ABSTRACT
This manual hosts the main DAIR SOPs and related definitions

March 2016
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List of Abbreviations

ALO  Accreditation Liaison Officer
CAPMAS  Central Agency for Public Mobilization and Statistics
CIRP  Cooperative Institutional Research Program
DAIR  Data Analytics and Institutional Research
IP  Institution Profile
IE  Institutional Effectives
IR  Institutional Research
KPI  Key Performance Indicators
MSCHE  Middle States Commission on Higher Education
NSSE  National Survey of Student Engagement
QS  QS Quacquarelli Symonds
SOP  Standard Operating Procedures
IDSC  The Information and Decision Support Centre
THE  Times Higher Education
About DAIR

The Office of Data Analytics and Institutional Research (DAIR) comprises different functions that work together to advance AUC’s mission and promote effective decision-making. Across these specializations, we offer a variety of services and products to support AUC academic and administrative units, as well as outside constituencies, with planning, assessment, accreditation, research and data analysis needs. In addition, we strive to ensure that AUC is timely in reporting to U.S. and Egyptian government and accreditation bodies. The Office of Data Analytics and Institutional Research (DAIR) reports directly to the President and serves all aspects of the university’s work.

In our role as the clearinghouse for University data, we are committed to a process of transparency, a culture of evidence and open communication in which information is made widely available to the campus community, as well as facilitating the flow of information between the central administration and campus units.

DAIR Model
Mission Statement

The Office of Data Analytics and Institutional Research (DAIR) advances the mission and values of the American University in Cairo by facilitating evidence-based decisions and a culture of assessment and integrated planning. DAIR is the university’s official source of information about itself, its peers, and its educational environment.

VISION

The Office of Data Analytics and Institutional Research will be recognized throughout the university community as well as in Egypt, the region, and internationally for its leadership and innovation in planning, assessment, and research and for the quality of its work.

VALUES

Collaboration: Collaborating effectively with stakeholders both inside and outside the university to increase the quality and efficiency of our services.

Creativity: Thinking “outside the box” with our stakeholders to find creative, innovative, integrated, and effective evidence-based approaches to problems.

Excellence: Producing consistently high quality, highly accurate research and services representing best practices in the field and responsive to the needs of the AUC community and external stakeholders.

Integrity: Providing services characterized by personal and professional integrity in adherence to the highest ethical standards in the field.

Transparency: Fostering a culture of transparency, open communication, and evidence-based decision-making, including sharing best practices both within the university community and internationally to contribute to the development of the field.

SOPs Definitions

The SOPs in this manual are categorized into groups that have been sorted alphabetically. Each SOP has the components below:

- **Title (M)**: the title of the specific SOP
- **Scope (M)**: those involved with the SOP
- **Responsibility (M)**: main person responsible for implementing SOP
- **Description (M)**: Defines the SOP
- **Procedure (M)**: Step by step guideline for carrying out the SOP
- **Guideline (O)**: Important guidelines are included
- **Timeline (O)**: Where timeline, dates or calendars are available they are referred to

(M): Mandatory / (O): Optional
Benchmarking

<table>
<thead>
<tr>
<th>SOP #</th>
<th>DAIR-BS1</th>
<th>TITLE</th>
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</table>

**Scope**
AUC Senior Administration, Department Heads, Deans and Chairs

**Description**
This procedure refers to the steps for preparing the peer comparison

**Procedure**

1. The requestor sends an email to DAIR identifying the following for the required peer comparison:
   - area required for the study
   - specific aspects of this area

2. DAIR conducts a preliminary exploratory research

3. DAIR schedules a meeting to discuss and/or understand peer comparison details

4. DAIR decides on the scope of the peer comparison, level of peers to compare against; sources of data/KPIs

5. DAIR conducts the peer comparison and prepares a report with the research, scope, rational and limitations

6. A meeting is scheduled to present the findings of the research and fine tune the comparisons

7. DAIR sends the final report to the requestor

8. DAIR updates the Data Repository with any new or updated data elements and/or definitions

9. DAIR saves the survey report, visualization representations, analysis and data electronically in a shared, secure and well-organized location with the path and a copy sent to: DAIR Administrative Assistant, Director of Assessment and Accreditation, Director of Institutional Research, Planning Manager and Executive Director
Benchmarking

<table>
<thead>
<tr>
<th>SOP #</th>
<th>DAIR-BS2</th>
<th>TITLE</th>
<th>Ranking and International Benchmarking Surveys</th>
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<td>SUPERVISOR</td>
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</table>

**Scope**

International benchmarking and ranking surveys

**Description**

This procedure refers to the steps for completing and submitting international benchmarking/ranking surveys such as QS, THE, US News, Petersons and others

**Procedure**

1. Benchmarking and ranking surveys are received via official email

2. Depending on the nature of the request, DAIR Executive Director or IR Director will review requests and approve within a 24 hour period. After approval, request will be forwarded to the appropriate DAIR Staff member in charge of furnishing the data.

3. Data requests and surveys must be submitted in full before the deadline set by the requester. Designated staff member is responsible for seeing the request through

4. Once request is completed, it is recorded in the request log; the date the request was received, requestor name, email (if available) and organization, type of data requested, date the data was sent and the method it was sent (mail, email or by hand).
Compliance Assist

**SOP #** DAIR-CA1  **TITLE** System Administration

**REVIEW DATE** March 2016  **RESPONSIBILITY** Administrative Assistant

**SUPERVISOR** Executive Director

**SCOPE**
All AUC representatives responsible for updating integrated plans, assessment plans, program review or MSCHE accreditation.

**DESCRIPTION**
This procedure refers to the steps to maintain Compliance Assist accounts and privileges.

**PROCEDURE**

1. Staff member wishing to have access to compliance assist sends an email to DAIR copying his/her supervisor with the following information:
   - First Name
   - Last Name
   - Email
   - Department (e.g. Office of the Data Analytics and Institutional Research)
   - Title (e.g. Research Analyst)
   - Existing user to replace (if any)

2. DAIR – Compliance Assist administrator verifies the authorization request and the supervisor approval

3. DAIR – Compliance Assist administrator logs in to Compliance Assist

4. DAIR – Compliance Assist administrator checks if the user already exists or is new

**User already Exists**

- DAIR – Compliance Assist administrator resets password
- DAIR – Compliance Assist administrator checks assigned role(s) and department level access
- DAIR – Compliance Assist administrator revokes any previous outdated department level access and role(s)
- DAIR – Compliance Assist administrator grants the suitable department level access and role(s)

**New user**

- DAIR – Compliance Assist administrator creates the user with the specified details:
  - First Name
  - Last Name
  - User Name same as the email user name
- DAIR – Compliance Assist administrator assigns an initial temporary password
- If the user is a replacement for an existing user:
  - DAIR – Compliance Assist administrator assigns the existing user role to the new user
  - DAIR – Compliance Assist administrator revokes access of the existing user
• If the user role is not a replacement, a new role has to be created
  o DAIR creates a new role with the provided user title on the provided department level
  o DAIR – Compliance Assist administrator assigns the new role to the new user

5. DAIR – Compliance Assist Administrator communicates the user name and initial password to
the user by email along with instructions to change the password at the first-time login.

6. Staff supervisor is responsible to notify DAIR in case change of access needs to take place for
any reason

7. At the beginning of every Fall, DAIR – Compliance Assist Administrator extracts the list of
existent users and assigned roles, reviews user access permissions and makes the necessary
changes to keep the user information up-to-date

8. At the beginning of every Fall, DAIR – Compliance Assist Administrator reviews the
organizational chart and makes the necessary changes to keep the organizational chart up-to-
date
Compliance Assist

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<thead>
<tr>
<th>SOP #</th>
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SCOPE
All AUC representatives responsible for updating integrated plans and reports

DESCRIPTION
This procedure refers to the steps to maintain Compliance Assist planning module and reporting

PROCEDURE

To Login to the Planning Module
1. Login to https://aucegypt.compliance-assist.com
2. Enter your credentials
3. Choose the Planning module
4. Click on “Institution” tab, then on “Strategic Plan” tab
5. Adjust your fiscal year by clicking on “Edit Filter” button
6. Choose your unit from the left pane

To Add a new Item
1. From the right pane, click on add “New Item”
2. Choose the component required to be added from the drop down menu
3. For adding different strategic planning component, users should enter the following:
   - For a Unit Mission; title, mission statement, vision statement, values, start & end dates, and responsible roles.
   - For a Unit Environmental Scan; title, start & end dates, progress, responsible roles, strengths, weaknesses, opportunities, and threats.
   - For a Unit Strategic Goal; number, title, goal statement, start & end dates, responsible roles, and progress
   - For a Unit Objective; number, objective title, description, start & end dates, responsible roles, progress, strategies, resources required, key performance indicators, targets, results, progress, and action taken.
4. Click on “Save & Close”

To Edit or Delete an existing item
1. Open the data item
2. Choose the Edit or Delete tab.
3. To edit, make the required changes then click on Save & Close.
4. To delete, click on delete

To Run a report
1. Choose the “Reports” tab
2. Choose the “Unit Strategic Plan” from the right pane
3. Click on “Generate ” report
4. Choose the start & end dates and the format
5. Click on "Generate Report"
Compliance Assist

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<td>RESPONSIBILITY</td>
<td>Director of Assessment and Accreditation</td>
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<td></td>
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<td>SUPERVISOR</td>
<td>Executive Director</td>
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</tbody>
</table>

**Scope**
All AUC representatives responsible for updating assessment plan, reports and program review

**Description**
This procedure refers to the steps to maintain Compliance Assist (CA) assessment and program review module and reporting

**Procedure**

**To Login to the Planning Module**
1. Login to https://aucegypt.compliance-assist.com
2. Enter your credentials
3. Choose the Planning module
4. Click on “Institution” tab, then on “Academic Assessment or Non-academic Assessment” tab
5. Adjust your fiscal year by clicking on “Edit Filter” button
6. Choose your unit from the left pane

**To Add a new Item**
1. From the right pane, click on add “New Item”
2. Choose the component required to be added from the drop down menu
3. For adding different assessment planning component, users should enter the following:
   - For a Program/Unit Mission: title, mission statement, vision statement, values, start & end dates, and responsible roles.
   - For a Program/Unit Outcome; number, title, program outcome description, start & end dates, responsible roles, progress, primary learning opportunities, assessment measures, target levels and benchmarks, when assessment will be conducted, results and analysis and actions taken.
4. Click on “Save & Close”

**To Edit or Delete an existing item**
1. Open the data item
2. Choose the Edit or Delete tab.
3. To edit, make the required changes then click on Save & Close.
4. To delete, click on delete

**To Run a report**
1. Choose the “Reports” tab
2. Choose the specified program from the right pane.
3. Click on “Generate” report
4. Choose the start & end dates and the format
5. Click on “Generate Report”
Compliance Assist

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<td>RESPONSIBILITY</td>
<td>Administrative Assistant</td>
</tr>
<tr>
<td>SUPERVISOR</td>
<td>Executive Director</td>
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</table>

**DESCRIPTION**
This procedure refers to the steps to maintain Compliance Assist MSCHE Documentation Roadmap

**PROCEDURE**

**To Login to the Accreditation Module**

1. Login to [https://aucegypt.compliance-assist.com](https://aucegypt.compliance-assist.com)
2. Enter your credentials
3. Go to the Accreditation module on the left side

**To edit any of the content on any tab:**
- Click on the desired label you want to edit and choose the tab
- Click options on the right top of the page then click edit
- Choose save, save and close, delete or cancel

**To add a new page:**
- Click options on the right top of the page
- Click manage pages
- Click add page
- Choose save, save and close, delete or cancel

**To get printable copy:**
- Click options on the right top of the page
- Click printable files
- Choose the format you want
- Click generate
- Click the print icon

**To upload a document:**
- Click on periodic review label then document directory
- Click options on the right top of the page
- Click manage files
- Choose either add folder or upload file

**To add a folder:**
- Click add folder, choose a name, click create folder
- To add files to the folder, click upload files to selected folder
- To rename, add or delete folder, right click on the folder
To upload file:
- Click upload file
- Choose either to upload a single file or multiple files
- Upload the file

To view the standards and requirements of affiliation:
- Click periodic review label then click the arrow next to it
- Select the self-study 2018
- Go to compliance report tab to check the standards or to requirements of affiliation
Data Management

### SOP #  DAIR-DM1 | TITLE  | Census Data Extraction from Banner
### REVIEW DATE  | March 2016 | RESPONSIBILITY  | Director of Institutional Research
###  |  | SUPERVISOR  | Executive Director

**Scope**

All student, course and faculty information on Banner Modules

**Description**

This procedure refers to the extraction, collection and verification processes of information available on Banner

**Procedure**

1. Before census day, IR Director extracts student and faculty data from Banner to be validated using a census checklist. In case there is a problem with the data, responsible offices are contacted to solve the problem.

2. On census day, DAIR staff extract a number of standard reports capturing important data elements to be used for official reporting

3. Data is stored on individual storage devices as well as on a shared drive that only DAIR staff can access
Data Management

**SOP #** DAIR-DM2  **TITLE** Data Extraction from other University Systems (SAP Primarily)

**REVIEW DATE** March 2016  **RESPONSIBILITY** Director of Institutional Research

**SUPERVISOR** Executive Director

**SCOPE** All faculty information on SAP

**DESCRIPTION** This procedure refers to the extraction, collection and verification processes of faculty information available on SAP

**PROCEDURE**

1. DAIR works with the offices responsible to enter the data on the system to make sure the data is updated and complete on the system.

2. IR Director extracts faculty data to be validated. In case there is a problem with the data, responsible offices are contacted to solve the problem.

3. DAIR staff extract a number of standard reports capturing important data elements to be used for official reporting

4. Data is stored on individual storage devices as well as on a shared drive that only DAIR staff can access
Data Management

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<tr>
<th>SOP #</th>
<th>DAIR-DM3</th>
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<td>REVIEW DATE</td>
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<td>RESPONSIBILITY</td>
<td>Research Analyst</td>
</tr>
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<td></td>
<td></td>
<td>SUPERVISOR</td>
<td>Director of Institutional Research</td>
</tr>
</tbody>
</table>

**Scope**

All information and data elements needed for AUC Profile, Factbook, IE Dashboards and other standard reporting requirements

**Description**

This procedure refers to the collection and verification processes of information from other AUC offices and departments necessary for the AUC Profile, Factbook, IE Dashboards and other standard reports

**Procedure**

1. All data collected from other offices/departments must be requested in writing via email
2. The DAIR staff member requesting the data must make sure to follow through with the request.
3. The requester must clearly mention the definition of the data elements requested and how it is going to be used. The deadline to receive the data should be mentioned to allow the appropriate amount of time for the respondent to furnish the data.
4. Data is stored on individual storage devices as well as on a shared drive that only DAIR staff can access
Data Management

<table>
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<th>SOP #</th>
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<th>TITLE</th>
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<td>SUPERVISOR</td>
<td>Executive Director</td>
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</tbody>
</table>

**Scope**

Data requests made by various AUC offices for data

**Description**

This procedure refers to the steps to process internal data requests

**Procedure**

1. All requests for data must be in writing via email.

2. Depending on the nature of the request, DAIR Executive Director or IR Director will review requests and approve within a 24 hour period. After approval, request will be forwarded to the appropriate DAIR Staff member in charge of furnishing the data.

3. Requests are handled on a “first come, first served” basis unless the urgency is justified by the requester and approved by DAIR Executive Director. Designated staff member is responsible for seeing the request through.

4. Once request is completed, it is recorded in the requests log; the date the request was received, requester name, email and department, type of data requested and date the data was sent.

5. Additions or updates to the Data Repository resulting from the data request are implemented.

6. Clarification about the data furnished can be discussed with DAIR staff.

7. Decisions made based on data sent should be communicated back to DAIR.
## Data Management

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<td>RESPONSIBILITY</td>
<td>Research Analyst</td>
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<td>SUPERVISOR</td>
<td>Director of Institutional Research</td>
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</tbody>
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**SCOPE**
Reports and information made to the Egyptian Government agencies such as The Ministry of Higher Education, CAPMAS, IDSC and others

**DESCRIPTION**
This procedure refers to the steps to prepare and submit reports necessary for compliance to CAPMAS and Egyptian Government bodies

**PROCEDURE**

1. All requests for data must be in writing either on official letterheads from organizations or government agencies or via email.

2. The request will be forwarded to the appropriate DAIR Staff member in charge of furnishing the data.

3. Turn-around time will depend on the size and urgency of the data being requested. Designated staff member is responsible for seeing the request through.

4. Once request is completed, it is recorded in the request log; the date the request was received, requestor name, email (if available) and organization, type of data requested, date the data was sent and the method it was sent (mail, email or by hand).
Data Management

<table>
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<th>SOP #</th>
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<th>TITLE</th>
<th>International Surveys</th>
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<tr>
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<td>Executive Director</td>
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SCOPE
External surveys and data requests for international agencies and organizations

DESCRIPTION
This procedure refers to the steps for completing and submitting surveys and data requests for international organizations such as Peterson’s, The Princeton Review and others

PROCEDURE
1. Surveys are received via official email
2. Depending on the nature of the request, DAIR Executive Director or IR Director will review requests and approve within a 24 hour period. After approval, request will be forwarded to the appropriate DAIR Staff member in charge of furnishing the data.
3. Data requests and surveys must be submitted in full before the deadline set by the requester. Designated staff member is responsible for seeing the request through
4. Once request is completed, it is recorded in the request log; the date the request was received, requestor name, email (if available) and organization, type of data requested, date the data was sent and the method it was sent (On line portal or by email).
Data Management

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<tr>
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<td>SUPERVISOR</td>
<td>Executive Director</td>
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**Scope**

AUC Enrollment Model maintenance and forecasting – Cabinet

**Description**

This procedure refers to the steps to maintain the AUC Enrollment Model

**Procedure**

1. After census day, the IR director updates the enrollment table with census data and shares it with VP for Enrollment Management and Student Life, Dean of Graduate Studies and Associate Provost for Strategic Initiatives if requested

2. A detailed enrollment report is generated from Banner with the breakdown requested by the Office of Student Financial Affairs and Scholarships. Figures are broken down in different sub categories including career level, new and returning students, Egyptian and non-Egyptian and fees rate

3. When enrollment forecasting is requested by the EVP for Administration and Finance, the IR director works with VP for Enrollment Management and Student Life, Dean of Graduate Studies and Associate Provost for Strategic Initiatives to update the enrollment model with the projected admission and total enrollment figures for the required semesters.
   - Undergraduate forecasted figures are updated using built-in formulas based on census figures and averages of previous semesters
   - Graduate forecasted figures are provided by the Dean of Graduate Studies
   - Non-Degree forecasted figures are provided by the Associate Provost for Strategic Initiatives

4. The detailed enrollment projection report is prepared based on the percentages calculated from the detailed census enrollment report of the previous semester/year with the same breakdown

5. The report is sent to the Office of Student Financial Affairs and Scholarships.

6. The Associate Director for Budgeting works with the IR Director to validate and make final adjustments

7. The final projected enrollment figures are used by the Associate Director for Budgeting to prepare the budget projection report
## Institutional Accreditation

<table>
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<tr>
<th>SOP #</th>
<th>DAIR-AC1</th>
<th>TITLE</th>
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<tr>
<td>SUPERVISOR</td>
<td>VP for Information Management</td>
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</table>

**Scope**

All student service departments and area

**Description**

This procedure refers to the communication, budgeting and reporting related to Middle States Commission on Higher Education (MSCHE)

**Procedure**

- All communication regarding to MSCHE accreditation must go through the Accreditation Liaison Officer (ALO)
- The ALO monitors the MSCHE web site to stay current on changes in standards or procedures necessary to maintain compliance
- The ALO communicates regularly with senior administration regarding all accreditation issues and status
- The ALO coordinates and manages the accreditation budget and resources
- The ALO plans for the visit of MSCHE liaison or evaluation team members in coordination with the accreditation chair and communicates the agenda with key stakeholders at AUC

- The ALO is responsible for preparing, coordinating and submitting the following critical documents and reports on behalf of the institution:
  - Substantial Change requests
  - Progress Review Report
  - Feedback in response to MSCHE reports, inquiries or issues
  - Accreditation self-study design document
  - Self-study report and documentation roadmap
  - Requirements for affiliation in coordination with accreditation chair
Institutional Accreditation

<table>
<thead>
<tr>
<th>SOP #</th>
<th>TITLE</th>
<th>MSCHE Accreditation IP</th>
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<tr>
<td>DAIR-AC2</td>
<td>REVIEW DATE</td>
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<td>Executive Director</td>
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**Scope**

Annual Middle States Institutional Profile

**Description**

This procedure refers to the steps for completing and submitting Annual Middle States Institutional Profile

**Procedure**

1. The link to the IP is received via official email announcing that it is open for data entry and clearly stating the submission deadline

2. Data requested in all sections is prepared and entered by the IR Director on the online form

3. Data for the financial section is prepared based on the Audited Financial Report received from the Controller’s Office

4. The Financial section is sent via email to the EVP for Administration and Finance to check and approve

5. Once all data is entered and validated, the IP is locked and submitted on line

6. The Audited Financial Report as well as a document with the link to the University Catalog are attached to the IP as per MSCE’s request

7. Once the IP is submitted, it is recorded in the request log; the date it was received and the date it was submitted
Institutional Assessment

**SOP #** DAIR-AS1  | **TITLE** Academic Assessment
---|---
**REVIEW DATE** March 2016  | **RESPONSIBILITY** Director of Assessment and Accreditation
**SUPERVISOR** Executive Director

**SCOPE** All academic degree-seeking programs

**DESCRIPTION** This procedure refers to the academic assessment cycle

**PROCEDURE**

1. DAIR communicates with all department chairs to develop/update their assessment plans.
   a. Each academic program will review its assessment plan and file an assessment report every year. It is expected that programs/units will routinely gather and analyze assessment data and make appropriate changes.
   b. Each academic program should specify a set of student learning outcomes for the students who graduate with the degree or certificate. Each program should also identify multiple measures to assess those learning outcomes. At least one assessment measure used by a program must be direct.

2. DAIR conducts training sessions and provide consultation on assessment planning and reporting, and support with the Planning and Assessment software (Compliance-Assist).

3. DAIR develops and disseminates assessment plan and report templates, guidelines and timeline to all departments.

4. All programs submit their plans on Compliance-Assist according to the timeline. Assessment plans submitted should include the following elements:
   - Mission Statement;
   - Program/Unit Goals;
   - Program/Unit (Learning) Outcomes/Objectives;
   - Learning opportunities;
   - Assessment methods/measures;
   - Target levels/benchmarks; and
   - When assessment will be conducted and reviewed

5. DAIR sends a report to deans and area heads with all submitted plans and reports on Compliance-Assist after the deadline.

6. One year later, DAIR sends a follow-up email to all department heads to report on results of their plans.

7. All programs submit their reports, including analysis and action items based on results, on Compliance-Assist according to the timeline. Reports submitted should include the following elements:
   - Results/Findings;
   - How results will be used and communicated; and
   - Follow up on last year’s recommended changes based on assessment results
8. DAIR sends a report to deans and area heads with all submitted reports on Compliance-Assist.

**GUIDELINES**

- The department chair, or designee, is responsible for initiating assessment planning and reporting within the department/program.

- Assessment of a program is the responsibility of those who provide the program, beginning from the development of outcomes or objectives, establishment of criteria for success, and development of systematic ways to improve student learning based upon the results of an assessment.

- Assessment plans and reports are to be submitted on Compliance Assist (Planning & Assessment Software) and updated periodically, and in particular after major changes to a program’s curriculum.

- Assessment results will be used in planning and implementing program improvements. Program faculty are expected to document their assessment activities; i.e., how they have analyzed, reviewed, and used the assessment results to enhance their programs.
# Institutional Assessment

<table>
<thead>
<tr>
<th>SOP #</th>
<th>DAIR-AS2</th>
<th>TITLE</th>
<th>General Education Assessment</th>
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<tbody>
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<td>RESPONSIBILITY</td>
<td>Director of Assessment and Accreditation</td>
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<td>SUPERVISOR</td>
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<td>EXECUTIVE DIRECTOR</td>
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## Scope
All general education courses and program

## Description
This procedure refers to the assessment cycle for the Core Curriculum.

## Procedure
Prospective
Institutional Assessment

<table>
<thead>
<tr>
<th>SOP #</th>
<th>DAIR-AS3</th>
<th>TITLE</th>
<th>Non-Academic Assessment</th>
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</table>

**Scope**
All administrative, academic support and executive education departments

**Description**
This procedure refers to the assessment and KPIs needed and integral of the Integrated Planning cycle

**Procedure**

1. DAIR communicates with all department heads to develop/update their assessment plans.
   a. Each non-academic unit will review its assessment plan and file an assessment report every year. It is expected that units will routinely gather and analyze assessment data and make appropriate changes.
   b. Each non-academic unit should specify a set of outcomes for the service or function they are providing. Each unit should also identify multiple measures to assess those outcomes. At least one assessment measure must be direct.

2. DAIR conducts training sessions and provide consultation on assessment planning and reporting, and support with the Planning and Assessment software (Compliance-Assist).

3. DAIR develops and disseminates assessment plan and report templates, guidelines and timeline to all non-academic units.

4. All units submit their plans on Compliance-Assist according to the timeline. Assessment plans submitted should include the following elements:
   - Mission Statement;
   - Unit Goals;
   - Unit Outcomes/Objectives;
   - Assessment methods/measures;
   - Target levels/benchmarks; and
   - When assessment will be conducted and reviewed

5. DAIR sends a report to area heads with all submitted plans and reports on Compliance-Assist after the deadline.

6. One year later, DAIR sends a follow-up email to all department heads to report on results of their plans.

7. All units submit their reports, including analysis and action items based on results, on Compliance-Assist according to the timeline. Reports submitted should include the following elements:
   - Results/Findings;
   - How results will be used and communicated; and
   - Follow up on last year’s recommended changes based on assessment results
• DAIR sends a report to deans and area heads with all submitted reports on Compliance-Assist.

GUIDELINES

• The executive director or director is responsible for initiating assessment planning and reporting within the non-academic unit.

• Assessment of a service is the responsibility of those who provide the services, beginning from the development of outcomes or objectives, establishment of criteria for success, and development of systematic ways to improve student services based upon the results of an assessment.

• Assessment plans and reports are to be submitted on Compliance Assist (Planning & Assessment Software) and updated periodically, and in particular after major changes to a unit’s structure or function.

• Assessment results will be used in planning and implementing program improvements. Units are expected to document their assessment activities; i.e., how they have analyzed, reviewed, and used the assessment results to enhance their services or functions.
Institutional Dashboard

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<tr>
<th>SOP #</th>
<th>DAIR-DS1</th>
<th>TITLE</th>
<th>Institutional Effectiveness Dashboard</th>
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<td>March 2016</td>
<td>RESPONSIBILITY</td>
<td>Planning Manager</td>
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<td>Supervision</td>
<td>Executive Director</td>
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**Scope**

AUC Senior Administration and Board of Trustees

**Description**

This procedure refers to the steps for preparing the Institutional Effectiveness Dashboard presented every fall to the President, Cabinet and Board of Trustees.

**Procedure**

1. DAIR reviews the previous fall Institutional Effectives Dashboard to see if changes in KPIs or definitions is needed

2. DAIR updates the IE Dashboard and IE Dashboard definitions with data collected as part of the Data Collection process

3. DAIR shares the IE Dashboard with President and Cabinet members for review, alignment and feedback

4. DAIR collects any data and makes updates to IE resulting from Presidential and Cabinet review

5. DAIR updates the Data Repository with any new or updated data elements and/or definitions

1. DAIR saves the IE dashboard and data electronically in a shared, secure and well-organized location with the path and a copy sent to: DAIR Administrative Assistant, Director of Assessment and Accreditation, Director of Institutional Research, Planning Manager and Executive Director

6. Executive Director shares the reviewed and approved IE Dashboard with President and Cabinet
# Institutional Dashboard

<table>
<thead>
<tr>
<th>SOP #</th>
<th>DAIR-DS2</th>
<th>TITLE</th>
<th>Student Success Dashboard</th>
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<tr>
<td>Review Date</td>
<td>March 2016</td>
<td>RESPONSIBILITY</td>
<td>Planning Manager / Director of Institutional Research</td>
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<td>SUPERVISOR</td>
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**Scope**

AUC degree-seeking students

**Description**

This procedure refers to the steps for preparing the Student Success Dashboard - Prospective

**Procedure**

1. DAIR reviews the previous available student success KPIs to see if updates in definition are needed
2. DAIR collects and/or extracts student success KPIs
3. DAIR creates/updates the student success dashboard with the KPIs collected and relevant definitions / source
4. DAIR shares the student success dashboard with keys stakeholders for review, alignment and feedback
5. DAIR collects any data and makes updates resulting from stakeholder review
6. DAIR updates the Data Repository with any new or updated data elements and/or definitions
7. DAIR saves the dashboard and data electronically in a shared, secure and well-organized location with the path and a copy sent to: DAIR Administrative Assistant, Director of Assessment and Accreditation, Director of Institutional Research, Planning Manager and Executive Director
8. Executive Director shares the reviewed and approved Dashboard with stakeholders
Institutional Dashboard

<table>
<thead>
<tr>
<th>SOP #</th>
<th>DAIR-DS3</th>
<th>TITLE</th>
<th>Special-Purpose Dashboard</th>
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**SCOPE**

AUC area and school level

**DESCRIPTION**

This procedure refers to the steps for preparing the dashboards requested by area heads and/or deans

**PROCEDURE**

9. The requestor sends an email to DAIR specifying the following for the required dashboard:
   - KPIs (key performance indicators)
   - The number of years

10. DAIR extracts/collcts the requested data

11. DAIR prepares and confirms the definitions

12. DAIR develops the dashboard based on the specific need and sends it back to the requestor with the definitions, source clearly labeled.

13. DAIR updates the Data Repository with any new or updated data elements and/or definitions

14. DAIR saves the IE dashboard and data electronically in a shared, secure and well-organized location with the path and a copy sent to: DAIR Administrative Assistant, Director of Assessment and Accreditation, Director of Institutional Research, Planning Manager and Executive Director
Institutional Surveys

**SOP #** | **DAIR-SR1**  
**TITLE** | **Institutional Survey Calendar**  
**REVIEW DATE** | March 2016  
**RESPONSIBILITY** | Research Analyst  
**SUPERVISOR** | Director of Assessment and Accreditation

**SCOPE**
Institutional Survey Calendar hosts:
- institutional surveys that are conducted in coordination with international survey bodies such as NSSE/CIRP
- institutional surveys adapted from international surveys
- institutional surveys designed in-house with high impact on decision making, policy issuing, assessment and/or planning

**DESCRIPTION**
This procedure refers to the maintenance of the Institutional Survey Calendar

**PROCEDURE**
1. DAIR maintains a calendar for cyclic institutional surveys to ensure surveys are:
   - aligned with Institutional Effectiveness (IE) best practices
   - minimize survey fatigue
   - diverse coverage of key stakeholders
   - well dispersed during the academic year for effective resource allocation

2. The calendar is revisited annually in the spring semester to include updates and modifications for the following year. The review process is based on:
   - IE trends
   - AUC strategic direction
   - Key stakeholder preferences and needs

3. The calendar of surveys is reviewed and approved by Director of Assessment and Accreditation and the Executive Director of DAIR.

4. The calendar is submitted to the Planning and Assessment Committee.

5. Budget is revised and allocated either within DAIR, survey requestor’s area or other.

**TIMELINE**
Survey calendar is maintained all through the year. It is revised and approved in the spring to inform budgeting of the following year.
Institutional Surveys

<table>
<thead>
<tr>
<th>SOP #</th>
<th>DAIR-SR2</th>
<th>TITLE</th>
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<tbody>
<tr>
<td>REVIEW DATE</td>
<td>March 2016</td>
<td>RESPONSIBILITY</td>
<td>Research Analyst</td>
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<td>Director of Assessment and Accreditation</td>
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**SCOPE**
Institutional surveys that are hosted in the Institutional Survey Calendar and are adapted from international surveys or completely in-house designed/administered periodically with a significant impact on institutional decision making, policy issuing, assessment and/or planning.

**DESCRIPTION**
This procedure refers to surveys designed within DAIR based on IE best practices in support of institutional decision making, assessment, planning and policy issuing.

**PROCEDURE**
1. In accordance with the Institutional Survey Calendar, planning for the survey starts.
2. One month before the administration of any survey, concerned entities are invited to review the survey questions to make sure that they are still relevant and cover their research needs.
3. Final survey with feedback and changes is reviewed and approved.
4. DAIR will send the survey out to the target list of recipients as per the specified date in the calendar of institutional surveys, and send the survey reminders where necessary.
5. DAIR will close the survey as per the specified date in the calendar of Institutional surveys.
6. DAIR will provide basic analysis of survey responses unless further requirements are specified, and report is provided in a PDF format.
7. DAIR disseminates the survey analysis report to all entities that would find these results interesting and useful for performance improvement.
8. DAIR updates the Survey Repository and Log file with the necessary details.
9. Entities who received the survey results are required to share with DAIR how the results were utilized and/or impacted decisions.

**TIMELINE**
Timeline for survey preparation, administration and analysis depends on the nature of the institutional survey and the urgency or priority for decision-making.
Institutional Surveys

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<thead>
<tr>
<th>SOP #</th>
<th>DAIR-SR3</th>
<th>TITLE</th>
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<td>SUPERVISOR</td>
<td>Director of Assessment and Accreditation</td>
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**Scope**

Institutional surveys that are hosted in the Institutional Survey Calendar and are implemented in coordination with an international Higher Education (HE) survey body such as NSSE/CIRP

**Description**

This procedure refers to surveys internationally used by HE institutions such as NSSE and CIRP to allow for benchmarking. These support of institutional decision-making, assessment, planning and policy issuing.

**Procedure**

1. In accordance with the Institutional Survey Calendar, DAIR coordinates with international entities responsible for administering the survey to prepare for administration, monitoring and follows up with delivery of report.

2. DAIR disseminates the survey analysis report to all entities that would find these results interesting and useful for performance improvement

3. DAIR updates the Survey Repository and Log file with the necessary details

4. Entities who received the survey results are required to share with DAIR how the results were utilized and/or impacted decisions.

**Timeline**

Timeline is coordinated and is contingent on the international survey body schedule
### Institutional Surveys

<table>
<thead>
<tr>
<th>SOP #</th>
<th>DAIR-SR4</th>
<th>TITLE</th>
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<td>Director of Assessment and Accreditation</td>
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**Scope**

Institutional surveys conducted sporadically to aid with research and decision-making in a particular situation.

**Description**

This procedure refers to surveys that target a census or a broad sample of a population but are not administered periodically and, therefore, not listed on the Institutional Calendar of surveys. These surveys are usually conducted based on IE needs for decision making, policy issuing, assessment and/or planning such as assessing the need for an institution-wide service or measuring the level of satisfaction with a provided institutional service.

**Procedure**

1. The individual or group wishing to conduct the survey sends a survey application form that should include the following:
   - the purpose of the survey and the survey requestor details;
   - what data is to be collected and the survey target population;
   - the survey delivery method;
   - the planned timelines, Survey opening date, closing date and any reminders;

2. DAIR will review the application form and respond back within 10 working days with a decision after taking the following points into consideration:
   - the possibility of using alternative methods for collecting the same information such as focus groups;
   - the availability of any other surveys/data sources that can be used to provide the same information;
   - the possibility of merging this survey with other planned surveys;
   - the optimal timing to launch the survey to ensure that it does not interfere with other main institutional surveys (Main institutional surveys planned on the Institutional calendar of surveys will take precedence over other survey requests.)

3. If the need to conduct this survey was justified based on the prior considerations, the Office of the DAIR will have to discuss the following items with the survey requestor:
   - the design of the survey to make sure that it follows the best practices;
   - the desired method for collecting responses to the survey (e.g. email collector or web link collector);
   - proper timeline for opening and closing the survey and participation reminders;
   - the message body and title to be sent out to invite for participation;
   - the reminder message body and title;
   - possible incentives (if any)
4. The requestor secures permission to email the targeted population from the senior officer responsible for that population and sends a copy of the approval letter or email to DAIR.

5. If the target list of recipients is anything other than all undergraduate students, all graduate students, all students or all AUC, the requestor will be required to provide DAIR with the emails of the target list of recipients.

6. DAIR will design the survey on the survey tool, and will share a preview link with the survey requestor for final confirmation on the survey design.

7. The survey requestor will send a final confirmation.

8. DAIR will send the survey out to the target list of recipients on the agreed-upon survey opening date and will send the survey reminders at the agreed-upon dates.

9. DAIR will close the survey on the agreed-upon survey closing date

10. DAIR will provide basic analysis of survey responses unless further requirements are specified, and report will be delivered in a PDF format. If the survey requestor finds it more useful to have the results in a different format, a clear justification should be submitted for approval of the Executive Director of the Office of DAIR.

11. DAIR disseminates the survey analysis report to all entities that would find these results interesting and useful for performance improvement.

12. DAIR updates the Survey Repository and Log file with the necessary details

13. Entities who received the survey results are required to share with DAIR how the results were utilized.

**Timeline**

Surveys should be submitted to the DAIR department for review at least one month prior to the desired date of launching the survey.

Surveys should be kept open for at least 2 weeks to allow for sufficient response time with one reminder sent mid-way through and one right before the deadline.

If DAIR is responsible for submitting survey results analysis then the time needed to complete the survey analysis will be agreed upon on a case-by-case basis according to the amount of workload and queue of requests at a minimum of ten days.
Institutional Surveys

<table>
<thead>
<tr>
<th>SOP #</th>
<th>DAIR-SR5</th>
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<td>Director of Assessment and Accreditation</td>
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**SCOPE**

Departmental/Program level surveys that do not have a significant impact on institutional decision making, assessment or planning.

**DESCRIPTION**

This procedure refers to surveys designed, and/or administrated for specific departmental or program-level surveys and are only reviewed by DAIR for consultancy on design and recommendation of possible data sources that can provide same information.

**PROCEDURE**

1. DAIR will review the survey request taking the following into consideration:
   - The possibility of using alternative methods for collecting the same information such as focus groups
   - The availability of any other surveys/data sources that can be used to provide the same information

2. If information needed by the requestor do not exist as part of any other existent surveys/data sources and conducting a survey is the best method to collect this information:

3. DAIR provides:
   1. guidance on where to find possible resources that can be useful in designing the survey
   2. feedback on your design of the survey provided that the requestor submits a clear structure of questions and possible answer choices
   3. advice on tools that can help the requestor create and host your survey

4. DAIR will **not** be responsible for designing and administering the survey

5. DAIR will **not** be responsible for providing analysis for the survey

6. DAIR updates the Survey Repository and Log file with the necessary details

7. Entities conducted the survey are required to share with DAIR how the results were utilized and/or impacted decisions.

**TIMELINE**

Surveys should be submitted to DAIR for review at least one month prior to the desired date of launching the survey.

Surveys should be kept open for at least 2 weeks to allow for sufficient response time with one reminder sent mid-way through and one right before the deadline.
Institutional Surveys

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<th>Institutional Survey Dissemination</th>
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<td>March 2016</td>
<td>Research Analyst</td>
<td>Director of Assessment and Accreditation</td>
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**Scope**
All institutional surveys implemented in coordination with DAIR

**Description**
This procedure refers to the standards of dissemination of survey results to the AUC community

**Procedure**
1. DAIR prepares a report with an executive summary, survey analysis and open ended question themes
2. The report is reviewed and approved by the Director of Assessment and Accreditation and the Executive Director
3. A discussion is conducted with the Executive Director on dissemination methods and channels includes:
   - visualization techniques such as infographics to add
   - previous or alternative surveys or research available that can be linked
   - target recipients to survey results
4. DAIR saves the survey report, visualization representations, analysis and data electronically in a shared, secure and well-organized location with the path and a copy sent to: DAIR Administrative Assistant, Director of Assessment and Accreditation, Director of Institutional Research, Planning Manager and Executive Director
5. The Executive Director disseminates institutional survey results and visualization representations where available to the appropriate audience with:
   - a cover letter reflecting the value added this survey,
   - requesting constituents to inform DAIR of decision making implications,
   - requesting feedback for continuous improvement
   - encouraging the sharing and disseminations of the results
   - encouraging conducting presentations on survey results
6. Survey results are posted to the DAIR web site for future reference
7. Requests for presentations of survey results are shared and approved by the Executive Director
Integrated Planning

**Scope**: All AUC Offices and areas (academic and administrative)

**Description**: This procedure refers to the steps of the Integrated Planning cycle

**Procedure**

1. DAIR prepares an Institutional Planning calendar that covers the deadlines for the planning cycle in alignment and coordination with the assessment and resource allocation cycles.

2. DAIR communicates with all areas and department heads the integrated planning calendar two weeks ahead of time.

3. DAIR conducts training sessions and provide consultation on strategic planning and Compliance-Assist.

4. DAIR develops and disseminates planning template, guidelines and timeline to all departments and units.

5. All units submit their plans on Compliance-Assist according to the timeline. Plans submitted should include the following elements:
   - Mission Statement;
   - Vision Statement;
   - SWOT Analysis
   - Unit Goals;
   - Unit Objectives;
   - Unit Strategies;
   - Resources;
   - KPIs/Assessment measures;
   - Target levels/benchmarks

6. DAIR sends a report to area heads with all submitted plans on Compliance-Assist after the deadline.

7. One year later, DAIR sends a follow-up email to all department heads to report on results of their plans.

8. All units submit their reports, including analysis and action items based on results, on Compliance-Assist according to the timeline. Reports submitted should include the following elements:
   - Results/Findings;
   - How results will be used and communicated; and
   - Follow up on last year’s recommended changes based on assessment results
9. DAIR sends a report to area heads with all submitted reports on Compliance-Assist.

10. Submitted plans and reports are reviewed periodically by the Planning and Assessment Committee and reports feedback back to DAIR.

11. DAIR communicates the feedback to department or areas concerned and tracks changes

**GUIDELINES**

- University strategic plan is developed every 5 years in a collaborative effort by students, faculty and staff. The process is initiated by DAIR 1 year prior to the end of the planning cycle.

- Schools, departments and units should revise their plans every 5 years after the development of the university strategic plan. Each unit should align their plans to the university strategic plan.

- Additional resources should be linked to unit’s goals and objectives.

- Each unit will review its strategic plan and file a report every year. It is expected that units will routinely gather and analyze data and make appropriate changes.

- The department chair, or designee, is responsible for initiating planning and reporting within the department.

- The executive director or director is responsible for initiating planning and reporting within the non-academic unit.

- Strategic planning is the responsibility of those who provide the services, beginning from the development of goals or objectives, establishment of criteria for success, and development of systematic ways to improve based upon the results of an assessment.

- Strategic plans and reports are to be submitted on Compliance Assist (Planning & Assessment Software) and updated periodically.

- DAIR is responsible for preparing Institutional dashboards and other performance tracking.

- DAIR is responsible for providing data and preparing research in support of the planning process.
Standard Operating Procedures Data Definitions

Compliance Assist
Compliance Assist is a web based software system from Campus Labs designed to assist in housing effectiveness plans and reports for continuous improvement. Compliance Assist (CA) allows planning and assessment reports to join each other seamlessly for a smooth effectiveness cycle. Users can generate reports and edit information with ease. AUC has licensed the Planning, Assessment, Program Review and Accreditation modules.

Cyclic in-house Institutional Survey
Institutional surveys that are hosted in the Institutional Survey Calendar and are adapted from international surveys or completely in-house designed/administered periodically with a significant impact on institutional decision making, policy issuing, assessment and/or planning.

Cyclic International Institutional Survey
Institutional surveys that are hosted in the Institutional Survey Calendar and are implemented in coordination with an international HE survey body such as NSSE/CIRP.

Data Repository
A repository that hosts key data elements generated/reported by DAIR starting Spring 2015. It retains the following elements: Classification, Data Element Name, Definition, Source, Owner and State of Data.

Data Request Log
A log of key data requests starting April 2016. It includes the following elements: Date of request, Description of the request, Deliver date, Office, Email of requester.

Institutional Survey Calendar
An Institutional survey calendar is available on the Data Analytics and Institutional Research website which lists the approved and scheduled institutional surveys.

Non-Cyclic Institutional Surveys
Institutional surveys that target a census or a broad sample of a population but are not listed on the Institutional Survey Calendar because they are not administered periodically. These surveys are usually used to assess the need for an institution-wide service or measure the level of satisfaction with a provided institutional service.

Non-Institutional Surveys
Surveys designed, and/or administrated for specific departmental or program-level purposes

Survey Repository
A repository that hosts all surveys administered by DAIR starting Fall 2015. It retains the following elements for each new survey: Name, Target Population, Population Size, Response Rate, Creation Date, Launch Date, Type, Frequency, Department and Mode of delivery.

Names of Important Committees Referenced

- Accreditation Steering Committee
- Data Management Committee
- Planning and Assessment Committee
- Standing Ranking Committee

Contact Information

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