Preparing to read your feedback report . . .

Your feedback report contains Michigan Quality Leadership Award Examiners’ observations that are based on their understanding of your organization. They have provided comments on your organization’s strengths and opportunities for improvement relative to the Baldrige Criteria. The feedback is non-prescriptive. It will tell you where Examiners think you have strengths to celebrate and where they think improvement opportunities exist. The feedback will not say specifically how you should address these opportunities. The specifics will depend on what you decide is most important to your organization.

Applicant organizations read and use feedback comments (both strengths and opportunities for improvement) in different ways. We’ve gathered some tips and practices from prior applicants for you to consider.

- Celebrate your strengths. You’ve worked hard and should congratulate yourselves.

- Use your strengths comments to understand what the Examiners observed you do well and build upon those things. Continue to evaluate and improve the things you do well.

- You know your organization better than the Examiners know it. There might be relevant information that was not communicated to them or that they did not fully understand. Therefore, not all of their comments may be equally accurate.

- Although we strive for “perfection,” we do not achieve it in every comment. If Examiners have misread your application or misunderstood your organization on a particular point, don’t discount the whole feedback report. Consider the other comments and focus on the most important ones.

- Prioritize your opportunities for improvement. You can’t do everything all at once. Think about what’s most important for your organization at this time and decide which things to work on first.

- You may decide to address all, some, or none of the opportunities in a particular Item. It depends on how important you think that Item or comment is to your organization.

- 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.
INTRODUCTION

By submitting an MQL application, you have differentiated yourself from most Michigan organizations. We are eager to make your efforts achieve the maximum benefit possible. This feedback report was written for your consideration in accelerating your journey toward performance excellence.

The Board of Examiners has evaluated your application for the Michigan Quality Leadership 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 key themes of the application evaluation, a detailed listing of strengths and opportunities for improvement, and scoring information. Background information on the examination process is also provided. We encourage you to use the feedback as input to your strategic planning process. As an MQLA applicant, you are already a winner in the journey toward performance improvement!

APPLICATION REVIEW

Stage 1, Independent Review

The application evaluation process begins with Stage 1, the independent review, in which members of the Board of Examiners are assigned to each of the applications. Assignments are made according to the Examiners’ areas of expertise and to avoid potential conflicts of interest. Each application is evaluated independently by Examiners who write comments relating to the applicant’s strengths and opportunities for improvement and use a scoring system developed for the Award Program. All applicants in all categories (manufacturing, service, small business, education, health care, and non-profit) go through the Stage 1 evaluation process.

Stage 2, Consensus Review

A team of Examiners, led by a Senior Examiner, conducts a meeting to reach consensus on comments that capture the team’s collective view of the applicant’s strengths and opportunities for improvement. Additionally, the team decides on a score for each Item and identifies the issues to clarify and verify if the applicant is selected for a site visit. The team documents its comments, scores, and site visit issues in a consensus scorebook. All applicants receive a consensus review.

Stage 3, Site Visit Review

After the consensus review process, the Panel of Judges verifies that the evaluation process was followed properly. Following their review, the Judges select applicants to receive a site visit based upon the scoring profiles of all consensus review applicants. If an applicant is not selected for site visit review, one of the Examiners on the Consensus Team works with one Judge to edit the final consensus report that becomes the feedback report.
Site visits are conducted for the highest-scoring applicants to clarify any uncertainty or confusion the Examiners have regarding the written application and to verify that the information in the application is correct. After the site visit is completed, the team of Examiners prepares a final site visit scorebook.

Application reports, consensus scorebooks, and site visit scorebooks for all applicants receiving a site visit are forwarded to the Panel of Judges, which makes final recommendations on which applicants should receive an Award. The Judges discuss and decide whether each of the applicants should be recommended as an Award recipient based on an “absolute” standard: the overall excellence and the appropriateness of the applicant as a state-wide role model. There is no limit on the number of possible recipients.

Judges do not participate in discussions or vote on applications 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 recommendations of Award recipients, one of the Examiners on the Site Visit Team edits the final site visit scorebook that becomes the feedback report.

**SCORING**

The scoring system used to score each Item is designed to differentiate the applicants in the Stage 1 and Stage 2 reviews and to facilitate feedback. The Scoring Guidelines for Business, Education, or Health Care are based on (1) evidence that a performance excellence system is in place, (2) the depth and breadth of its deployment, and (3) the results it is achieving.

In the feedback report, the applicant receives a percentage range. The percentage range is based on the Scoring Guidelines, which describe the characteristics typically associated with specific percentage ranges (Table 1).

An applicant’s total scores fall into a scoring band. Each band corresponds to a descriptor associated with that scoring range (Table 2).
<table>
<thead>
<tr>
<th>Score</th>
<th>Approach - Deployment</th>
</tr>
</thead>
<tbody>
<tr>
<td>0% or 5%</td>
<td>- No systematic approach is evident; information is anecdotal.</td>
</tr>
<tr>
<td></td>
<td>- Little or no deployment of an approach is evident.</td>
</tr>
<tr>
<td>10%, 15%, 20%, or 25%</td>
<td>- The beginning of a systematic approach to the basic requirements of the Item is evident.</td>
</tr>
<tr>
<td></td>
<td>- The approach is in the early stages of deployment most areas or work units, inhibiting progress in achieving the basic requirements of the Item.</td>
</tr>
<tr>
<td></td>
<td>- Early stages of a transition from reacting to problems to a general improvement orientation are evident.</td>
</tr>
<tr>
<td></td>
<td>- The approach is aligned with other areas or work units largely through joint problem solving.</td>
</tr>
<tr>
<td>30%, 35%, 40%, or 45%</td>
<td>- An effective, systematic approach, responsive to the basic requirements of the Item, is evident.</td>
</tr>
<tr>
<td></td>
<td>- The approach is deployed, although some areas or work units are in early stages of deployment.</td>
</tr>
<tr>
<td></td>
<td>- The beginning of a systematic approach to evaluation and improvement of key processes is evident.</td>
</tr>
<tr>
<td></td>
<td>- The approach is in early stages of alignment with your basic organizational needs identified in responses to the other Criteria Categories.</td>
</tr>
<tr>
<td>50%, 55%, 60%, or 65%</td>
<td>- An effective, systematic approach, responsive to the overall requirements of the Item and your key organizational requirements, is evident.</td>
</tr>
<tr>
<td></td>
<td>- The approach is deployed, although deployment may vary in some areas or work units.</td>
</tr>
<tr>
<td></td>
<td>- A fact-based, systematic evaluation and improvement process is in place for improving the efficiency and effectiveness of key processes.</td>
</tr>
<tr>
<td></td>
<td>- The approach is aligned with your organizational needs identified in the other Criteria Categories.</td>
</tr>
<tr>
<td>70%, 75%, 80%, or 85%</td>
<td>- An effective, systematic approach, responsive to the multiple requirements of the Item and your current and changing educational service needs, is evident.</td>
</tr>
<tr>
<td></td>
<td>- The approach is well deployed, with no significant gaps.</td>
</tr>
<tr>
<td></td>
<td>- A fact-based, systematic evaluation and improvement process and organizational learning/sharing are key management tools; there is clear evidence of refinement, innovation, and improved integration as a result of organizational-level analysis and sharing.</td>
</tr>
<tr>
<td></td>
<td>- The approach is well integrated with your organizational needs identified in the other Criteria Categories.</td>
</tr>
<tr>
<td>90%, 95%, or 100%</td>
<td>- An effective, systematic approach, fully responsive to the multiple requirements of the Item is evident.</td>
</tr>
<tr>
<td></td>
<td>- The approach is fully deployed without significant weaknesses or gaps in any areas or work units.</td>
</tr>
<tr>
<td></td>
<td>- Fact-based, systematic evaluation and improvement process and organizational learning are key organization-wide tools; refinement and innovation, backed by analysis and sharing, are evident throughout the organization.</td>
</tr>
<tr>
<td></td>
<td>- The approach is well integrated with your organizational needs identified in the other Criteria Categories.</td>
</tr>
<tr>
<td>Score</td>
<td>Results</td>
</tr>
<tr>
<td>------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>0% or 5%</td>
<td>• There are no organizational performance results or poor results in areas reported.</td>
</tr>
<tr>
<td></td>
<td>• Trend data are either not reported or show mainly adverse trends.</td>
</tr>
<tr>
<td></td>
<td>• Comparative information is not reported.</td>
</tr>
<tr>
<td></td>
<td>• Results are not reported for any areas of importance to your key organizational requirements.</td>
</tr>
<tr>
<td>10%, 15%, 20%, or 25%</td>
<td>• A few organizational performance results are reported; there are some improvements and/or early good performance levels in a few areas.</td>
</tr>
<tr>
<td></td>
<td>• Little or no trend data are reported.</td>
</tr>
<tr>
<td></td>
<td>• Little or no comparative information is reported.</td>
</tr>
<tr>
<td></td>
<td>• Results are reported for a few areas of importance to your key organizational requirements.</td>
</tr>
<tr>
<td>30%, 35%, 40%, or 45%</td>
<td>• Improvements and/or good performance levels are reported in many areas of importance to your key organizational requirements.</td>
</tr>
<tr>
<td></td>
<td>• Early stages of developing trends are evident.</td>
</tr>
<tr>
<td></td>
<td>• Early stages of obtaining comparative information are evident.</td>
</tr>
<tr>
<td></td>
<td>• Results are reported for many areas of importance to your key organizational requirements.</td>
</tr>
<tr>
<td>50%, 55%, 60%, or 65%</td>
<td>• Improvement trends and/or good performance levels are reported for most areas of importance to your key organizational requirements.</td>
</tr>
<tr>
<td></td>
<td>• No pattern of adverse trends and no poor performance levels are evident in areas of importance to your key organizational requirements.</td>
</tr>
<tr>
<td></td>
<td>• Some trends and/or current performance levels—evaluated against relevant comparisons and/or benchmarks—show areas of good to very good relative performance levels.</td>
</tr>
<tr>
<td></td>
<td>• Organizational performance results address most key student, stakeholder, market, and process requirements.</td>
</tr>
<tr>
<td>70%, 75%, 80%, or 85%</td>
<td>• Current performance is good to excellent in most areas of importance to the Item requirements.</td>
</tr>
<tr>
<td></td>
<td>• Most improvement trends and/or current performance levels are sustained.</td>
</tr>
<tr>
<td></td>
<td>• Many to most trends and/or current performance levels—evaluated against relevant comparisons and/or benchmarks—show areas of leadership and very good relative performance levels.</td>
</tr>
<tr>
<td></td>
<td>• Organizational performance results address most key customer, stakeholder, market, process, and action plan requirements.</td>
</tr>
<tr>
<td>90%, 95%, or 100%</td>
<td>• Current performance is excellent in most areas of importance to the Item requirements.</td>
</tr>
<tr>
<td></td>
<td>• Excellent improvement trends and/or sustained excellent performance levels are reported in most areas.</td>
</tr>
<tr>
<td></td>
<td>• Evidence of industry and benchmark leadership is demonstrated in many areas.</td>
</tr>
<tr>
<td></td>
<td>• Organizational performance results fully address key customer, stakeholder, market, process, and action plan requirements.</td>
</tr>
</tbody>
</table>
# TABLE 2 - SCORING BAND DESCRIPTORS

<table>
<thead>
<tr>
<th>Band</th>
<th>Number</th>
<th>Descriptors</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 – 275</td>
<td>1</td>
<td>The organization demonstrates the early stages of developing and implementing approaches to Category requirements, with deployment lagging and inhibiting progress. Improvement efforts focus on problem-solving. A few important results are reported, but they generally lack trend and comparative data.</td>
</tr>
<tr>
<td>276 - 375</td>
<td>2</td>
<td>The organization demonstrates effective, systematic approaches responsive to the basic requirements of the Items, 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. The organization obtains results stemming from its approaches, with some improvements and good performance. The use of comparative and trend data is in the early stages.</td>
</tr>
<tr>
<td>376 - 475</td>
<td>3</td>
<td>The organization demonstrates effective, systematic approaches responsive to the basic requirements of the 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. Results address many areas of importance to the organization’s key requirements, with improvements and/or good performance being achieved. Comparative and trend data are available for some of these important results areas.</td>
</tr>
<tr>
<td>476 - 575</td>
<td>4</td>
<td>The organization demonstrates effective, systematic approaches responsive to the overall requirements of the Items, 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. Results address key customer/stakeholder, market, and process requirements, and demonstrate some areas of strength and/or good performance against relevant comparisons. There are no patterns of adverse trends or poor performance in areas of importance to the organization’s key requirements.</td>
</tr>
<tr>
<td>576 - 675</td>
<td>5</td>
<td>The organization demonstrates effective, systematic, well-deployed approaches responsive to the overall requirements of the Items. The organization demonstrates a fact-based evaluation and improvement process and organizational learning that result in improving the effectiveness and efficiency of key processes. Results address most key customer/stakeholder, market, and process requirements, and demonstrate areas of strength and/or good performance against relevant comparisons and/or benchmarks. Improvement trends and/or good performance are reported for most areas of importance to the organization’s key requirements.</td>
</tr>
<tr>
<td>676 - 775</td>
<td>6</td>
<td>The organization demonstrates refined approaches responsive to the multiple requirements of the Items. These approaches are characterized by the use of key measures, good deployment, evidence of innovation, and very good results in most areas. Organizational integration, learning, and sharing are key management tools. Results address many customer stakeholder, market, process, and action plan requirements. The organization is the industry leader in some areas.</td>
</tr>
<tr>
<td>776 - 875</td>
<td>7</td>
<td>The organization demonstrates refined approaches responsive to the multiple requirements of the Items. It also demonstrates innovation, excellent deployment, and good-to-excellent performance levels in most areas. Good-to-excellent integration is evident, with organizational analysis, learning, and sharing of best practices as key management tools. Industry leadership and some benchmark leadership are demonstrated in results that address most key customer/stakeholder, market, process, and action plan requirements.</td>
</tr>
<tr>
<td>876 - 1000</td>
<td>8</td>
<td>The organization demonstrates outstanding approaches focused on innovation, full deployment, and excellent, sustained performance results. There is excellent integration of approaches with organizational needs. Organizational analysis, learning, and sharing of best practices are pervasive. National and world leadership is demonstrated in results that fully address key customer/stakeholder, market, process, and action plan requirements.</td>
</tr>
</tbody>
</table>
KEY THEMES

Grand Rapids Community College scored in band 4 in the consensus review for the Michigan Quality Leadership Award. The organization demonstrates effective, systematic approaches responsive to the overall requirements of the Items, but deployment may vary in some areas. Key processes benefit from fact-based evaluation and improvement and approaches are beginning to be aligned with organizational needs. Results address key requirements and demonstrate some areas of strength and good performance relative to comparisons. For further explanation of the scoring bands, please refer to the Scoring Band Descriptors. Bolded comments in the detailed Item comments indicate those strengths or opportunities that had a significant impact on the Examining Team’s evaluation.

a. Most important strengths or outstanding practices (of potential value to other organizations) identified

- Grand Rapids Community College’s (GRCC) Mission, Vision, Values, and Ends allow senior leaders to guide and sustain the organization by creating an environment for performance improvement. These also provide a framework for all college services, programs, initiatives, and partnerships. These elements are apparent in virtually all organizational processes and sub-processes and are used as building blocks for the Performance Excellence Model (PEM) which supports the Strategic Planning Process (SPP).

- GRCC demonstrates commitment to community outreach and vitality, reflected in the ENDS and Vision, through sponsorship of community events and through community partnerships. Playing an active and leading role in the community is also designed into the Performance Development Discussion (PDD), which is the evaluation platform for senior leaders. Through the PDD, senior leaders choose community participation opportunities that interest them and that are seen as a benefit to the institution.

- The organization focuses on College-level goals through development and deployment of the structured Strategic Planning Process (SPP). College leadership teams using multiple sources of information develop Strategic Goals (SG) and Action Plans (AP). The SGs link to Dashboard (DB) measurements that cascade through departments to individuals. At the department level, supplemental goals are being developed. Department goals are tied to individual performance through the Performance Development Process and Faculty Goals and Improvement Plans. Action plans are developed to support deployment of the DB. Resources are forecast through parallel budget and strategic planning processes. The Action Plans, supported by the Process Based Management system, are developed to assist in achieving College goals. Department APs are prioritized, reviewed, and approved by the CLC. Once fully deployed across GRCC, these will provide further focus on the future and help address the strategic challenge of being agile and responsive to changing expectations and support organizational planning, growth, and improvement with financial allocation of resources.

- Senior leaders use multiple communication methods to track and report programs, reinforce Mission, Vision, Values of the organization, and promotes innovations in programs across departments, jobs, and locations. Information is provided on day-to-day activities, horizontal learnings, specific learning programs, and community events. These
methods include regular meetings, Learning Days, GRCC Today, College Connections, and the Inside GRCC program.

- GRCC demonstrates a strong commitment to organizational. Cross-functional teams conduct annual program reviews and utilize the Course Approval and Review Process (CARP) within the context of the Process Based Management (PBM) model to identify areas for improvement and to develop and propose solutions. Best practices and lessons learned are shared through the Academic Governance Committee, Learning Days, and the Adjunct Institute. Initiatives like the Learning Environment Team, the Enrollment Center, and the Counseling Center renovation create and promote learning-centered workspaces. In addition, all departments participate as part of Action Plan teams for implementation of improvement initiatives and share organizational learning through teamwork across departments and functions.

- GRCC has developed information technology support processes to support the learning centered environment. Many projects have been implemented to improve technology and its application to learning opportunities. This is demonstrated in the WIFI availability across campuses; computer availability to all students, faculty, and staff; and campus, classroom, and lab design. Innovative use and development of applications such as PeopleSoft, Learning Academy, and CARP further make information available and promotes quick transfer of knowledge. These initiatives have lead to a strong increase in organizational knowledge collection and transfer.

b. Most significant opportunities, concerns, or vulnerabilities

- Although the organization has identified the Raiders Leadership System as a means to create a more formal approach to succession planning, the process is not fully implemented. Senior leaders participate in identifying and selecting candidates for succession planning, but they have little direct involvement in development of future leaders. Implementing and fully deploying the process is part of the 2007-2010 Strategic Plan. Without a fully implemented approach to succession planning, the organization may be unable to meet the strategic challenge of retaining faculty and staff.

- While the learning environment initiatives lead to an increase in organizational knowledge through effective collection methods, a knowledge management process for knowledge asset storage and access is not fully developed and deployed. Without deployment, integration, and alignment of knowledge management processes, continued benefits from technological advancements may not be fully achieved.

- GRCC reports comparative and competitive data against measures where information is available, but there is not a consistent and purposeful approach to finding and using appropriate meaningful measures across the college. This lack of comparative and competitive data could hinder the organization in reaching its strategic goals and achieving breakthrough and benchmark processes.

- Although GRCC measures processes, many of the measures are not relevant at the process, department, and/or organizational level and are not aligned with the Strategic Planning Process. In some cases, data is collected qualitatively rather than quantitatively, at frequencies that do not allow for effective measure of day-to-day operation. Some measures are missing or not fully developed or change frequently, such as productivity,
effectiveness, and efficiency. Although GRCC identifies there is difficulty in addressing some of these concerns due to collection means, cost, or definition, developing alternate and consistent measurement may aid the college in further advancing and prioritizing effort within the organization. Accurate measures ensure alignment of improvement activities with organizational needs and reduce employee frustration with improvement efforts by promoting integrity and accurate communication.

- While GRCC has developed and deployed key and support processes to assist in attaining the goals identified through the SPP, deployment of some of the processes, like the Innovation Workplace and Succession Planning Process, are in the early stages of deployment. All processes are not fully aligned at different levels (department and college level not aligned for instance. Lack of in-process measures may affect GRCC's ability to improve the effectiveness and efficiency of processes, thereby impacting the ability to achieve long term strategic goals.

c. **Most significant strengths, opportunities, vulnerabilities, and/or gaps for Results**

- The college demonstrates improved financial performance since 2001 for Unrestricted Net Assets ($11.6M to $14.8M) and Other Revenue ($18M to $29M). In addition, Net Direct Debt per Capita ($/taxpayer) has shown improved performance since 2002 ($111 to $95). GRCC has achieved a trend of 100% compliance for audit results, accreditation, and legal compliance.

- Improved performance in overall student satisfaction and minority student population satisfaction demonstrates GRCC’s commitment to learner-centered education. Overall student satisfaction has improved from 93.5% in 2002 to 95.7% in 2006 and was nearly 10% higher than the NCCBP comparative group in 2004. Overall dissatisfaction has dropped from 6.5% in 2002 to 0.9% in 2006. Minority students were more satisfied in 2006 than the overall student population.

- The Course Success Rate presents a decreasing trend in both overall results and Minority and AFP segments, illustrated in 7.1-3 and 7.1-4. Given that the 2006 strategic Dashboard target was 70.4 for the overall Course Success Rate, this decrease is significant as it could impact the organization’s ability to meet the strategic challenge of enhanced learning for these student segments, and indicates potential issues with alignment of organizational processes.
Category 1 – Leadership

Item 1.1 Senior Leadership

Your score in this Item is in the 70% - 85% range.

STRENGTHS

- Senior leadership has a well-defined structure consisting of the Board, PEC, CLC, and AGC. Each group is chartered to promote collaboration and communication. Collectively these groups comprise the leadership system, responsible for communicating the vision and values throughout the organization. A performance excellence model (Figure 1.1-1) provides an overall approach to achieve high performance. Guiding principles are operationalized through five Learning Centered Focus Areas. Each year the institute initiates an external Baldrige-based assessment, such as AQIP, MQL, or Baldrige.

- Senior leaders demonstrate their commitment to Vision and Values through daily actions and behaviors. They have adopted learning principles established by the League for Innovation in Community Colleges. A variety of methods are used to communicate and reinforce the values, including employee orientation, College Connections, GRCC Today, senior leader communications, the strategic plan, the Faculty Goals & Improvement Plan (FGIP), and Performance Development Discussions (PDD).

- Senior leaders promote a legal and ethical environment through written policies, which provide guidance to faculty and staff concerning appropriate legal and ethical behaviors. Senior leaders also participate in many committees that monitor, resolve, and create policy for ethical issues such as the Risk Management Team, the Ethics Protocol Committee, and the AGC Ethics Committee.

- Senior leadership creates an environment for performance improvement and accomplishment of strategic goals through the annual Strategic Planning Process (SPP). The college utilizes formal and informal two-way communication processes to promote innovation in programs, processes, and products and reinforce goals (Figure 1.1-2). This environment supports the values of excellence and accountability. Leaders empower staff, allocate resources, and share knowledge to achieve their ENDS.

- Staff learning is promoted through individual learning, learning days, on-line educational programs, continuing education, and funding to allow attendance at training programs outside of the company and/or bring speakers on-site for Learning Day forums and other instructional programs. These opportunities support and promote the Mission, Vision, and Values.

- Motivation is accomplished through empowerment and a learning environment that aligns performance with college objectives through the Performance Development Discussion (PDD) and the Faculty Goals & Improvement Plan (FGIP). Senior leaders are involved in the recognition programs and awards, such as the Raider Spirit Award, with the President presenting most awards.

- A focus on action to accomplish objectives is achieved through the GRCC Strategic Plan, which includes goals and action plans. Senior leaders serve as champions with assigned accountability for strategic goals and associated action plans to communicate and deploy the plans to the departments and others involved. The communication methods are used to track and report progress. Senior leaders focus on balancing value for students and stakeholders by recognizing their needs and requirements using the Listening and Learning Process. These are included in the SPP.
OPPORTUNITIES FOR IMPROVEMENT

- Senior leaders are involved in new employee orientation, Learning Days, and participate in creating the process for succession planning and identifying candidates, but they have limited direct involvement in the development of future leaders.

- Although the college has recently developed the Innovation Workspace process to promote innovation in programs, processes and products, it is not fully implemented. This may hinder performance improvement and excellence.
Item 1.2 Governance and Social Responsibilities

Your score in this Item is in the 50% - 65% range.

STRENGTHS

- Fiscal responsibility in governance systems is addressed through the Policy Review and Development Process, which includes executive policy that addresses organizational accountability and asset protection. GRCC identifies policy needs, gathers pertinent information, defines and assesses alternatives, adopts new/revised policies, and monitors and evaluates the policies for effectiveness. In addition, the Board of Trustees provides overall governance through community based members, protecting stakeholder interests by approving the college budget through the Dashboard process and through commissioning a community commission.
- GRCC has a variety of external audits conducted to ensure effectiveness of the internal control structure and fiscal accountability, as well as audits done by the Auditor General. Audit reports are sent to the Board for review. Supervisors also receive the results along with recommendations for improvement as appropriate. Actions are taken to ensure that changes are effectively implemented.
- The performance of senior leaders is evaluated through several means. The Board evaluates the President and other senior leaders are evaluated through the PDD system. The Board sub-team also evaluates the institution’s progress against the Ends and Vision to determine the President’s effectiveness. This process promotes organizational values of accountability and excellence.
- GRCC addresses societal impacts and anticipates for public concerns by establishing “listening posts” in the community and by soliciting input through the Community Conversations process. These are conducted two or three times a year and seek to obtain input on college performance from the community perspective. Information gathered is shared with leadership, incorporated into an environmental scan, and used during strategic planning. Regulatory and legal requirements are managed through various departments and teams with the accreditation process managed through the Quality Leadership Team and risks through the Risk Management Team. In addition, some compliance measures and goals are present, aggregated, and trended for achieving and surpassing student and campus safety and legal and regulatory requirements.
- The organization promotes ethical behavior through the establishment of ethics policies that are distributed and reviewed during new employee orientation and through a formal Ethics Protocol Committee that handles reporting and investigation procedures for ethical issues. The policies address several areas of focus that include interactions with students, purchasing, contributions, and academic honesty. Key measures and goals for monitoring ethical behavior are established, aggregated, and trended.
- The college has programs established to support the key community. Programs include five components: The Delta Strategy, the Diversity Learning Center, the Sustainability Initiative, the Learning Center at Wealthy, and the Older Learning Center. Each component has a specific focus and target population. Each provides community learning and allows for information gathering. The faculty and staff are actively engaged in community support programs, are involved in community boards and groups, and often play a significant role in leading community activities.

OPPORTUNITIES FOR IMPROVEMENT

- While there is an informal self-evaluation by the Board of Trustees there is no process in place for the organization to evaluate the performance of individual Board members or the Board itself. Without an evaluation process, the college may be limited in the ability to improve collective Board member performance.
- Although the college manages regulatory and legal requirements through various departments
and teams, the Risk Management Team does not have key measures established for addressing adverse community impact of risks associated with programs and offerings associated with the occupational departments. Without identified measures, the organization may adversely affect its relationship with the community.

- The applicant is in the early stages of implementing the process for identifying support communities and opportunities. Without a formal process and metrics in place, it may be difficult for the organization to meet the Ends of Community Outreach, determine the level of improvement it has on the community, and track progress against goals.
Category 2 – Strategic Planning

Item 2.1 Strategy Development

Your score in this Item is in the 70% - 85% range.

STRENGTHS

- GRCC conducts strategic planning through the Strategic Planning Process that consists of four major phases: Visioning, Planning, Deployment, and Evaluation (Figure 2.1-1). The Board of Trustees and administrative and academic leadership all participate in this process.

- Blind spots, strengths, weaknesses, opportunities, threats, and shifts are identified through the Visioning phase of the Strategic Planning Process (SPP). The on-going Environmental Scan (ES) and the annual Organizational Assessment (OA) collect information on markets, student and stakeholder bases, key partners, previous SPP outcomes, Dashboard results, and feed back from accreditation assessments.

- Departments, teams, and staff discuss changes in the education environment, organizational accomplishments, and the future of higher education in an effort to evaluate long-term sustainability. In addition, a College Crisis Management Plan has been developed that enables the institution to meet the strategic challenge of managing operating costs in the event of an emergency. Some of the plan is in place with the remainder (technology) still in development.

- Key strategic objectives and timetables for accomplishing them are shown in figure 2.1-2. The plan is divided into Learning Centered Focus Areas (Learners, Programs, Services, People, Community, and Financial) and contains long (seven year) and short term (one year) goals for each measure.

- GRCC ensures that strategic objectives balance short and long-term challenges during the Planning phase of the SPP. Discussion and review of the Environmental Scan during the Visioning phase results in information that is used in developing the goals and action plans. The development of the Ends, which are the foundation for development of the plans throughout the College, help to ensure the needs are balanced and help form the priorities of the organization.

OPPORTUNITIES FOR IMPROVEMENT

- While GRCC tracks budgets and operating costs, the 2007 - 2008 Strategic Plan does not identify goals to address strategic challenges other than goals to identify and track all costs. This lack of goals may impede the ability to address strategic challenges.
Item 2.2 Strategy Deployment

Your score in this Item is in the 50% - 65% range.

STRENGTHS

- GRCC develops action plans and has deployed the initial dashboards to achieve key strategic objectives through the Planning and Deployment phases of the Strategic Planning Process (SPP). The College Planning Council (CPC), with input from departments, develops Strategic Goals (SG) and Action Plans (AP). Each SG is assigned to a member of the College Leadership team. Departmental leaders review SG and AP and develop departmental plans to support the College plan.

- Resources are allocated to ensure the accomplishment of action plans through the incorporation of action plans in the annual operating budget. The participative budget process is coordinated through the Budget Control Officers (BCO). New Departmental Action Plans along with their associated funding requests and results from the previous year are reviewed and prioritized by the College Leadership Council. The proposed budget is submitted to Board for adoption at a public meeting.

- Action plans are modified if circumstances require a shift in plans or rapid execution of new plans through the Evaluation phase of the Strategic Planning Process (SPP). The Board and administrative and academic leadership teams hold frequent progress-to-plan reviews. The Quarterly Planning Process focuses on areas that are not meeting targets, allowing those responsible to identify improvement actions.

- Department-specific dashboards exist to measure and monitor progress towards SGs and APs. Each College action plan relating to LCFA has an attached measurement indicator. Indicators may include college-wide measurement or be specific to a single department and dashboards are reviewed quarterly as part of the GRCC Planning process. GRCC has recently revised the dashboard formats and provided additional training as a result of analysis of results for the process.

OPPORTUNITIES FOR IMPROVEMENT

- Although strategic goals, action plans, and Dashboard measures are deployed to departments for department level plans and tools for action plans have recently been revised, key changes from the action plans may not be sustained as the organization is currently in the process of re-establishing meaningful measures to ensure sustainable results. Without measures, the organization may be unable to adequately monitor the action plans and thus be unable to meet the strategic objectives.

- While dashboards are in place in all departments, the measures defined at the College Action Plan level are not aligned with department action plan measures, making it difficult to track progress. In addition, the new Strategic Plan document does not have measures defined that align with action plans. This may impede the ability to project future performance and enable effective tracking of action plans.

- Although there are short and long-term performance projections and comparison data (Figure 2.2-3) for three key measures, no projections are provided for the remaining key measures. No information is provided as to how these projections compare with that of the competition and benchmarks. Without appropriate projections and competitive and benchmark data, it may be difficult for the organization to identify gaps in performance and/or accomplish strategic objectives.

Category 3 – Student, Stakeholder, and Market Focus

Item 3.1 Student, Stakeholder, and Market Knowledge
Your score in this Item is in the 70% - 85% range.

**STRENGTHS**

- Program and demographic segments are identified and analyzed based on the results of the GRCC Environmental Scan and other LLP input methods such as community conversations and advisory boards. Each segment has a specific method from which to obtain input and comment. Three market segments have been established with six different student segments (Figure 3.1-1). After a segment is identified, accommodation needs are specified and plans developed to meet those needs. The needs of feeder school are incorporated into the program review process and partnerships developed with other educational providers to facilitate successful student outcomes. Initiatives such as 3 + 1 agreements, transfer guides, MACRAO agreements, and program offerings by GVSU and Ferris State on the GRCC campus are examples of these initiatives.

- The continuing analyses of market segments occur through the use of an environmental scan, enrollment scorecards, and the LLP. The ES provides information on community education needs, emerging student and stakeholder requirements, and an assessment of competing institutions, while the LLP provides information on current student preferences and satisfaction. Segmenting student groups allows the organization to tailor student programming while the continuing reviews of these segments allow GRCC to stay current and competitive in its market area. The information gained by these methods are tracked and trended by the Institutional Research and Planning Process (IRP) and the Student Affairs Department (SAD). Interpreted results are provided to the Deans’ Council and incorporated into planning cycles. This segmentation approach allows for the district to stay informed of stakeholder and community needs as well as to examine the necessity for new or updated programs.

- Leaders use a proactive approach to gain an understanding of their market activity. They network within the communities served and have formal participation in local business and civic groups. Input is gained from community conversations and the applicant advisory committees. Data from these sources help determine how to target the market and determine the need for new/improved services. Monitoring community enrollment trends allows for identity of primary feeder schools and for the ability to compute market share & calculate market potential of students who may attend the school.

- The applicant gathers data through a formal listening and learning process (LLP) (refer to figure 3.1-3). All employees of the applicant play an integral part of the LLP and have a focus on student and stakeholder requirements. The LLP is coordinated through the Student Affairs Department (SAD) and along with the IRP is presented to the Deans’ Council and Departmental Leaders to make improvements and change as required. The IRP monitors data collected through a variety of tools and this data gathering process is used during the SPP for improvement purposes and for determining the need for new services. A variety of survey delivery methods are utilized to maximize survey response. A common base survey tool is used with questions added or deleted based on student segment.

- The applicant evaluates data to verify the key requirements (Figure OP-3) and determine the need to make adjustments to services based on what is learned. These requirements apply to all students and stakeholder segments. Data analysis and distribution of the above requirements is accomplished by Institutional Research and Planning (IRP) and the Student Affairs Department (SAD) and department leaders are responsible to discuss and disseminate the information throughout their organization to ensure that all faculty and staff understand areas of emphasis and changes that are occurring. This information is also used during the SPP for new education services that may be required on no less than on an annual basis.
OPPORTUNITIES FOR IMPROVEMENT

- The primary service market is the Kent Intermediate School District with 25% of credit enrollments originating from student populations residing outside of the KISD. Due to current capacity issues, GRCC is not aggressively pursuing new out-of-district relationships.

- GRCC feels it is unable to collect some types of data due to FERPA laws, making it difficult to determine whether students are prepared for their transfer to four year college. However, addressing this challenge by surveying transferred students directly or through other methods may permit this evaluation and provide valuable information on the effectiveness with which the college is preparing students, a key student and stakeholder requirement.
Item 3.2 Student and Stakeholder Relationships and Satisfaction

Your score in this Item is in the 50% - 65% range.

STRENGTHS

- Student and stakeholder relationships are built through customization of service delivery and services. This approach enables the applicant to identify at-risk students in troubled populations and provide them with the proper support vehicles, as evidenced by the “Street to Seat” improvement project. GRCC has also developed academic support programs for students; created outreach programs to build early relationships with future students and feeder schools; established transfer agreements and partnerships with higher education institutions; partnered with business groups; and taken a leadership role in the community.

- The Learning Center @ Wealthy is focused on developing future students in an area of high unemployment rates where residents believe college is not an option. The program has achieved greater than 80% completion and persistence rates and has produced increased minority enrollment. Concurrent enrollment agreements, formal partnerships with employers and community groups, and informational booths at local events enhance stakeholder relationships. Through implementation of programs like these, the organization has been able to attract students, provide community partnerships, and help meet the challenge of maintaining a balanced enrollment.

- A formal approach is in place to deal with issues raised by students and stakeholders. The Complaint Management Process (CMP) welcomes input from customers and views complaints as opportunities for improvement. The CMP is well deployed within the organization with training provided during staff sessions on the use of the process. Collection boxes are made available to collect complaints if students choose this anonymous method. All faculty and staff are empowered to resolve complaints on the spot. If a complaint is not resolved, it is forwarded to an appropriate individual for action. Complaints are documented and tracked according to specific guidelines and requirements. The Complaint Management Team reviews complaints quarterly and a summary report is forwarded to the Deans’ Council or CLC for decisions and implementation of their recommended actions of the top issues.

- Multiple methods are used to obtain student and stakeholder feedback. The Listening and Learning Process seeks to ensure that satisfaction determination is valid and thorough, benchmarks are obtained, data is trended, results are used to enhance knowledge, and information obtained is used to improve service offerings. The Institutional Research and Planning process focuses on college programs and services, student perceptions relative to key requirements, and on service delivery. The Community Conversations process and Advisory Team process is used to obtain partner and stakeholder feedback for services. (Figure 7.2-2).

OPPORTUNITIES FOR IMPROVEMENT

- While the CMP encourages complaints to be resolved at the lowest level, there is no process to look for commonality of resolved issues that do not appear on monthly complaint logs. Without a process in place, the applicant may not become aware of common themed complaint issues.

- GRCC obtains information relative to student engagement through the analysis of the CCSSE reports. While there are no direct overall satisfaction questions in CCSSE, a surrogate composite satisfaction score can be inferred from question groups. Without comparative data on an annual basis, the organization will be unable to relate their satisfaction levels to that of their competitors or best-in-class performers.
Category 4 – Measurement, Analysis, and Knowledge Management

Item 4.1 Measurement, Analysis, and Review of Organizational Performance

Your score in this Item is in the 50% - 65% range.

STRENGTHS

- Key comparative data and information sources are selected through third-party research providers that identify those peer and/or competitor organizations that provide data relative to key measures. Information is also obtained about performance of other community colleges within the state. Benchmarking data is obtained from twelve Vanguard colleges, the National Community College Benchmark Project, and other organizations (Figure OP-7).

- Project teams are used to address improvement opportunities (as defined through departmental and college measures including Program Review, Dashboard, and In Process). Methodologies are based on a Plan/Do/Assess/Learn model and include PBM, Team Charter, and Action Projects. Departmental and Team (CLC, LET, Deans’ Council, and AGC) reviews as well as peer and college wide communication (Learning Days, GRCC Today) keep the actions current and moving forward. Communication from community and industry listening posts (Board, Advisory Councils) and internal voices (GRCC Today, meetings, sharing) keep teams and the organization sensitive to rapid and unexpected organizational changes. GRCC stays current by evaluating the performance system regularly at all levels. Cross-functional teams are used for process improvement and design/redesign projects.

- Senior leaders review organizational performance in several ways. The Board, PEC, and CLC (and other councils and teams) review the measures on a regular basis. The PEC and CLC review progress to assess performance relative to strategic objectives and action plans. The leadership teams also review performance relative to benchmark results and segment data as needed to provide useful input to decisions.

- GRCC reviews organizational performance through the use of multiple means including Program Review, Dashboard Measures, Accreditation Status, and Grant Requirements/Progress. Dashboard access is available electronically to faculty and staff, students, and stakeholders. Data results are reviewed by leadership teams and are analyzed and trended. Teams are formed to address improvement opportunities. GRCC conducts a number of analyses to support the comparative advantages against academic, financial, market, student, stakeholder, and employee and support process data. These analyses indicate how well the college is meeting each of the LCFA priorities within the strategic plan and are used to review performance, improve operations and address innovation opportunities.

OPPORTUNITIES FOR IMPROVEMENT

- There are alignment gaps between departmental and college measures. Learning-centered departments’ DB selection is not accepted by faculty and is not integrated with Program Review measures. Measures of capacity to improve effectiveness and efficiency are limited and, although available in some areas like admissions and counseling, are usually project based. Lack of alignment and effectiveness and efficiency measures does not support management of costs, faculty and staff retention, and the values of excellence and accountability.

- The learning environment and team projects actively promote and pursue innovation, but this decentralized identification of projects and multiple means of promoting innovation do not provide consistent measures and direction to facilitate breakthrough opportunities. Without consistent performance measurement breakthrough improvement may not be realized and reduce GRCC ability to meet organizational challenges.
Item 4.2 Information and Knowledge Management

Your score in this Item is in the 50% - 65% range.

STRENGTHS

- To make needed information and data available to faculty and staff, students, and stakeholders, data and information are accessible from anywhere on campus via college network, college web pages, and the Campus Wide Information System (CWIS). Faculty, staff and students access the IT system in all offices, student services areas, library, computer labs and many classrooms. Wireless network capacity as well as GRCC’s website provides network access across all areas of the campus. Overall, IT allows GRCC to provide accessible, real-time data to ensure all stakeholders the opportunity to improve communications and accessible knowledge.

- GRCC employs 24/7 IT service through many different ways. Backups occur without shutting down key databases and interrupting service for students, faculty, and staff. Redundant systems, regular maintenance, distribution of applications across multiple servers, and a tape backup system (off site), also exist as part of ongoing operations. Monitoring software and automatic event notification systems ensure timely notification in the event of a disruption.

- Learning and knowledge sharing are promoted in this learning-centered organization. Figure 4.2-1 describes the knowledge assets/knowledge collection/transfer methods that include faculty and staff, students, stakeholders, and partners/suppliers as knowledge holders and each one’s method to collect/transfer knowledge. This segmentation and approach provides GRCC the ability to ensure knowledge is shared across the college to promote learning and support decentralized identification of improvement activities.

OPPORTUNITIES FOR IMPROVEMENT

- Although there are redundant systems for data, electrical power, and fire suppression, the Business Continuity (BC) and Disaster Recovery (DR) plans as components of the overall Crisis Management Plan are not fully implemented. The organization is becoming more dependent upon information technology to drive processes and customer service. By fully developing and implementing the Crisis Management Plan, GRCC would be able to ensure the availability of hardware, software and information in the event of an emergency.

- Currently the knowledge storage component of the KMP is not well defined or accessible. As GRCC continues to grow organizational knowledge through promotion of a learning-centered organization and effective collection methods, the need to store and retrieve this knowledge easily becomes greater. This could affect GRCC ability to meet future needs and limit learning and growth.
Category 5 – Faculty and Staff Focus

Item 5.1 Work Systems

Your score in this Item is in the 70% - 85% range.

STRENGTHS

- GRCC organizes work around four major divisions. Each division has its own work and organizational structure, which fosters a team-based work environment. Team types are dependent upon the task and are departmental, ad-hoc, or cross-functional. All faculty participate as part of a Team and their activities are reviewed annually by the CLC that follows the RAIDER mission, vision, values and Ends. This structure helps to ensure organizational alignment to the overall goals of the college.

- GRCC uses multiple communication methods across departments, jobs, and locations to provide information on day to day activities, horizontal learnings, specific learning programs and community events. These include regular meetings, Learning Days, College Connections, e-mail, GRCC Today, the Inside GRCC program, and many other methods.

- The applicant uses the PDD process and FGIP to focus on high levels of job performance as well as stakeholder needs through contributions to the college goals. Recognition and reward systems are in place to reinforce high performance and student and stakeholder focus.

- A formal hiring process is used in the recruitment, selection, and hiring of faculty and staff. Positions are approved for posting with written documentation based on growth or program needs (which can be linked to the SGs and APs). Recruitment and affirmative action strategies are developed to assure a diverse candidate pool. Screening committees may be used for positions and selection recommendations are made to the executive leadership. This structured process provides many checkpoints to ensure a good organizational fit for both the candidate and employer.

- There is a strong focus on diversity to create a faculty and staff that reflects the diversity of the community and populations they service. The Diversity Center and College Diversity Team provides multiple methods of training and education to support the diverse ideas, cultures, and thinking of faculty, staff, and community. Participation in lecture series, training classes, and interactions between departments support the goals of the organization to strengthen a culture that values diversity.

- Adjunct faculty is supported and mentored by full time faculty and the dean. Learning activities, mentoring and sharing of best practices are readily available. They feel connected through the multiple modes of communication and regular learning centered activities provided.

OPPORTUNITIES FOR IMPROVEMENT

- Although the Raiders Leadership System has been identified as a means to create a more formal approach to succession planning, the process is not fully implemented. Without an implemented approach to succession planning, the organization may be unable to meet the strategic challenge of recruiting and retaining faculty and staff.
Item 5.2 Faculty and Staff Learning and Motivation

Your score in this Item is in the 70% - 85% range.

STRENGTHS

- GRCC aligns educational and training requirements for faculty and staff with institutional priorities, the Ends, strategic outcomes, action plans from the strategic plan, and short and long-term new project plans. Learning is also includes formal meetings, surveys, self-improvement, performance assessment reviews and Learning Days. Individuals are expected to share learning experiences with others.

- A Learning Academy has been established to manage numerous education and training programs designed and presented to faculty and staff to meet key organization needs relating to teaching, Performance Measure/Improvement, technological change, orientation, Diversify, Ethical Practices, Management/Leadership Development, and Safety. See Figure 5.2-1 for training initiative summary. The LA coordinates scheduling, record-keeping, and reception for development. This enables the faculty and staff to receive education and training that is aligned with the Ends, strategic outcomes, and Action Plans contained in the SP.

- Education and training are delivered to faculty and staff to achieve overall objectives and contribute to high performance by using several methods: traditional classroom, breakout sessions, audio conference, distance learning, and workshops. Adjunct faculty members are offered educational opportunities on evenings and weekends to better accommodate their schedules.

- The Raider Learning System has been developed to provide a college-wide collaborative effort in support of professional development and succession planning. The applicant assists faculty and staff in development through tuition reimbursement for on-campus courses; paid release time per year for degree-seeking and non-degree seeking coursework; funding for research publications, presentations, and conference attendance; and sabbatical and educational leaves.

- The college seeks input for educational and training needs through reporting from the LA, faculty through surveys, data collection at Training Days, and attendance at department meetings. In addition, data is gathered from Faculty Goals and Improvement Plans as well as Learning Plans.

- Diversity training is provided at new employee orientation. There are also multiple education and training sessions offered that faculty and staff attend. The Diversity Team make up of a cross-functional group establishes the goals and measures for diversity. Diversity is integrated into the classroom during regular class sessions and a strong attendance is seen at lecture series on diversity. It is a strong component throughout the organization supported by the community.

- The effectiveness of education and training is monitored in a systematic approach starting with participant at the end of the session and six months later to determine if the training objectives were met and if it met the needs of the individual. Supervisors are then surveyed to determine impact on department needs and employee skill levels in the department.

- GRCC has an early notification plan with a monetary reward for staff and faculty departing or retiring from the organization. This provides a systematic transfer of knowledge and training to other faculty through department meetings, one on one sharing and curriculum materials. Supervisors use staff job descriptions to ensure knowledge is transferred. This early notification also provides an opportunity to reorganized work structure and defines new job description on the organizational chart.
OPPORTUNITIES FOR IMPROVEMENT

- The process for balancing long and short term organizational objectives for training with staff and faculty for development and career progression will not be completely deployed across the organization until spring. Therefore, the effectiveness of this approach is unknown.

- Although GRCC has a systematic approach to evaluating the effectiveness of training from the employee’s perspective; it is in the early stages of evaluating effectiveness from the supervisor and organizational perspective.
Item 5.3 Faculty and Staff Well-Being and Satisfaction

Your score in this Item is in the 50% - 65% range.

STRENGTHS

- The Employee Wellness Team has been established to enhance wellness across campus through a variety of activities. In addition, GRCC formed the Risk Management Team to ensure a safe work environment and stresses ergonomics and safety issues in a proactive manner. Goals and measures are established to meet OSHA and Workman’s Comp requirements.

- To ensure workplace preparedness for emergencies for disasters, GRCC uses the Crisis Management and Response Teams (CMT, CRT). Teams developed the Crisis Management and Communication Plans and conduct drills and exercises to ensure preparedness. Regular training exercises are conducted throughout the year to ensure processes are well designed. Process review is conducted after emergencies or disaster preparedness exercises to identify how the response could be improved and identify changes needed.

- GRCC conducts a campus climate assessment survey (PACE). This has identified three key motivating factors: work that adds value, have a role in decision-making, and collaborative work environment. The survey is segmented by the organizations groups of employees so improvement opportunities can be identified.

- The organization offers many benefits to employees, including health, optical, and dental insurance; retirement packages; paid vacation and sick time; child development center on campus; voluntary time-off; earning compensatory time off instead of overtime pay; and tuition reimbursement. In addition, their Personal Enrichment Team plans social activities for the staff such as ballet, sporting events, holiday breakfast and movies.

- Faculty and Staff measures are integrated into Dashboard measures and are trended to reveal patterns and the need for interventions if negative trending occurs. Having staff performance and satisfactions measures help to integrate into PBM and SPP processes and assure alignment with organizational goals.

OPPORTUNITIES FOR IMPROVEMENT

- Goals and measures are provided for safety and security, but the Health and Wellness Program is in the early stages of developing goals and measures. Current data for “Move It or Lose It” and the Personal Enrichment Team shows activities in the health and wellness program but does not provide outcomes or effectiveness. Without this information, future program offerings may be met with non-acceptance and could also impact the ability to meet the strategic challenge or retaining and recruiting faculty and staff.

- The applicant uses the PACE and Zoomerrang survey tools to provide data to assist in promoting more open and constructive communication among faculty and staff. Other indicators however, such as retention and grievances, are not used to support improving faculty and staff well-being, satisfaction and motivation. This could impact the organization’s ability to meet the strategic challenge for retaining and recruiting faculty and staff.
Category 6 – Process Management

Item 6.1 Learning-Centered Processes

Your score in this Item is in the 50% - 65% range.

STRENGTHS

- Key education services and learning-centered processes are determined through the SPP and use of the PBM. They are based on student education requirements, stakeholder input, and community needs assessment data. New services are aligned to the LCFAs and strategic priorities established in the SPP. PBM applications are methods designed to deliver education sources and execute the Raider Mission. Figure 6.1-2 shows learning-centered processes and key requirements and measurement.

- Key learning-center processes requirements are determined by conducting research and collecting data directly from students and stakeholders. The Listening and Learning Process (LLP) provides the majority of the data used by design teams to formulate student and stakeholder driven requirements which is accomplished during the “Plan” step of the PBM. The LLP is conducted at the department level and input is obtained from all student segments and gathers information specific to learning rates and styles.

- New programs are designed within the context of the PBM using the New Program Development Process, which determines student needs with based on input from faculty, the community, advisory boards, stakeholders, and students at a department level. The CARP is used to develop new or review existing courses and address linkages among other educational offerings. Pilot and test groups are run to ensure programs meet design requirements and meet student, faculty, and stakeholder expectations. Program and course performance is reviewed annually through the Program Review process where improvement opportunities are identified.

- GRCC demonstrates sharing of improvements and lessons learned through a variety of mechanisms such as Learning Days, department retreats/meetings, the Academic Governance Council, and common course syllabi. Further cross-functional improvement teams allow for additional sharing across the organization.

OPPORTUNITIES FOR IMPROVEMENT

- Although the organization uses the Plan and Do steps of the PBM and performance measures are reported for and reviewed through the Program Review Process, the in-process measures selected through PBM improvement projects do not support departmental dashboard measures. Without appropriate in-process measures, GRCC may be unable to meet department- and organizational- level objectives.
Item 6.2 Support Process and Operational Planning

Your score in this Item is in the 50% - 65% range.

STRENGTHS

- The Strategic Planning Process is used to determine key support processes using data compiled from stakeholders, regulatory and accreditation requirements, and measurements from existing services. Key support processes are an outgrowth of the college's mission and are designed, managed, and improved through the Process Based Management Model.

- Key support process requirements are identified by using the PBM based on customer and organizational needs. Input from students, stakeholder, supplier, and partner groups is incorporated into determining key support process requirements through contractual agreements, grant specifications, and/or business plan proposals.

- Adequate budgetary and financial resources are available to support operations through the SPP and budget planning process. Human and financial resource needs to support new education initiatives are determined through the New Program Development Process. This process includes financial analysis including projected operating margin requested through the budget planning process or through an off-cycle budget request should the need arise outside the normal planning process.

- GRCC ensures continuity of operations in case of emergency through the Risk Management Plan, Crisis Management Team and Crisis Management Plan. The Risk Management Team develops disaster/contingency plans for the organization with assistance from the Crisis Management Team and Chief of Police. Senior leaders play a role in the review and revision of the Crisis Management Plan, which encompasses educational, operational, and financial emergency situations. The plan is reviewed and updated by the CLC at least annually.

OPPORTUNITIES FOR IMPROVEMENT

- Although PBM is used to design support processes, measures related to cycle time, productivity, and cost control are not fully incorporated into the design process. Lack of these inputs could impede the organization’s ability to meet the strategic challenge of managing operating costs.

- Although GRCC uses the Plan and Do steps of the PBM and performance measures are reported for and reviewed through the Assess phase of PBM, in-process measures related to productivity and efficiency are not systematically used to manage these processes. Without appropriate in-process measures, GRCC may be unable to monitor the effectiveness of these departments and meet organizational objectives.
Category 7 – Results

Item 7.1 Student Learning Outcomes

Your score in this Item is in the 30% - 45% range.

STRENGTHS

- Fall to Fall Retention rate indicates stable performance from 2001 to 2006 (Figure 7.1-1). This is better than other Michigan and Vanguard community colleges comparison groups for the years the data is available.

- Student course success indicates stable performance from 2001 to 2006 and exceeds NCCBP and Vanguard comparison groups for the years provided (Fig 7.1-3).

- The transfer rate of students to 4-year institutions indicates a slight increase from 2001 (30.3%) to 2003 (31.4%) in Figure 7.1-9. This data indicates that the applicant has experienced some success in achieving the Strategic Goal of Entrance and Transfer, as stated in Section 2.1.

- GRCC demonstrates a 95-97% Workforce Placement Rate from 2001 to 2005, outperforming the Michigan benchmark in 2004 (Figure 7.1-11). Further, GRCC demonstrates strong performance in the percent of students passing their licensure exam the first time (Figure 7.1-12) with LPN, RN and RT all greater than a 94% pass rate that exceeds both state and national performance average for 2006. These data illustrates the success GRCC is experiencing towards it Ends of preparing students with skills for the future.

OPPORTUNITIES FOR IMPROVEMENT

- Although Transfer Student Success (GPA) compares favorably against the 2005 NCCBP benchmark, performance has remained stable and is performing unfavorably against the Native comparative group since 2004. (Figure 7.1-10). This could impact the ability to meet student and/or partnering institution expectations.

- Although overall Fall to Fall Retention rates compare favorably to 2003 NCCBP and 2004 Michigan benchmarks (Figure 7.1-1), retention rates for minority and AFP students are approximately 20% lower than the overall rate and have not shown improvement since 2001(Figure 7.1-2). This could impede the organization’s ability to meet its strategic challenge of enhancing learning for these two student segments.

- While the overall Course Success Rate (Figure 7.1-3) exceeded the NCCBP benchmark in 2002 and the Vanguard benchmark in 2004, performance has decreased from 2001 to 2006 (70% to 67%, respectively). Further, rates have remained relatively stable since 2001 for the AFP and minority student segments (Figure 7.1-4). Given that the 2006 strategic Dashboard target was 70.4 for the overall Course Success Rate, this could impact the organization’s ability to meet the strategic challenge of enhanced learning for these student segments.

- The graduation rate for students entering in 2000 has decreased from 19% to 13% for students entering in 2003 (Figure 7.1-6). The graduation rate for Workforce Development students has decreased from 23% in 1999 to 11% in 2003. The graduation rate for Minority students has decreased from 15.4% in 1999 to 5.3% in 2003. (Figure 7.1-7). With a decline in this Learning Centered Focus area, it may be difficult for GRCC to meet it strategic goal of achieving high-level performance of its students and targeted student segments.

- Although GRCC provides GLO results for 2005 and 2006, since the assessment process has just begun at orientation, comparison of their exit level achievement is unknown. Without trending information, the effectiveness of the processes supporting the GLO measures is unknown. Further, there is no market segmentation of data GLO results (Fig 7.1-13). While the consideration of market segments and student segmentation is very important to GRCC, the lack of segmented data could impede the organizations ability to identify and meet the needs of segmented populations.
Item 7.2 Student- and Stakeholder-Focused Outcomes

Your score in this Item is in the 50% - 65% range.

STRENGTHS

- The applicant demonstrates overall student satisfaction rates continually rising from 93.5% in 2002 to 95.7% in 2006 (Fig 7.2-1). This is better than results other NCCBP colleges. There was an increase in student satisfaction related to Programs and Services between the 2004 and 2006 increasing from 84.3% to 90.4%. (Fig 7.2-1). In 2006, minority student satisfaction reflected slightly better than the overall student population satisfaction totals (Fig 7.2-3).

- Figure 7.2-7 shows that complaints have declined from 2005 to 2006. Student Dissatisfaction shows a decrease from 2002 to 2006 of 6.5% to 0.9% (figure 7.2-8). Since the college began tracking student complaints, complaints have declined from 2005 to 2006 (181 to 162) illustrated in Figure 7.2-7 which may indicate an increase effectiveness in addressing student concerns.

- Results for student recommendations (Figure 7.2-9), Community perception of schools (figure 7.2-10), and High School Graduate Choice (figure 7.2-11) show positive trends for the indicators of student perceived values of the applicant. Data shows the applicant is the best-perceived community college in the region and ranks close behind the two leaders, which are both four-year institutions. High school graduates have selected the applicant over a local State University, a significant competitor, by a margin of almost three to one.

OPPORTUNITIES FOR IMPROVEMENT

- The college presents only two data points for Student Complaints (7.2-7) and High School Graduation Choice (73.2-11). This short trending makes it difficult to establish patterns.

- GRCC relies heavily on qualitative conversations to assess stakeholder satisfaction levels. There are no survey tools used to provide a quantitative measure of satisfaction for either feeder schools or transfer schools. Quantitative measurements would allow for target setting and data trending.
Item 7.3 Budgetary, Financial and Market Outcomes

Your score in this Item is in the 50% - 65% range.

STRENGTHS

- GRCC demonstrates improved financial performance since 2001 for Unrestricted Net Assets (Figure 7.3-1), from $12.3M to $14.8M and Other Revenue (Figure 7.3-2), from $17M to $29M. Net Direct Debt per Capita has shown improved performance since 2002 (Figure 7.3-5), from $111.53 per taxpayer to $95.32 per taxpayer.

- GRCC demonstrates improved performance for Student Success Planning since 2000 (Figure 7.3-3), increasing from $30.4M to $38M; for Affordability (Figure 7.3-4) from 37% to 34% of the Michigan average. Also, Credit Hours offered (Figure 7.3-6) increased from 122.1 to 147.1 since 2001. Affordability in 2005 met the 2006 strategic target.

- A comparison of expenditures (Figure 7.3-7) shows that GRCC is able to devote more costs to student instruction than the Michigan average. GRCC is also able to provide the same services at a lower cost. (Figure 7.3-8) which is a strategic priority as well as advantage in the market place.

- GRCC demonstrates (Figure 7.3-9) excellent management of the budget with a range of % expended from 97.5% to 100.2% with an average % expended of 99.6% from 2001 through 2006.

- GRCC tracks market performance based on its Community Market Share (Figure 7.3-10), High School Market Share (Figure 7.3-11), and Enrollment (Figure 7.3-12). All three indicators show positive trends from 2001-2005. High School Market Share continues to shows a decline in the past year but continues to surpass NCCBP colleges.

OPPORTUNITIES FOR IMPROVEMENT

- Although GRCC shows favorable trends for financial results in Figures 7.3-2 through 7.3-6 and provides favorable trends and comparative data for Figure 7.3-1, data was not provided to demonstrate how this performance compares to other organizations for the remainder of the figures cited. Without appropriate comparative data, the organization may be unable to remain competitive.

- Although GRCC compares favorably against Michigan community colleges relative to Instruction vs. Support costs (Figure 7.3-7) and Cost per Student/Contact Hour (Figure 7.3-8), data presented is for the 2005-2006 timeframe so the applicant is in the initial stages of tracking this measure. Without appropriate trending information, it may be difficult for GRCC to attain the key success factor of cost.

- Although GRCC measures financial and market performance for the organization, High School Market Share (Figure 7.3-11) shows a negative trend over the past 3 years, going from 31% attending GRCC in 2004 to 27% in 2006.
Item 7.4 Faculty and Staff Outcomes

Your score in this Item is in the 30% - 45% range.

STRENGTHS

- GRCC demonstrates that faculty and staff diversity meets or exceeds that of the student population and the community served. This level of performance has been achieved since 2003 and is consistent with the Values and Ends of the organization.

- Compensation levels are measurably higher than the State norms, as measured by compensation as a percentage of College expenditures. (Figure 7.4-3).

- GRCC demonstrates high levels of overall, faculty, and staff retention for 2005 and 2006 (Figure 7.4-9). Further, each measure exceeds that of the BLS comparison group by at least 21%.

OPPORTUNITIES FOR IMPROVEMENT

- Although the applicant demonstrates high performance for faculty competence (Figure 7.4-1) and compares favorably to Michigan community colleges in Compensation (Figure 7.4-3), there is no evidence on how the current levels of work system performance are related to the four major divisions of the organization: Academic and Student Affairs, Organizational Development, Learning Resources and Technology Support, and Financial Services. Without appropriate measures for these work systems and segmentation of overall results, it may be difficult for the applicant to determine effectiveness.

- GRCC Faculty and Staff Satisfaction (Fig 7.4-8) results use data from 2005 PACE survey. Rates are above the normative PACE results for Supervision and Student Focus while rates relative to Structure, Teamwork, and Overall are performing below. Further, results in all five Assessment Factors have declined from 2003 measures. Although new measures have been established for 2007 to measure satisfaction that will allow segmentation, comparison, and timely results, trend information is not yet available; therefore effectiveness of this is unknown. Lack of consistent measure may make it difficult for GRCC to meet the strategic challenge of faculty and staff retention.

- Although the applicant provides faculty and staff results related to work system performance, learning and development, and satisfaction, it is unclear what the levels of performance are for faculty and staff segments (e.g. full time faculty, part time faculty, administrative, female, minority). Without appropriate segmentation, it may be difficult for the applicant to identify difference in the performance and/or well being of these groups.
Item 7.5 Organizational Effectiveness Outcomes

Your score in this Item is in the 30% - 45% range.

STRENGTHS

- GRCC demonstrates relatively stable or favorable results on measures of financial effectiveness. Two key financial indicators are Days in AR and Days to Pay. See Figure 7.5.3. For the past four years Days to Pay have been stable at 3.0 and Days in AR have gone from 7.4 in 2003 to 7.1 in 2006. IT related help desk effectiveness metrics (Fig 7.5-5 and 7.5-6) also demonstrate favorable results on measures of organizational effectiveness.
- Crimes on campus can be seen in Figure 7.5-4 in the breakdown of violent, non-violent and hate crimes. Hate and non-violent crimes have been at consistently low levels from 2001 to 2006.
- IT Help Desk Satisfaction (figure 7.5-5) and IT Help Desk Problem Resolution (figure 7.5-6) indicated the effectiveness of Information Management processes. Very high ratings have been achieved over the last four years, averaging more than 4.5 on a five-point scale. Problems resolved the first time has improved to a very high 86% in response to Help Desk calls.
- The supplier management process has addressed the need of diversity among GRCC vendors. The percent of minority vendors has increased from a low of 2.1% in 2002 to 11.4% in 2006.

OPPORTUNITIES FOR IMPROVEMENT

- Although GRCC measures services effectiveness through Satisfaction and Student Services (figure 7.5-1) and results show improvement from 2004 to 2006, there is no indication of capacity to improve, student development, responsiveness to student or stakeholder needs, supplier and partner performance, or measures of effectiveness or efficiency.
- GRCC measures of effectiveness for IT Help Desk resolution (figure 7.5.6) and Supplier Management Process Performance (figure 7.5.7). These measures have supporting data showing segmentation by type and goals. However, measures for productivity, cycle time, and efficiency for these and other key processes are still being defined and integrated into departmental and college measures.
- Although GRCC uses comparative data for some organizational performance measures (Average Class Size, Supplier Management Process Performance), comparison measures are not consistently applied through all measures (Student Satisfaction with Support Services, Campus Security Process Performance). This may limit GRCC’s ability to monitor and achieve breakthrough performance.
Item 7.6 Leadership and Social Responsibility Outcomes

Your score in this Item is in the 30% - 45% range.

STRENGTHS

- Results for key measures of ethical behavior and stakeholder trust show 100% compliance to training in ethical behavior. From 2002-2006 there have been zero compliance issues, and 100% compliance for faculty and staff ethics training, faculty and staff compliance training, faculty and staff certification/licensure, and Board member independence.

- The organization provides aggregate results of fiscal responsibility, both internal and external, that demonstrate no discrepancies for audits conducted. The college is fully accredited by all governing agencies and no complaints or grievances have been posted against the college over the past year.

- Results in Figure 7.6-4 demonstrate positive performance in Compliance to Safety (e.g. OSHA, EPA), Accreditation and Legal Compliance, with full accreditation and no grievances.

- GRCC demonstrates positive Community Support Results for 2005 and 2006. Customer satisfaction related to the Diversity Center was 94.5% in 2005, membership at the Older Learner Center has increased from 433 in 2005 to 570 in 2006, 100% of leadership participated in 57 community events in 2006.

OPPORTUNITIES FOR IMPROVEMENT

- Although GRCC provides measures related to leadership and social responsibility, performance relative to comparative groups is not measured. Further, measures are not reported in a manner to monitor performance over time (i.e. either in aggregate or not compiled). The lack of comparative data and trending data could hinder the organization in reaching its strategic goals to be a vibrant institution of higher education dedicated to enriching people’s lives and contributing to the vitality of the community.

- PACE survey results relating to Supervisory Relationships has decreased from 3.72 in 2003 to 3.63 in 2005. Further, scores relating to Institutional Structure has decreased from 3.44 in 2003 to 3.24 in 2005. Results specifically related to “the extent to which open and ethical communication is practiced” indicate a statistically significant decrease from 2003 (3.37) to 2005 (3.15). Declines in staff and faculty satisfaction in these areas could impede GRCC’s ability to achieve mission of the college.