educational programs and services. Also, the PBM model is broad-based, and the links between the model and the DB measures are not clear. Without such clarity, it may be difficult for GRCC to understand how it can effectively monitor its progress toward related strategic goals.**

## 6.2 Work Process Management and Improvement

Your score in this Criteria Item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Scoring Guidelines for Process Items.)

### STRENGTHS

- Work process management at GRCC includes the four-step PBM Model (Figure 6.1-3) and the Program Review Process for programs and departments. The process is deployed to all key process managers and academic programs. Process owners are expected to use the plan, do, assess, and learn steps to evaluate the performance of their processes. The PBM is linked to the SPP and LCFAs. Cycles of learning and improvement include identification of General Learner Outcomes (GLOs).
- Work process improvement occurs regularly at point-of-service delivery and through the assess and learn step of the PBM model. The Course Approval and Review Process (CARP) is used to systematically evaluate and improve all existing courses. AQIP identifies action projects for improvement that are consistent with GRCC's key strategies as well as its focus on learning. All process owners and departments are expected to review and improve their processes using the PBM. The work process improvement system is aligned with the mission, vision, RAIDER values, and ends. The Financial Aid Customer Express (FACE) Initiative was developed as a result of sharing processes across divisions.

### OPPORTUNITIES FOR IMPROVEMENT

- Although GRCC appears to have a two-pronged approach to learning and improvement in place through the PBM Model (Figure 6.1-3), improvement of the PBM process seems to be in the early stages. Although each department manager who is responsible for improvement of processes is required to use the PBM model, there seem to be few cycles of learning and improvement to the process itself. Without this learning, it may be difficult for the organization to determine how to continuously improve the PBM cycle itself, which may be helpful to process owners who are required to use it.
- The PBM Model (Figure 6.1-3) does not seem to be clearly linked to the DB and other assessments, such as CARP, Baldrige, and AQIP. These assessments are described in the Organizational Profile as part of GRCC's improvement processes. Without such assessment connections identified, improvements of the assess and learn steps of the PBM model may not occur or align with relevant and changing DB measures.

## Category 7 Results

### 7.1 Student Learning Outcomes

Your score in this Criteria Item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5b, Scoring Guidelines for Results Items.)

#### STRENGTHS

- The Number of Graduates (Figure 7.1-2) and Number of Academic Foundations Program (AFP) Graduates (Figure 7.1-3) have grown consistently over the last five years, as has the number of Minority Graduates (Figure 7.1-4). For example, the number of graduates has increased from 1,205 in 2003 to 1,527 in 2007; the number of AFP graduates has increased from 162 in 2003 to 274 in 2007; and the number of minority graduates has increased from 150 in 2003 to 228 in 2007. GRCC ranks first in Michigan among community colleges in the number of graduates. This measure is aligned with the National Commission on Community Colleges Center for Innovative Thought and its priorities, as well as the college's MVV and ends. These measures are linked to the DB measurements and reviewed quarterly.
- Most measures of workforce development show positive levels and trends. The Workforce Placement Rate (Figure 7.1-9) has steadily increased over the five-year period from 96 in 2003 to 98.5 in 2007 and is higher than peer colleges in Michigan (97.3 in 2007). Job training completion also increased from 2003 to 2007. Occupational First-Time Pass Rates (Figure 7.1-12) in occupational therapy assisting, licensed practical nurse, radiology technician, dental hygienist, and law enforcement are also higher than comparisons in Michigan, as well as in the nation.

#### OPPORTUNITIES FOR IMPROVEMENT

- **Although GRCC participates in a number of benchmarking projects, such as the National Community College Benchmarking Project (NCCBP), relatively few measures use comparisons. Also, very few benchmarks or targets are presented. Measures of academic success are strongly aligned to the college's MVV, ends, and LCFAs; and are tracked through the CAP and DBs; however, without comparisons to GRCC's peers through higher education institutions or external benchmark organizations, it may be difficult for the organization to understand the relative performance of the institutional gains in student academic success. Relevant comparisons and targets may help reveal how well the college is meeting its goals related to student learning, how well it compares against competitors and peers, and what improvements may need to be implemented to enhance learning.**
- Although initiatives have been developed, for the past five years, a downward trend has occurred in student academic progress (Figure 7.1-1). Comparisons of success rates are trending downward and are below national levels. Transfer Student Success (Figure 7.1-8) has stabilized over the past three years after a substantial decline from 2003 to 2004; however, their success rates remain below that of native students. Although transfer student

success is higher than the NCCBP comparison in 2005, this comparison contains only one data point. Transfer rates, although higher in comparison to statewide and national averages (Figure 7.1-7), declined substantially from 2003 to 2004.

- **GRCC has identified its important student segments as developmental (AFP), minority, first-year students, dislocated workers, dual enrollment, and special populations. Yet, few of the data that are presented related to student learning are segmented by these key student groups. Without data segmented by the various student groups, it may be difficult for the organization to determine how it should address the unique needs of various student segments to improve learning.**

## 7.2 Student- and Stakeholder-Focused Outcomes

Your score in this Criteria Item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5b, Scoring Guidelines for Results Items.)

### STRENGTHS

- Trends have increased over time for all measures of satisfaction and student engagement. Overall Student Satisfaction (Figure 7.2-1) improved from 65.5% in 2004 to 75.3% in 2008. Satisfaction with the key requirements of competency, involvement, innovation, and access have all improved from 2004 to 2008 (Figure 7.2-2). Student dissatisfaction has decreased favorably from 5.9% in 2004 to 4.0% in 2008 (Figure 7.2-8). In addition, complaints are lower in 2008 than in 2006 (Figure 7.2-10), and Fall-to-Fall Retention (Figure 7.2-12) has increased from 61.3% in 2003 to 64.0% in 2007. Student engagement as measured by overall, relationship, education and personal growth, and student services (CCSSE) has remained stable over the two-year time period (Figures 7.2-5 and 7.2-6).
- The satisfaction of minority and female students (Figure 7.2-3) has increased. The satisfaction of females has increased nearly 12% from 2004 through 2006 and that of minorities has increased by 5% from 2006 to 2008. In addition, minority student satisfaction has increased from 2006 to 2008 on the key requirements of competency, involvement, innovation, and access (Figure 7.2-4). Minority students are among those listed in GRCC's Organizational Profile (Figure P.1-3) as key market segments.

### OPPORTUNITIES FOR IMPROVEMENT

- **Comparison data are missing for some key measures (e.g., Figures 7.2-1, 7.2-3, 7.2-4, 7.2-6, 7.2-7, 7.2-8, 7.2-9, 7.2-10, and 7.2-11). Except for some reporting on minority and female results, relatively little segmentation is provided by key student segments (i.e., developmental, first-year students, dislocated workers, dual enrollment, and special populations), as identified in the Organizational Profile. Also, many of the figures lack targets, and in some cases (e.g., Figures 7.2-1, 7.2-8, and 7.2-10), it is unclear which segments are being reported. Without attention to segmentation, adequate targets, and relevant comparative information, it may be difficult for GRCC to manage by fact and to determine its performance on the satisfaction and dissatisfaction of all its key student segments, especially as compared to those of competitors and other similar organizations.**
- Engagement of AFP and minority students is presented in Student Segment Engagement—CCSSE (Figure 7.2-6). However, only one time period is reported, and this time-period is not labeled. Without more than one data point and a trend to observe, GRCC may find it difficult to evaluate student satisfaction and engagement levels among student segments.

### 7.3 Budgetary, Financial, and Market Outcomes

Your score in this Criteria Item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5b, Scoring Guidelines for Results Items.)

#### STRENGTHS

- **Although the state of Michigan has seen faltering economic conditions, GRCC's General Fund Net Assets (Figure 7.3-1) have grown from \$9.47 million in 2003 to \$9.91 million in 2007. Student Success Planning (Figure 7.3-3) has grown from \$31.6 million in 2003 to \$38.6 million in 2007, and Billing Units (Figure 7.3-6) have gone up from 146.9 thousand in 2003 to 162.3 thousand in 2007. Net Direct Debt per Capita (Figure 7.3-5) has decreased from \$101.90 per taxpayer in 2004 to \$85.50 per taxpayer in 2008. Cost Comparison—Instruction vs. Support (Figure 7.3-7) trends have been sustained over three years, and Training Solutions Profitability (Figure 7.3-8) has significantly increased from negative 16.9% in 2003 to positive 7.3% in 2007. These favorable results demonstrate GRCC's ability to overcome the strategic challenge of reductions in state funding.**
- Many measures of market performance show positive results. Community market share has increased over five years from 30.1% in 2003 to 34.2% in 2007 (Figure 7.3-11). High school market share is increasing after a four-year decline (Figure 7.3-12). Additionally, GRCC's high school market share remains well above the national comparison group of NCCBP peer institutions. Enrollment has reached the maximum capacity of 15,300, climbing from 14,100 in 2003 (Figure 7.3-13). These results are linked to the ends of community outreach, lifelong learning, entrance and transfer, and workforce development. Results seem to indicate that the college has the ability to overcome strategic challenges related to balancing enrollment.
- Financial and market trend results are linked to strategic challenges, strategic advantages, the MVV, and ends, and they are aligned with key strategic areas related to finance and sustainability. These results are linked to the DB for college-wide reporting and review. This alignment should allow GRCC to sustain positive trends and aid in course correction when results are less than favorable.

#### OPPORTUNITIES FOR IMPROVEMENT

- **While GRCC results are above the comparisons on some financial indicators, very few comparisons are reported on key results. For example, even though affordability is higher than the statewide average, this is the only comparison made related to financial and budgetary performance. No comparisons are provided for General Fund Net Assets (Figure 7.3-1), College-generated Revenue (Figure 7.3-2), Student Success Planning (Figure 7.3-3), Net Direct Debt per Capita (Figure 7.3-5), Billing Units (Figure 7.3-6), Training Solutions Profitability (Figure 7.3-8), Budget Management (Figure 7.3-9), Foundation Gifts (Figure 7.3-10), Community Market Share (Figure 7.3-11), or Enrollment (Figure 7.3-13). Without adequate comparisons, it may be difficult for**

**GRCC to address its strategic challenges and sustain its status with competitors on measures of finance and market share.**

- GRCC reports little to no targets, goals, or benchmarks in financial and market share results. Without reasonable targets and goals, it may be difficult for GRCC to determine at what level it is performing on key measures that are clearly aligned to its MVV, ends, strategic challenges, and SGs.
- Some key results show unfavorable trends. Budget Management (Figure 7.3-9) has declined in 2007 after four years of sustained performance. Foundation Gifts (Figure 7.3-10) have declined by \$1.3 million from 2007 to 2008 after three years of continued growth. These measures are aligned with the college's SGs related to sustained budget management and growth of revenue. Declining trends in these key areas may be an opportunity for GRCC to improve related processes.

## 7.4 Workforce-Focused Outcomes

Your score in this Criteria Item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5b, Scoring Guidelines for Results Items.)

### STRENGTHS

- Current levels and trends for most of the key workforce satisfaction indicators (Figure 7.4-1) of overall, job, pride, and loyalty are in the 80–90% range; organization is at nearly 80%. All exceed the TAG benchmark. For Workforce Key Motivators (Figure 7.4-2), most of the assessment factors that drive workforce satisfaction and engagement show 85–95% satisfaction; these factors are teamwork, empowerment, valuable work, and professional. Empowerment shows an increase of 64.9% to 66.2%. Workforce Development (Figure 7.4-4) and Leadership Development (Figure 7.4-5) show favorable numbers for 2007-2008. Results indicate that GRCC appears responsive to key workforce needs, action plans, and HR development plans.
- Workforce Retention (Figure 7.4-6) indicates segmented data for the retention of faculty and staff. GRCC appears to be responsive to the strategic challenge of retaining qualified employees with the percent retained relatively stable over 5 years, averaging between 96% and 99.6%. Employee retention outperformed the state comparison in 2007, which may indicate positive workforce satisfaction.
- Workforce climate results are measured via the PACE survey for 2005 and 2007, as reported in Workforce Climate (Figure 7.4-10). GRCC outperformed the national comparison in 2007 in each reported area: supervisor, structure, teamwork, student focus, and overall. Diversity (Figure 7.4-11) percentages exceeded the community served for five years. Occupational Safety and Health Administration (OSHA) Recordable Injuries (Figure 7.4-13) were reduced from 2003 to 2006. In addition, Worker's Compensation Costs (Figure 7.4-14) were reduced by \$20,000 from 2005 to 2007. Workforce climate measures indicate that GRCC is maintaining a collaborative work environment that appears responsive to the strategic challenges and goals of the college (Figure 7.4-10).

### OPPORTUNITIES FOR IMPROVEMENT

- Although GRCC has measures in place to assess engagement and satisfaction, many of the measures are in the early stages and lack comparatives for competitors and segmentation by workforce categories (e.g., faculty, Education Support Professional [ESP], campus police, and College Employee Benefit Association [CEBA]). For example, Workforce Satisfaction (Figure 7.4-1) and Workforce Key Motivators (Figure 7.4-2) report only two years of trend data. Additionally, workforce key motivators show a decrease in teamwork and valuable work for the last two years, which may hinder the college from meeting the key requirements and expectations of the workforce, identified in the Organizational Profile, specifically work that adds value and a collaborative work environment.

- GRCC appears to be in the early stages of improvement in the area of workforce capacity results. Many measures lack comparisons (e.g., Figures 7.4-2, 7.4-3, 7.4-4, 7.4-5, 7.4-7, 7.4-9, 7.4-12, and 7.4-14), and many trends have fluctuated over the last three years. Although statewide comparisons are provided for measures such as Compensation—Percentage of Expenses (Figure 7.4-8) and Diversity (Figure 7.4-11), measures lack national comparisons. Lack of national comparisons may prevent effective assessment of GRCC’s progress, which may make it difficult for the college to determine its standing with peers and competitors.
- **GRCC provides only one or two years of data, thus lacking trend information in a number of figures (e.g., Figures 7.4-1, 7.4-2, 7.4-3, 7.4-4, 7.4-5, and 7.4-10). Most indicators also lack segmentation (e.g., Figures 7.4-1, 7.4-2, 7.4-3, 7.4-4, 7.4-5, 7.4-7, 7.4-8, 7.4-10, 7.4-13, and 7.4-14), and no figures include targets or indications of a college goal. Without trend lines, segmentation, and targets, it may be difficult for the college to integrate results into actions or key processes for improvement.**

## 7.5 Process Effectiveness Outcomes

Your score in this Criteria Item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5b, Scoring Guidelines for Results Items.)

### STRENGTHS

- The two key performance measures of productivity that GRCC uses to determine the operational effectiveness and efficiency of its work systems are Cost per Student (Figure 7.5-1) and Cost per Contact Hour (Figure 7.5-2). Both measures have stayed at steady levels, displayed stable positive movements over the last three years, and have performed better compared to Michigan peer group colleges, which GRCC uses as a benchmark. The emergency response system—through the deployment of the Emergency Phone Alert System (EPAS), Internet and e-mail communication systems, and two drill exercises—is able to notify the campus within the targeted times. These measures are aligned with the mission, ends, and LCFAs by the emergency readiness strategic goals.
- GRCC uses a combination of customer satisfaction and quality measures to represent the performance of its key processes. The learning process performance shows favorable results and trends in Average Class Size (Figure 7.5-4), which has remained under the 24-student maximum since 2003, and Course Currency (Figure 7.5-5), which has increased from 85% to 96% since 2005. Student support process performance shows improvement in nearly all measures of student satisfaction, counseling wait times, and tutoring effectiveness (Figures 7.5-6 through 7.5-8). Other support processes pertaining to workforce satisfaction, such as financial management, IT help desk performance, materials management, HR, and campus security (Figures 7.5-10 through 7.5-15), also show improvement and favorable trends, and they are aligned with the mission, ends, and LCFAs of the college.

### OPPORTUNITIES FOR IMPROVEMENT

- Although GRCC has provided information pertaining to the performance of work systems and processes in several key areas relevant to its mission, many measures lack targets (e.g., Counseling Wait Times [Figure 7.5-7]), benchmarks, or comparisons with competitors. Without targets and comparisons, it may be difficult for the organization to accurately evaluate the levels presented.
- Many measures, such as Cost per Student (Figure 7.5-1), Average Class Size (Figure 7.5-4), and Student Satisfaction with Services (Figure 7.5-6), lack segmentation of results by programs, offerings, or services; by processes or locations; or by student or market segments. This lack of segmentation may cause gaps in meeting the changing needs of the community and student segments. Without segmentation, it may be difficult for GRCC to determine how process performance contributes to overall organizational effectiveness.
- The measures of Cost per Contact Hour (Figure 7.5-2) trended unfavorably in 2007. Workforce Satisfaction for Facilities (Figure 7.5-9) does not include data for 2004, and Satisfaction with Tutoring Effectiveness (Figure 7.5-8) includes data for only one time point

(2007-2008). Without including missing data elements and the related trends, it may be difficult for the college to relate results to performance or improvement of processes.

- Workforce Satisfaction with Support Processes (Figure 7.5-9) has decreased with respect to facilities. Without further investigation and data into causes for such change, it may be difficult for the college to determine how learning and improvement occurs to meet the SGs and ends. Although innovation is a strategic goal and GRCC has launched the CAP related to Innovation Workspace, no data are provided to show definitions, measures, comparators, or projections of innovation. Without such data, it may be difficult for GRCC to determine the performance and effectiveness of CAPs.

## 7.6 Leadership Outcomes

Your score in this Criteria Item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5b, Scoring Guidelines for Results Items.)

### STRENGTHS

- Results of several measures related to ethical behavior and training of the workforce and the Board of Trustees are favorable. For example, Ethical Behavior and Stakeholder Trust (Figure 7.6-2) shows zero ethical breaches over a five-year period. Additionally, it shows that 100% of the workforce and the Board were trained between 2004 and 2008 (Figure 7.6-2). These results are directly tied to GRCC's RAIDER value of accountability and the core value of visionary leadership.
- Results for Legal, Regulatory, Accreditation (Figure 7.6-4) demonstrate a five-year 100% compliance level for AOA, OSHA/Michigan Occupational Safety and Health Act (MIOSHA), the Environmental Protection Agency (EPA), and a number of workforce certifications/licenses. Further, GRCC has been accredited or remains accredited by 15 separate agencies or organizations with dates ranging from 1999 to 2007. The regulatory environment is a key organizational factor, and these levels are reported with 100% compliance. Finally, these results are linked to the college's MVV and ends, and they are integrated and linked to key customer segments within the stakeholder community.
- GRCC reports several favorable results related to organizational citizenship. The sustainability initiative has succeeded in lowering energy consumption over the past two years, as indicated in Energy Consumption Reduction (Figure 7.6-5). Energy consumption has been reduced by the following percentages: electric from 1.1% to 3.9%, natural gas from 5.4% to 9.1%, water/sewer from 11.4% to 17.9%, and overall energy consumption from 6.0% to 10.3%. Additionally, the college has made significant progress in community support activities, as indicated in the results displayed in Community Support Results (Figure 7.6-6). For example, the trend to participate in community programs has increased from 89% to 100% on the part of all leaders, and participation in the Delta Strategy has increased from 732 to 963 (over 25%). These results data are linked to the Strategic Plan through the social responsibility goals and GRCC's MVV, as well as the overall core value of social responsibility.

### OPPORTUNITIES FOR IMPROVEMENT

- Strategic Plan Accomplishment (Figure 7.6-1) results show progress with 10 of the 33 CAPs completed in the first year of a four-year plan and alignment with the MVV, ends, and strategic challenges. However, even though the results are appropriate to assessing the effectiveness of the SGs, results may be difficult for the organization to interpret without targets. Additionally, with no trends or targets from previous plans available and no explanation of which goals were accomplished, it may be difficult for the college to assess progress toward the SGs.

- Although results for Fiscal Accountability (Figure 7.6-3) indicate that no discrepancies in any internal or external audits over the past five years are evident, data are not segmented by the type of discrepancy. Further, no comparisons or targets are stated. Fiscal accountability is central to GRCC's MVV and ends, and it is not clear how these results compare or integrate with other core operations, competitors, or other like organizations.
- **No comparative or competitive data are included in the results provided for leadership outcomes including Strategic Plan Accomplishment (Figure 7.6-1), Ethical Behavior and Stakeholder Trust (Figure 7.6-2), or Community Support Results (Figure 7.6-6). Comparing its performance relative to benchmarks; competitors; and best-in-class, national, and regional organizations may assist the college in better evaluating its results in these areas, as well as in setting goals and identifying areas for improvement. Additionally, many results are limited or missing. For example, many areas identified by GRCC as important to leadership outcomes, for example, Fiscal Accountability (Figure 7.6-3), are limited or missing. Without competitive or comparative data, it may be difficult for the college to measure its fiscal position or understand its fiscal strengths or weaknesses relative to competitors.**

## **APPENDIX**

By submitting a Baldrige application, you have differentiated yourself from most U.S. organizations. The Board of Examiners has evaluated your application for the Malcolm Baldrige National Quality Award. Strict confidentiality is observed at all times and in every aspect of the application review and feedback.

This feedback report contains the Examiners' findings, including a summary of the key themes of the evaluation, a detailed listing of strengths and opportunities for improvement, and scoring information. Background information on the examination process is provided below.

### **APPLICATION REVIEW**

#### **Independent Review**

Following receipt of the Award applications, the Award process review cycle (shown in Figure 1) begins with the Independent Review, in which members of the Board of Examiners are assigned to each of the applications. Examiners are assigned based on their areas of expertise and with attention to avoiding potential conflicts of interest. Each application is evaluated independently by the Examiners, who write observations relating to the Scoring System described beginning on page 65 of the *Education Criteria for Performance Excellence*.

# Award Process Review Cycle

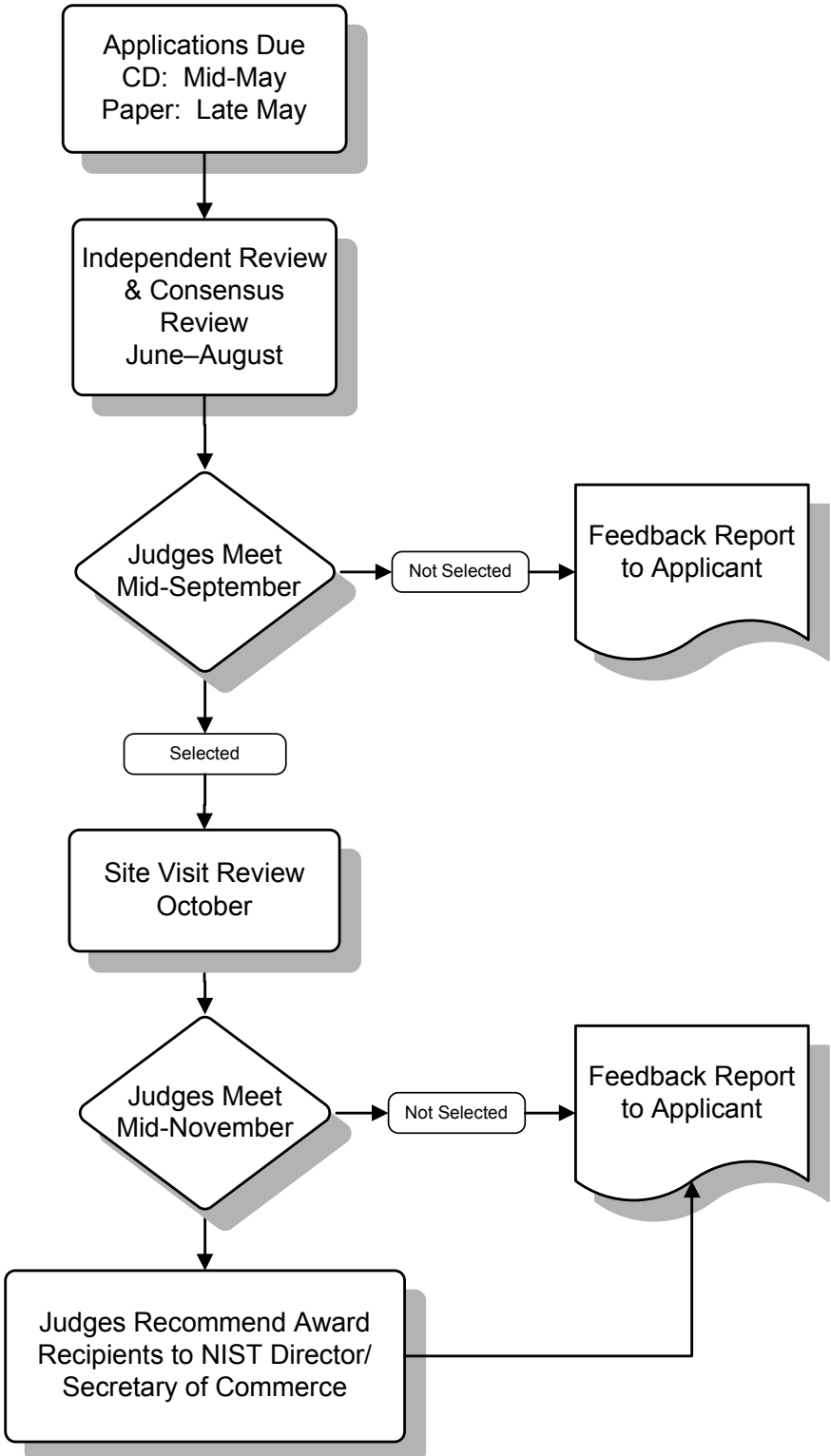


Figure 1—Award Process Review Cycle

## Consensus Review

In Consensus Review (see Figure 2), a team of Examiners, led by a Senior Examiner, conducts a series of reviews, first managed virtually through a secure Web site and eventually concluded through a focused conference call. The purpose of this series of reviews is for the team to reach consensus on comments and scores that capture the team’s collective view of the applicant’s strengths and opportunities for improvement. The team documents its comments and scores in a Consensus Scorebook.

Step 1 Consensus Planning	Step 2 Virtual Consensus	Step 3 Consensus Calls	Step 4 Post-Consensus Call Activities
<ul style="list-style-type: none"> <li>• Clarify the timeline for the team to complete its work</li> <li>• Assign Category/Item discussion leaders</li> <li>• Discuss key business/organization factors</li> </ul>	<ul style="list-style-type: none"> <li>• Review all Independent Review evaluations—draft consensus comments and propose scores</li> <li>• Post Consensus Review worksheets for the team to review</li> <li>• Address feedback, incorporate inputs, and propose a resolution of differences on each worksheet</li> <li>• Review updated comments and scores</li> </ul>	<ul style="list-style-type: none"> <li>• Discuss a limited number of issues related to specific comments or scores, and discuss all key themes</li> <li>• Achieve consensus on comments and scores</li> </ul>	<ul style="list-style-type: none"> <li>• Revise comments and scores to reflect consensus decisions</li> <li>• Prepare final Consensus Scorebook</li> <li>• Prepare feedback report</li> </ul>

**Figure 2—Consensus Review**

## Site Visit Review

After Consensus Review, the Panel of Judges selects applicants to receive site visits based on the scoring profiles. If an applicant is not selected for Site Visit Review, one of the Examiners on the consensus team edits the final Consensus Scorebook, which becomes the feedback report.

Site visits are conducted for the highest-scoring applicants to clarify any uncertainty or confusion the Examiners may have regarding the written application and to verify that the information in

the application is correct (see Figure 3 for the Site Visit Review process). After the site visit, the team of Examiners prepares a final Site Visit Scorebook.

<b>Step 1 Team Preparation</b>	<b>Step 2 Site Visit</b>	<b>Step 3 Post-Site Visit Activities</b>
<ul style="list-style-type: none"> <li>• Review consensus findings</li> <li>• Develop site visit issues</li> <li>• Plan site visit</li> </ul>	<ul style="list-style-type: none"> <li>• Make/receive presentations</li> <li>• Conduct interviews</li> <li>• Record observations</li> <li>• Review records</li> </ul>	<ul style="list-style-type: none"> <li>• Resolve issues</li> <li>• Summarize findings</li> <li>• Finalize comments</li> <li>• Prepare final Site Visit Scorebook</li> <li>• Prepare feedback report</li> </ul>

**Figure 3—Site Visit Review**

Applications, Consensus Scorebooks, and Site Visit Scorebooks for all applicants receiving site visits are forwarded to the Panel of Judges for review (see Figure 4). The Judges recommend which applicants should receive the Award. The Judges discuss applications in each of the six Award categories separately, and then they vote to keep or eliminate each applicant. Next, the Judges decide whether each of the top applicants should be recommended as an Award recipient based on an “absolute” standard: the overall excellence of the applicant and the appropriateness of the applicant as a national role model. The process is repeated for each Award category.

<b>Step 1 Panel of Judges’ Review</b>	<b>Step 2 Evaluation by Category</b>	<b>Step 3 Assessment of Top Organizations</b>
<ul style="list-style-type: none"> <li>• Applications</li> <li>• Consensus Scorebooks</li> <li>• Site Visit Scorebooks</li> </ul>	<ul style="list-style-type: none"> <li>• Manufacturing</li> <li>• Service</li> <li>• Small business</li> <li>• Education</li> <li>• Health care</li> <li>• Nonprofit</li> </ul>	<ul style="list-style-type: none"> <li>• Overall strengths/opportunities for improvement</li> <li>• Appropriateness as national model of performance excellence</li> </ul>

**Figure 4—Judges’ Review**

Judges do not participate in discussions or vote on applications from organizations in which they have a competing or conflicting interest or in which they have a private or special interest, such as an employment or a client relationship, a financial interest, or a personal or family relationship. All conflicts are reviewed and discussed so that Judges are aware of their own and others’ limitations on access to information and participation in discussions and voting.

Following the Judges’ review and recommendation of Award recipients, the Site Visit Team Leader edits the final Site Visit Scorebook, which becomes the feedback report.

## SCORING

The scoring system used to score each Item is designed to differentiate the applicants in the various stages of review and to facilitate feedback. As seen in the Scoring Guidelines (Figures 5a and 5b), the scoring of responses to Criteria Items is based on two evaluation dimensions: Process and Results. The four factors used to evaluate process (Categories 1–6) are Approach (A), Deployment (D), Learning (L), and Integration (I), and the four factors used to evaluate results (Items 7.1–7.6) are Levels (Le), Trends (T), Comparisons (C), and Integration (I).

In the feedback report, the applicant receives a percentage range score for each Item. The range is based on the Scoring Guidelines, which describe the characteristics typically associated with specific percentage ranges.

As shown in Figures 6a and 6b, the applicant's overall scores for Process Items and Results Items each fall into one of eight scoring bands. Each band score has a corresponding descriptor of attributes associated with that band.

<b>SCORE</b>	<b>PROCESS (For Use With Categories 1–6)</b>
<b>0% or 5%</b>	<ul style="list-style-type: none"> <li>▪ No systematic approach to Item requirements is evident; information is anecdotal. (A)</li> <li>▪ Little or no deployment of any systematic approach is evident. (D)</li> <li>▪ An improvement orientation is not evident; improvement is achieved through reacting to problems. (L)</li> <li>▪ No organizational alignment is evident; individual areas or work units operate independently. (I)</li> </ul>
<b>10%, 15%, 20%, or 25%</b>	<ul style="list-style-type: none"> <li>▪ The beginning of a systematic approach to the basic requirements of the Item is evident. (A)</li> <li>▪ The approach is in the early stages of deployment in most areas or work units, inhibiting progress in achieving the basic requirements of the Item. (D)</li> <li>▪ Early stages of a transition from reacting to problems to a general improvement orientation are evident. (L)</li> <li>▪ The approach is aligned with other areas or work units largely through joint problem solving. (I)</li> </ul>
<b>30%, 35%, 40%, or 45%</b>	<ul style="list-style-type: none"> <li>▪ An effective, systematic approach, responsive to the basic requirements of the Item, is evident. (A)</li> <li>▪ The approach is deployed, although some areas or work units are in early stages of deployment. (D)</li> <li>▪ The beginning of a systematic approach to evaluation and improvement of key processes is evident. (L)</li> <li>▪ The approach is in the early stages of alignment with your basic organizational needs identified in response to the Organizational Profile and other Process Items. (I)</li> </ul>
<b>50%, 55%, 60%, or 65%</b>	<ul style="list-style-type: none"> <li>▪ An effective, systematic approach, responsive to the overall requirements of the Item, is evident. (A)</li> <li>▪ The approach is well deployed, although deployment may vary in some areas or work units. (D)</li> <li>▪ A fact-based, systematic evaluation and improvement process and some organizational learning, including innovation, are in place for improving the efficiency and effectiveness of key processes. (L)</li> <li>▪ The approach is aligned with your organizational needs identified in response to the Organizational Profile and other Process Items. (I)</li> </ul>
<b>70%, 75%, 80%, or 85%</b>	<ul style="list-style-type: none"> <li>▪ An effective, systematic approach, responsive to the multiple requirements of the Item, is evident. (A)</li> <li>▪ The approach is well deployed, with no significant gaps. (D)</li> <li>▪ Fact-based, systematic evaluation and improvement and organizational learning, including innovation, are key management tools; there is clear evidence of refinement as a result of organizational-level analysis and sharing. (L)</li> <li>▪ The approach is integrated with your organizational needs identified in response to the Organizational Profile and other Process Items. (I)</li> </ul>
<b>90%, 95%, or 100%</b>	<ul style="list-style-type: none"> <li>▪ An effective, systematic approach, fully responsive to the multiple requirements of the Item, is evident. (A)</li> <li>▪ The approach is fully deployed without significant weaknesses or gaps in any areas or work units. (D)</li> <li>▪ Fact-based, systematic evaluation and improvement and organizational learning through innovation are key organization-wide tools; refinement and innovation, backed by analysis and sharing, are evident throughout the organization. (L)</li> <li>▪ The approach is well integrated with your organizational needs identified in response to the Organizational Profile and other Process Items. (I)</li> </ul>

**Figure 5a—Scoring Guidelines for Process Items in the Education Criteria**

<b>SCORE</b>	<b>RESULTS (For Use With Category 7)</b>
<b>0% or 5%</b>	<ul style="list-style-type: none"> <li>▪ There are no organizational performance results and/or poor results in areas reported. (Le)</li> <li>▪ Trend data either are not reported or show mainly adverse trends. (T)</li> <li>▪ Comparative information is not reported. (C)</li> <li>▪ Results are not reported for any areas of importance to the accomplishment of your organization’s mission. (I)</li> </ul>
<b>10%, 15%, 20%, or 25%</b>	<ul style="list-style-type: none"> <li>▪ A few organizational performance results are reported, and early good performance levels are evident in a few areas. (Le)</li> <li>▪ Some trend data are reported, with some adverse trends evident. (T)</li> <li>▪ Little or no comparative information is reported. (C)</li> <li>▪ Results are reported for a few areas of importance to the accomplishment of your organization’s mission. (I)</li> </ul>
<b>30%, 35%, 40%, or 45%</b>	<ul style="list-style-type: none"> <li>▪ Good organizational performance levels are reported for some areas of importance to the Item requirements. (Le)</li> <li>▪ Some trend data are reported, and a majority of the trends presented are beneficial. (T)</li> <li>▪ Early stages of obtaining comparative information are evident. (C)</li> <li>▪ Results are reported for many areas of importance to the accomplishment of your organization’s mission. (I)</li> </ul>
<b>50%, 55%, 60%, or 65%</b>	<ul style="list-style-type: none"> <li>▪ Good organizational performance levels are reported for most areas of importance to the Item requirements. (Le)</li> <li>▪ Beneficial trends are evident in areas of importance to the accomplishment of your organization’s mission. (T)</li> <li>▪ Some current performance levels have been evaluated against relevant comparisons and/or benchmarks and show areas of good relative performance. (C)</li> <li>▪ Organizational performance results are reported for most key student, stakeholder, market, and process requirements. (I)</li> </ul>
<b>70%, 75%, 80%, or 85%</b>	<ul style="list-style-type: none"> <li>▪ Good to excellent organizational performance levels are reported for most areas of importance to the Item requirements. (Le)</li> <li>▪ Beneficial trends have been sustained over time in most areas of importance to the accomplishment of your organization’s mission. (T)</li> <li>▪ Many to most trends and current performance levels have been evaluated against relevant comparisons and/or benchmarks and show areas of leadership and very good relative performance. (C)</li> <li>▪ Organizational performance results are reported for most key student, stakeholder, market, process, and action plan requirements, and they include some projections of your future performance. (I)</li> </ul>
<b>90%, 95%, or 100%</b>	<ul style="list-style-type: none"> <li>▪ Excellent organizational performance levels are reported for most areas of importance to the Item requirements. (Le)</li> <li>▪ Beneficial trends have been sustained over time in all areas of importance to the accomplishment of your organization’s mission. (T)</li> <li>▪ Evidence of education sector and benchmark leadership is demonstrated in many areas. (C)</li> <li>▪ Organizational performance results fully address key student, stakeholder, market, process, and action plan requirements, and they include projections of your future performance. (I)</li> </ul>

**Figure 5b—Scoring Guidelines for Results Items in the Education Criteria**

<b>Band Score</b>	<b>Band Number</b>	<b>PROCESS Scoring Band Descriptors</b>
0–150	1	The organization demonstrates early stages of developing and implementing approaches to the basic Criteria requirements, with deployment lagging and inhibiting progress. Improvement efforts are a combination of problem solving and an early general improvement orientation.
151–200	2	The organization demonstrates effective, systematic approaches responsive to the basic requirements of the Criteria, but some areas or work units are in the early stages of deployment. The organization has developed a general improvement orientation that is forward-looking.
201–260	3	The organization demonstrates effective, systematic approaches responsive to the basic requirements of most Criteria Items, although there are still areas or work units in the early stages of deployment. Key processes are beginning to be systematically evaluated and improved.
261–320	4	The organization demonstrates effective, systematic approaches responsive to the overall requirements of the Criteria, but deployment may vary in some areas or work units. Key processes benefit from fact-based evaluation and improvement, and approaches are being aligned with organizational needs.
321–370	5	The organization demonstrates effective, systematic, well-deployed approaches responsive to the overall requirements of most Criteria Items. The organization demonstrates a fact-based, systematic evaluation and improvement process and organizational learning, including innovation, that result in improving the effectiveness and efficiency of key processes.
371–430	6	The organization demonstrates refined approaches responsive to the multiple requirements of the Criteria. These approaches are characterized by the use of key measures, good deployment, and evidence of innovation in most areas. Organizational learning, including innovation and sharing of best practices, is a key management tool, and integration of approaches with organizational needs is evident.
431–480	7	The organization demonstrates refined approaches responsive to the multiple requirements of the Criteria Items. It also demonstrates innovation, excellent deployment, and good-to-excellent use of measures in most areas. Good-to-excellent integration is evident, with organizational analysis, learning through innovation, and sharing of best practices as key management strategies.
481–550	8	The organization demonstrates outstanding approaches focused on innovation. Approaches are fully deployed and demonstrate excellent, sustained use of measures. There is excellent integration of approaches with organizational needs. Organizational analysis, learning through innovation, and sharing of best practices are pervasive.

**Figure 6a—Process Scoring Band Descriptors**

Band Score	Band Number	RESULTS Scoring Band Descriptors
0–125	1	Results are reported for a few areas of importance to the accomplishment of the organization’s mission, but they generally lack trend and comparative data.
126–170	2	Results are reported for several areas of importance to the Criteria requirements and the accomplishment of the organization’s mission. Some of these results demonstrate good performance levels. The use of comparative and trend data is in the early stages.
171–210	3	Results address many areas of importance to the accomplishment of the organization’s mission, with good performance being achieved. Comparative and trend data are available for some of these important results areas, and some beneficial trends are evident.
211–255	4	Results address some key customer/stakeholder, market, and process requirements, and they demonstrate good relative performance against relevant comparisons. There are no patterns of adverse trends or poor performance in areas of importance to the Criteria requirements and the accomplishment of the organization’s mission.
256–300	5	Results address most key customer/stakeholder, market, and process requirements, and they demonstrate areas of strength against relevant comparisons and/or benchmarks. Improvement trends and/or good performance are reported for most areas of importance to the Criteria requirements and the accomplishment of the organization’s mission.
301–345	6	Results address most key customer/stakeholder, market, and process requirements, as well as many action plan requirements. Results demonstrate beneficial trends in most areas of importance to the Criteria requirements and the accomplishment of the organization’s mission, and the organization is an industry <sup>1</sup> leader in some results areas.
346–390	7	Results address most key customer/stakeholder, market, process, and action plan requirements and include projections of future performance. Results demonstrate excellent organizational performance levels and some industry <sup>1</sup> leadership. Results demonstrate sustained beneficial trends in most areas of importance to the Criteria requirements and the accomplishment of the organization’s mission.
391–450	8	Results fully address key customer/stakeholder, market, process, and action plan requirements and include projections of future performance. Results demonstrate excellent organizational performance levels, as well as national and world leadership. Results demonstrate sustained beneficial trends in all areas of importance to the Criteria requirements and the accomplishment of the organization’s mission.

<sup>1</sup>“Industry” refers to other organizations performing substantially the same functions, thereby facilitating direct comparisons.

**Figure 6b—Results Scoring Band Descriptors**