



**BOARD OF TRUSTEES
ACADEMIC EXCELLENCE AND STUDENT SUCCESS COMMITTEE**

**Molly S. Seals, Chair
Joseph J. Kerola, Vice Chair
All Trustees are Members**

**Wednesday, March 2, 2022.
1:30 p.m. or immediately following
previous meeting**

**President's Suite
Kilcawley Center**

AGENDA

- A. Disposition of Minutes for Meeting Held December 2, 2021**
- B. Old Business**
- C. Committee Items**

1. Academic Excellence and Student Success Consent Agenda Items*

- C.1.a. = Tab 1 a. Resolution to Modify Textbook Selection Policy, 3356-10-23**
Kevin Ball, Associate Provost for Academic Programs and Planning, will report.
- C.1.b. = Tab 2 b. Resolution to Modify Admission, Retention, and Graduation Standards Policy, 3356-10-06**
Brien N. Smith, Provost and Vice President for Academic Affairs, will report.

2. Academic Excellence and Student Success Action Items

- C.2.a. = Tab 3 a. Resolution to Modify Research Misconduct Policy, 3356-10-16**
Brien N. Smith, Provost and Vice President for Academic Affairs, and Sev Van slambrouck, Director of Office of Research Services, will report.
- C.2.b. = Tab 4 b. Resolution to Authorize Conferral of Honorary Degree**
From a list of candidates endorsed by the Academic Senate, William Kennedy has been nominated to receive an honorary degree at the Spring 2022 commencement ceremony. Board approval is required. Brien N. Smith, Provost and Vice President for Academic Affairs, will summarize the candidate's credentials.

*Items listed under Consent Agenda require Board approval; however, they may be presented without discussion as these items include only non-substantive changes.

3. Academic Excellence and Student Success Discussion Items

- C.3.a. = Tab 5** **a. Academic Program Transformation Initiative (formerly the Curricular Efficiency Initiative)**
Update progress on the Academic Program Transformation Initiative illustrating the connection with General Education Transformation linked to implementing the Plan. This discussion will be informed by anticipated action to be taken by the Board in September with AESS Committee recommending action to the Governance Committee as this relates to implementing the Plan.
Brien N. Smith, Provost and Vice President for Academic Affairs, and Jennifer Pintar, Associate Provost for Academic Administration, will report.
- C.3.b. = Tab 6** **b. Academic Program Enhancement & Effectiveness Initiative**
Overview the annual approach to APEEI for continuous improvement.
Brien N. Smith, Provost and Vice President of Academic Affairs, Kevin Ball, Associate Provost for Academic Programs and Planning, and Sal Sanders, Dean and Assistant Provost for Graduate Studies, will report.
- C.3.c. = Tab 7** **c. The Plan for Strategic Actions to Take Charge of Our Future and Higher Learning Commission Accreditation**
Illustration of how implementing the Plan will align with and inform the mid- and 10-year reaccreditation visit (2027).
Brien N. Smith, Provost and Vice President of Academic Affairs, Kevin Ball, Associate Provost for Academic Programs and Planning, Amy Cossentino, Associate Provost for Strategy and Engagement and Dean of Sokolov Honors College, and Sal Sanders, Dean and Assistant Provost for Graduate Studies, will report.
- C.3.d. = Tab 8** **d. Enrollment and Student Success Optimization**
The integration of the Penguin Pass (degree-audit) and the CRM-Advise system will be illustrated in the context of optimizing student success.
Jeanne Herman, University Registrar, and Claire Berardini, Associate Provost for Student Success, will report.
- e. Academic Senate Update**
A verbal report of the Academic Senate will be presented.
Chester R. Cooper, Jr., Chairperson, Academic Senate, will report.

D. New Business

E. Adjournment



**YOUNGSTOWN
STATE
UNIVERSITY**

**RESOLUTION TO MODIFY
TEXTBOOK SELECTION POLICY, 3356-10-23**

WHEREAS, University Policies are reviewed and reconceptualized on an ongoing basis; and

WHEREAS, this process can result in the modification of existing policies, the creation of new policies, or the deletion of policies no longer needed; and

WHEREAS, action is required by the Board of Trustees prior to replacing and/or implementing modified or newly created policies, or to rescind existing policies; and

WHEREAS, the Textbook Selection policy has been reviewed and formatted in accordance with Policy 3356-1-09, Development and Issuance of University Policies.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Trustees of Youngstown State University does hereby approve the modification of the University Policy Textbook Selection, policy number 3356-10-23, shown as Exhibit __ attached hereto. A copy of the policy indicating changes to be made is also attached.

**Board of Trustees Meeting
March 3, 2022
YR 2022-**

3356-10-23 Textbook selection policy.

Responsible Division/Office: Office of Academic Affairs
Responsible Officer: Provost and Vice President for Academic Affairs
Revision History: December 2019; March 2022
Board Committee: Academic Excellence and Student Success
Effective Date: March 3, 2022
Next Review: 2027

- (A) Policy statement. Youngstown state university (“university”) is committed to providing affordable high quality educational access for students. Affordable high quality educational access includes minimizing the cost of textbooks and instructional materials while correspondingly ensuring instructional quality and the academic freedom of faculty to select textbooks and instructional materials.
- (B) Purpose. To comply with section 3345.025 of the Revised Code, the Higher Education Opportunity Act of 1965, as amended, and House Bill 110 to assist students in the timely procurement of materials, and to ensure instructional quality.
- (C) Parameters.
- (1) Textbook and course materials selection.
- (a) A faculty member may select the textbook(s) and instructional materials to be used in his/her courses unless the faculty member teaches a multi-section or sequential course; in which case, the department faculty who are involved in teaching the course(s) shall provide for textbook selection. In multiple sections of sequential courses that are also prerequisites to advanced courses in the sequence, uniform texts will be selected.
- (b) Faculty members shall provide written notification regarding textbook and course material selection to the department chair no later than seven calendar days prior to the date established on the university calendar of operations as the textbook order due date. This date shall be on or

before the first day of class registration for the term.

- (c) A faculty member's failure to provide textbook information pursuant to this policy shall result in a default to the same textbook (including the same edition) and course materials previously utilized by the faculty member in that course, if available; or if not available, equivalent textbook and/or course material to be used for the upcoming academic term shall be selected in consultation with the faculty member.
- (2) Cost.
 - (a) Cost should be an important consideration when selecting textbooks and other course materials that students are required to purchase. Faculty should consider whether the cost of their adopted textbooks and other materials is suitable for their discipline and the course subject. When textbooks and other materials are markedly different in cost, but are comparable in content and quality, the university recommends that faculty select the less costly option.
 - (b) The university recommends that faculty select open educational resources when they are appropriate for the faculty members' discipline and course content. Faculty need to notify the bookstore of open education resources on or before the first day of class registration for the term. Open educational resources are freely accessible, openly licensed text, media and digital assets, which include, but are not limited to, college textbooks and online supplements.
 - (3) Faculty recognize that self-authored materials shall be used pursuant to university policy, rule 3356-7-01 of the Administrative Code, "Conflicts of interest and conflicts of commitment."

3356-10-23 Textbook selection policy.

Responsible Division/Office: Office of Academic Affairs
Responsible Officer: Provost and Vice President for Academic Affairs
Revision History: December 2019; March 2022
Board Committee: Academic Excellence and Student Success
Effective Date: ~~December 5, 2019~~ March 3, 2022
Next Review: ~~2024~~ 2027

- (A) Policy statement. Youngstown state university (“university”) is committed to providing affordable high quality educational access for students. Affordable high quality educational access includes minimizing the cost of textbooks and instructional materials while correspondingly ensuring instructional quality and the academic freedom of faculty to select textbooks and instructional materials.
- (B) Purpose. To comply with section 3345.025 of the Revised Code, and the Higher Education Opportunity Act of 1965, as amended, and House Bill 110 to assist students in the timely procurement of materials, and to ensure instructional quality.
- (C) Parameters.
- (1) Textbook and course materials selection.
 - (a) A faculty member may select the textbook(s) and instructional materials to be used in his/her courses unless the faculty member teaches a multi-section or sequential course; in -which case, the department faculty who are involved in teaching the course(s) shall provide for textbook selection. In multiple sections of sequential courses that are also prerequisites to advanced courses in the sequence, uniform texts will be selected.
 - (b) Faculty members shall provide written notification regarding textbook and course material selection to the department chair no later than seven calendar days prior to the date established on the university calendar of operations as the textbook order due date. This date shall be on or

before the first day of class registration for the term.

- (c) A faculty member's failure to provide textbook information pursuant to this policy shall result in a default to the same textbook (including the same edition) and course materials previously utilized by the faculty member in that course, if available; or if not available, equivalent textbook and/or course material to be used for the upcoming academic term shall be selected in consultation with the faculty member.
- (2) Cost.
- (a) Cost should be an important consideration when selecting textbooks and other course materials that students are required to purchase. Faculty should consider whether the cost of their adopted textbooks and other materials is suitable for their discipline and the course subject. When textbooks and other materials are markedly different in cost, but are comparable in content and quality, the university recommends that faculty select the less costly option.
 - (b) The university recommends that faculty select open ~~access~~ textbooks and materials educational resources when they are appropriate for the faculty members' discipline and course content. Faculty need to notify the bookstore of open education resources on or before the first day of class registration for the term. Open educational resources are freely accessible, openly licensed text, media and digital assets, which include, but are not limited to, college textbooks and online supplements.
- (3) Faculty recognize that self-authored materials shall be used pursuant to university policy, rule 3356-7-01 of the Administrative Code, "Conflicts of interest and conflicts of commitment."



**YOUNGSTOWN
STATE
UNIVERSITY**

**RESOLUTION TO MODIFY ADMISSION, RETENTION,
AND GRADUATION STANDARDS POLICY, 3356-10-06**

WHEREAS, University Policies are reviewed and reconceptualized on an ongoing basis; and

WHEREAS, this process can result in the modification of existing policies, the creation of new policies, or the deletion of policies no longer needed; and

WHEREAS, action is required by the Board of Trustees prior to replacing and/or implementing modified or newly created policies, or to rescind existing policies; and

WHEREAS, the Admission, Retention, and Graduation Standards policy has been reviewed and formatted in accordance with Policy 3356-1-09, Development and Issuance of University Policies.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Trustees of Youngstown State University does hereby approve the modification of the University Policy Admission, Retention, and Graduation Standards, policy number 3356-10-06, shown as Exhibit __ attached hereto. A copy of the policy indicating changes to be made is also attached.

**Board of Trustees Meeting
March 3, 2022
YR 2022-**

3356-10-06 Admission, retention, and graduation standards.

Responsible Division/Office: Office of Academic Affairs
Responsible Officer: Provost and VP for Academic Affairs
Revision History: march 1998; March 2007; March 2011;
December 2016; March 2022
Board Committee: Academic Excellence and Student Success
Effective Date: March 3, 2022 (no changes)
Next Review: 2026

- (A) Policy statement. The university shall establish appropriate rules and regulations governing the requirements for admission to, retention in, and graduation from the university.
- (B) Procedures.
- (1) Undergraduate standards for admission, retention, and graduation are made by the academic senate in accordance with its charter and bylaws.
 - (2) Graduate student admission, retention, and graduation standards are made by the graduate council in accordance with the “School of Graduate Studies and Research Academic Policy Book.”
 - (3) Requirements for admission, retention, and graduation from specific curricula may be set by schools and departments and may be more selective than university requirements. Such recommendations are subject to review and approval by the appropriate dean, provost/vice president for academic affairs, and president.
 - (4) Changes in university standards for admission, retention, and graduation are reported to the academic and student affairs committee of the board of trustees.
 - (5) Academic standards can be found in the current editions of the “Undergraduate Bulletin” and the “Graduate Bulletin.”

3356-10-06 Admission, retention, and graduation standards.

Responsible Division/Office: ~~Office of the Provost~~ Office of Academic Affairs
Responsible Officer: Provost and VP for Academic Affairs
Revision History: march 1998; March 2007; March 2011;
December 2016; March 2022
Board Committee: Academic Excellence and Student Affairs Success
Effective Date: ~~December 1, 2016~~ March 3, 2022 (no changes)
Next Review: 20264

- (A) Policy statement. The university shall establish appropriate rules and regulations governing the requirements for admission to, retention in, and graduation from the university.
- (B) Procedures.
- (1) Undergraduate standards for admission, retention, and graduation are made by the academic senate in accordance with its charter and bylaws.
 - (2) Graduate student admission, retention, and graduation standards are made by the graduate council in accordance with the “School of Graduate Studies and Research Academic Policy Book.”
 - (3) Requirements for admission, retention, and graduation from specific curricula may be set by schools and departments and may be more selective than university requirements. Such recommendations are subject to review and approval by the appropriate dean, provost/vice president for academic affairs, and president.
 - (4) Changes in university standards for admission, retention, and graduation are reported to the academic and student affairs committee of the board of trustees.
 - (5) Academic standards can be found in the current editions of the “Undergraduate Bulletin” and the “Graduate Bulletin.”



Explanation of Modifications to University Policy:

3356-10-16 Research misconduct.

The policy was reviewed pursuant to the five-year review cycle, updated and modified in accordance with 42 C.F.R. 93, Public Health Service Policies on Research Misconduct, U.S. Department of Health and Human Services, and 45 C.F.R. 689, National Science Foundation, Misconduct in Science and Engineering Research. The format was updated to align with university policy 3356-1-09 Development and issuance of university policies.

**Board of Trustees Meeting
March 3, 2022
YR 2022**



**YOUNGSTOWN
STATE
UNIVERSITY**

**RESOLUTION TO MODIFY
RESEARCH MISCONDUCT POLICY, 3356-10-16**

WHEREAS, University Policies are reviewed and reconceptualized on an ongoing basis; and

WHEREAS, this process can result in the modification of existing policies, the creation of new policies, or the deletion of policies no longer needed; and

WHEREAS, action is required by the Board of Trustees prior to replacing and/or implementing modified or newly created policies, or to rescind existing policies; and

WHEREAS, the Research Misconduct policy has been reviewed and formatted in accordance with Policy 3356-1-09, Development and Issuance of University Policies.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Trustees of Youngstown State University does hereby approve the modification of the University Policy Research Misconduct, policy number 3356-10-16, shown as Exhibit __ attached hereto. A copy of the policy indicating changes to be made is also attached.

**Board of Trustees Meeting
March 3, 2022
YR 2022-**

3356-10-16 Research misconduct.

Responsible Division/Office: Office of Research Services
Responsible Officer: Provost and Vice President for Academic Affairs
Revision History: 1990; 2000; 2006; December 2010;
December 2016; March 2022
Board Committee: Academic Excellence and Student Success
Effective Date: March 3, 2022
Next Review: 2027

- (A) Policy statement. Among the basic principles of Youngstown state university (university) are the pursuit of truth and the responsible exercise of academic freedom. From these principles derive such ideals and values as the freedom and openness of inquiry, academic honesty, and integrity in scholarship and teaching. The university affirms and honors the preservation, growth, and flourishing of these values throughout all its activities, including teaching and learning, research, scholarly inquiry, and creative scholarly endeavor. Accordingly, research misconduct is adverse to the concept of academic freedom and its responsible exercise. It is from this background that the board of trustees implements this policy for handling allegations of misconduct in research.
- (B) Purpose. To address alleged or apparent misconduct in research and in scholarly and creative activities, irrespective of funding source.
- (C) Scope. This policy applies to all individuals involved in research and in scholarly and creative activities, including university faculty, staff, scientists, technicians, students, volunteers, visiting researchers or collaborators engaged in research, or individuals working under an independent contract for services, and paid by, under the control of or affiliated with the university at the time of misconduct.
- (D) Definitions (for purposes of this policy).
- (1) Definitions used in this policy shall conform to those cited in 42 C.F.R. 93 (public health service policies on research misconduct, department of health and human services) and in 45 C.F.R. 689

(national science foundation, misconduct in science and engineering research):

- (a) **“Allegation.”** Any written or oral statement or other indication of possible research misconduct to an institutional officer that triggers the procedures described in this policy.
- (b) **“Complainant.”** A person who in good faith makes an allegation of research misconduct.
- (c) **“Conflict of Interest.”** The real or apparent interference of a person’s interest with the interests of another, where potential bias may occur due to prior or existing financial, personal or professional relationships.
- (d) **“Deciding official (DO).”** The DO is the institutional official who makes final determinations on allegations of research misconduct and any institutional administrative actions. The DO will not be the same individual as the research integrity officer and should have no direct prior involvement in the institution’s allegation, inquiry or investigation assessment. Normally, the provost is the DO at the university. If the provost has a conflict of interest or is otherwise unable to fulfill this role, the president shall appoint the DO.
- (e) **“Fabrication.”** Making up data or results and recording or reporting them.
- (f) **“Falsification.”** Manipulating research materials, equipment or processes, or changing or omitting data or results such that the research is not accurately represented by the research record.
- (f) **“Good Faith Allegation.”** Allegations of research misconduct made by a complainant who honestly believes that research misconduct occurred based on the information known at the time.
- (g) **“Inquiry.”** Preliminary information gathering and fact-finding to determine whether an allegation or apparent

instance of misconduct warrants an investigation.

- (h) “Investigation.” The collection and review of all relevant evidence of the alleged research misconduct, including but not limited to research records, documentation, interviews of those involved and knowledge about the activities under investigation to determine if research misconduct occurred and to recommend appropriate corrective actions.
- (i) “National Science Foundation Office of Inspector General (NSF OIG).” The office within NSF that oversees investigations of research misconduct and conducts NSF inquiries or investigations into these allegations.
- (j) “Office of Research Integrity (ORI).” The office overseeing and directing public health service research integrity activities on behalf of the Secretary of Health and Human Services. This includes oversight of research misconduct inquiries and investigations as well as institutional compliance.
- (k) “Plagiarism.” The appropriation of another person’s ideas, processes, results, or words without giving appropriate credit.
- (l) “Preponderance of evidence.” Proof by information that compared with that opposing it, leads to the conclusion that the fact at issue is more likely true than not.
- (m) “Research integrity officer (RIO).” The institutional official responsible for assessing allegations of research misconduct and determining when such allegations warrant inquiries, overseeing inquiries and investigations; and other responsibilities described in this policy. The DO appoints the RIO. Normally, the director of research services will serve as the RIO of the university.
- (n) “Research misconduct.” Fabrication, falsification, plagiarism in proposing, performing or reviewing research, or in reporting research results.
- (o) “Research record.” The record of data or results that

embody the information resulting from research as well as the record of methods and analysis that led to those data or results, including but not limited to proposal or contract applications, funded or unfunded grants or contracts, progress and other reports, lab notebooks, notes, correspondence, videos, photographs, X-ray files, equipment use logs, biological materials, laboratory procurement records, animal facility records, human and animal subjects protocols, medical charts, patient research files, abstracts, theses, oral presentations, computer files, codes and printouts, manuscripts and publications, musical scores and composition, and choreography.

- (p) “Respondent.” The person against whom an allegation of research misconduct is made or who is the subject of the research misconduct proceeding.
- (q) “Retaliation.” An adverse action taken against an individual in response to a good faith allegation of research misconduct or good faith cooperation with research misconduct proceedings of the university

- (2) Nothing in these definitions shall be deemed to include honest error or differences in opinion as research misconduct.

(E) Guidelines.

- (1) Responsibility to report Research Misconduct.
Any person, upon observing or having evidence of suspected research misconduct or believing specific actions, activities, or conduct constitutes research misconduct, as defined in this policy, may make an allegation. Such persons contemplating an allegation are encouraged to first discuss the allegation in confidence with the RIO, who will advise the person(s) about the procedures to be followed under this policy.
 - (a) If an allegation of research misconduct is made to an institutional official other than the RIO, details of the substance of the allegation will be immediately transmitted to the RIO in writing.
 - (b) If the allegation is against the RIO or there is an apparent or

actual conflict of interest, the DO will appoint a substitute RIO to act as the RIO in implementing this policy.

- (2) This policy applies to allegations of research misconduct within six years of the date the university, oversight agency or funding entity receives an allegation of research misconduct (42 C.F.R. 93.105). Exceptions include:
 - (a) the respondent(s) continues or renews any incident of alleged research misconduct that happened before the six-year limitation through the citation, republication or other use of research record(s) that is alleged to have been fabricated, falsified or plagiarized for the benefit of the respondent(s).
 - (b) the university determined that the alleged research misconduct may have a substantial adverse effect on the health or safety of the public.
- (3) A finding of research misconduct under this policy requires that:
 - (a) There be a significant departure from accepted practices of the relevant research community; and
 - (b) The misconduct be committed intentionally, knowingly, or recklessly; and
 - (c) The allegation be proven by a preponderance of the evidence.
- (4) Cooperation with research misconduct proceedings.
 - (a) Respondent(s), complainant(s) and witness(es) are responsible to fully cooperate with the RIO and other university officials in the review of allegations and in the conduct of inquiries and investigations of research misconduct. These individuals are obligated to provide evidence relevant to the research misconduct proceedings to the RIO, the inquiry and investigation committees, other university officials and any appropriate oversight agency or funding entity.

- (b) Failure to cooperate with research misconduct proceedings constitutes grounds for disciplinary proceedings against students, faculty and staff under the student code of conduct, applicable collective bargaining agreements, or office of human resources disciplinary proceedings. Failure to cooperate constitutes grounds for termination of a volunteer's agreement with the university.
 - (c) If third parties and other non-university personnel refuse to cooperate in research misconduct proceedings upon request, their refusal may constitute grounds for termination of their affiliation with the university.
- (5) Confidentiality.
 - (a) The RIO will limit the disclosure of the identity of respondent(s) and complainant(s), if known, and any records of evidence from which research subjects might be identified, to individuals who need to know in order to carry out a thorough, competent, objective and fair research misconduct proceeding and except as required under certain circumstances, including but not limited to by law, the oversight agency, the rules of the contract or award with the funding entity, the need to inform the research community to protect the research integrity or the human subjects involved, or as part of a corrective action.
 - (b) Except as otherwise required by this policy or by federal, state, or local law or regulation, it is a violation of this policy for any member of the faculty, professional administrative staff or classified staff, an individual providing services pursuant to an independent contract, or a member of the student body to violate the confidentiality of a proceeding under this policy.
 - (c) The RIO, in consultation with the DO, may in their discretion consult with experts outside the university community for proper conduct of the review and proceedings and inform other institutional personnel and officials responsible for oversight of the respondent's research activities and institutional response or corrective

actions.

(6) Protections.

- (a) The university will not tolerate retaliation in any way against complainants, respondents, witnesses, or committee members participating in a research misconduct proceeding. Any alleged or apparent retaliation from other university members against these individuals should be reported immediately to the RIO, who will review and make all reasonable and practical attempts needed to protect or restore the position and reputation of the person whom the retaliation is against. Retaliation by university members will be grounds for university disciplinary procedures.**
- (b) The RIO and other institutional officials will make all reasonable and practical attempts to protect or restore the reputation of persons alleged to have engaged in research misconduct, but against whom no finding of research misconduct or any other violation is made. The university may, to the extent possible, work with the respondent(s) to rectify the reputation of the respondent(s), including providing a letter stating that there were no findings of research misconduct.**

(7) Notifications of oversight agencies and funding entities.

- (a) The RIO will make notifications to oversight agencies and funding entities, including but not limited to ORI and the NSF OIG, when allegations of research misconduct relate to sponsored research, on or before the start of the investigation and at the conclusion of the investigation.**
- (b) The RIO will immediately notify the appropriate oversight agency if there is reason to believe that any of the following conditions exist:**

 - (i) The health or safety of the public is at risk, including an immediate need to protect human or animal subjects;**

- (ii) Federal resources or interests are threatened;
 - (iii) Research activities should be suspended;
 - (iv) There is indication of possible violations of civil or criminal law;
 - (v) Federal action is required to protect the interests of those involved in the research misconduct proceeding;
 - (vi) The research misconduct proceeding may be made public prematurely and agency action may be necessary to safeguard evidence and protect the rights of those involved; or
 - (vii) The research community or public should be informed, as determined by the institution or appropriate oversight agency or funding entity.
- (F) Resolutions and corrective action.
- (1) Interim institutional administrative actions.
 - (a) The RIO will review the circumstances throughout the research misconduct proceedings to determine if there is any threat of harm to public health, federal funds and equipment, or the integrity of externally supported research.
 - (b) If such a threat exists, the RIO will, in consultation with the DO, other institutional officials and the relevant oversight agency, take appropriate interim action to protect against any such threat. This may include, but is not limited to:
 - (i) additional monitoring of the research activities and the handling of external funds and equipment;
 - (ii) reassignment of personnel or of the responsibility for the handling of external funds and equipment; or

(iii) additional review of research data and results or delaying publication.

(2) Admissions and Resolutions.

The respondent(s) should be given the opportunity to admit that research misconduct occurred and that the respondent(s) committed research misconduct, at any phase of the proceedings under this policy. The RIO will acquire a written admission describing the specifics of the research misconduct. The DO, in consultation with the RIO, committee members and other university officials may terminate the proceedings when an allegation has been admitted and all relevant issues are resolved, and further determine corrective actions. The RIO will notify the relevant oversight agency or funding entity. A resolution may be reached when the oversight agency agrees with terminating the research misconduct proceedings and approves the proposed resolution.

(3) Institutional corrective actions.

(a) If the DO determines the presence of research misconduct, the DO will decide on the appropriate corrective actions to be taken, after consultation with the RIO and other university officials.

(b) Appropriate corrective actions may include, but are not limited to:

(i) a letter of reprimand;

(ii) special monitoring of respondent(s) of future work;

(iii) removal of respondent(s) from the particular project;

(iv) termination of the active award;

(v) restitution of funds from the agency;

(vi) correction or withdrawal of all pending or published abstracts, manuscripts, publications and grant

applications originating from research where misconduct was determined (42 C.F.R. 93.313);

- (vii) disciplinary actions for faculty, staff or students, in accordance with the applicable collective bargaining agreement, disciplinary proceedings established by the office of human resources, or the student code of conduct (university policy 3356-8-01.1 “The Student Code of Conduct” (rule 3356-8-01.1 of the Administrative Code); or
- (viii) termination of an individual’s volunteer agreement with the university.

(G) Procedures.

- (1) The Office of Research Services is charged with developing procedures to implement this policy.
- (2) Procedures and other information concerning research misconduct, including regulations, charges of committees and outlines for inquiry and investigation reports are available in the office of research services and “PI handbook” at <https://ysu.edu/office-research-services>.

3356-10-16 Research misconduct.

~~Previous Policy Number: 1016.01~~

Responsible Division/Office: Office of Research Services

Responsible Officer: Provost and Vice President for Academic Affairs

Revision History: 1990; 2000; 2006; December 2010;

December 2016; March 2022

Board Committee: Academic Excellence and Student AffairsSuccess

Effective Date: ~~December 1, 2016~~ March 3, 2022

Next Review: ~~2021~~ 2027

- (A) Policy statement. Among the basic principles of Youngstown state university (university) are the pursuit of truth and the responsible exercise of academic freedom. From these principles derive such ideals and values as the freedom and openness of inquiry, academic honesty, and integrity in scholarship and teaching. The university affirms and honors the preservation, growth, and flourishing of these values throughout all its activities, including teaching and learning, research, scholarly inquiry, and creative scholarly endeavor. Accordingly, research misconduct is adverse to the concept of academic freedom and its responsible exercise. It is from this background that the board of trustees implements this policy for handling allegations of misconduct in research. ~~This policy will be applied to all externally funded grants or sponsored programs at YSU.~~
- (B) Purpose. To address ~~allegations of misconduct in research~~ alleged or apparent misconduct in research and in scholarly and creative activities, irrespective of funding source.
- (C) Scope. This policy ~~will be applied to all misconduct alleged to have occurred in externally funded grants or sponsored programs at the university~~ applies to all individuals involved in research and in scholarly and creative activities, including university faculty, staff, scientists, technicians, students, volunteers, visiting researchers or collaborators engaged in research, or individuals working under an independent contract for services, and paid by, under the control of or affiliated with the university at the time of misconduct.
- (D) Definitions (for purposes of this policy).

- (1) Definitions used in this policy shall conform to those cited in 42 C.F.R. 93 (public health service policies on research misconduct, department of health and human services) and in 45 C.F.R. 689 (national science foundation, misconduct in science and engineering research):
- (a) “Allegation.” Any written or oral statement or other indication of possible research misconduct to an institutional officer that triggers the procedures described in this policy.
 - (b) “Complainant.” A person who in good faith makes an allegation of research misconduct.
 - (c) “Conflict of Interest.” The real or apparent interference of a person’s interest with the interests of another, where potential bias may occur due to prior or existing financial, personal or professional relationships.
 - (d) “Deciding official (DO).” The DO is the institutional official who makes final determinations on allegations of research misconduct and any institutional administrative actions. The DO will not be the same individual as the research integrity officer and should have no direct prior involvement in the institution’s allegation, inquiry or investigation assessment. Normally, the provost is the DO at the university. If the provost has a conflict of interest or is otherwise unable to fulfill this role, the president shall appoint the DO.
 - (e) “Fabrication.” Making up data or results and recording or reporting them.
 - (f) “Falsification.” Manipulating research materials, equipment or processes, or changing or omitting data or results such that the research is not accurately represented by the research record.
 - (f) “Good Faith Allegation.” Allegations of research misconduct made by a complainant who honestly believes that research misconduct occurred based on the

information known at the time.

- (g) “Inquiry.” Preliminary information gathering and fact-finding to determine whether an allegation or apparent instance of misconduct warrants an investigation.
- (h) “Investigation.” The collection and review of all relevant evidence of the alleged research misconduct, including but not limited to research records, documentation, interviews of those involved and knowledge about the activities under investigation to determine if research misconduct occurred and to recommend appropriate corrective actions.
- (i) “National Science Foundation Office of Inspector General (NSF OIG).” The office within NSF that oversees investigations of research misconduct and conducts NSF inquiries or investigations into these allegations.
- (j) “Office of Research Integrity (ORI).” The office overseeing and directing public health service research integrity activities on behalf of the Secretary of Health and Human Services. This includes oversight of research misconduct inquiries and investigations as well as institutional compliance.
- (k) “Plagiarism.” The appropriation of another person’s ideas, processes, results, or words without giving appropriate credit.
- (l) “Preponderance of evidence.” Proof by information that compared with that opposing it, leads to the conclusion that the fact at issue is more likely true than not.
- (m) “Research integrity officer (RIO).” The institutional official responsible for assessing allegations of research misconduct and determining when such allegations warrant inquiries, overseeing inquiries and investigations; and other responsibilities described in this policy. The DO appoints the RIO. Normally, the director of research services will serve as the RIO of the university.
- (n) “Research misconduct.” Fabrication, falsification,

- plagiarism in proposing, performing or reviewing research, or in reporting research results.
- (o) “Research record.” The record of data or results that embody the information resulting from research as well as the record of methods and analysis that led to those data or results, including but not limited to proposal or contract applications, funded or unfunded grants or contracts, progress and other reports, lab notebooks, notes, correspondence, videos, photographs, X-ray files, equipment use logs, biological materials, laboratory procurement records, animal facility records, human and animal subjects protocols, medical charts, patient research files, abstracts, theses, oral presentations, computer files, codes and printouts, manuscripts and publications, musical scores and composition, and choreography.
- (p) “Respondent.” The person against whom an allegation of research misconduct is made or who is the subject of the research misconduct proceeding.
- (q) “Retaliation.” An adverse action taken against an individual in response to a good faith allegation of research misconduct or good faith cooperation with research misconduct proceedings of the university
- ~~(a) “Research misconduct.” Fabrication, falsification, plagiarism in proposing, performing or reviewing research, or in reporting research results.~~
- ~~(b) “Fabrication.” Making up data or results and recording or reporting them.~~
- ~~(c) “Falsification.” Manipulating research materials, equipment or processes, or changing or omitting data or results such that the research is not accurately represented by the research record.~~
- ~~(d) “Plagiarism.” The appropriation of another person’s ideas, processes, results, or words without giving appropriate credit.~~

- ~~(e) — “Complainant.” A person who in good faith makes an allegation of research misconduct.~~
- ~~(f) — “Respondent.” The person against whom an allegation of research misconduct is made or who is the subject of the research misconduct proceeding.~~
- ~~(g) — “Research integrity officer (RIO).” The associate vice president for research. The RIO means the institutional official responsible for:

 - ~~(i) — Assessing allegations of research misconduct to determine whether they fall within the definition of research misconduct, are covered by 42 C.F.R. 93, and warrant an inquiry on the basis that the allegation is sufficiently credible and specific so that potential evidence of research misconduct may be identified;~~
 - ~~— (ii) — Overseeing inquiries and investigations; and~~
 - ~~— (iii) — The other responsibilities described in this policy.~~~~
- ~~(h) — “Deciding official (DO).” The appropriate principal administrative officer in which division of the university the respondent holds appointment. The DO is the institutional official who makes final determinations on allegations of research misconduct and any institutional administrative actions. The deciding official will not be the same individual as the research integrity officer and should have no direct prior involvement in the institution’s inquiry, investigation, or allegation assessment.~~

- (2) Nothing in these definitions shall be deemed to include honest error or differences in opinion as research misconduct.

(E) Regulations: Guidelines.

- (1) -Responsibility to report Research Misconduct.
Any person, upon observing or having evidence of suspected research misconduct or believing specific actions, activities, or conduct constitutes research misconduct, as defined in this policy.

may make an allegation. Such persons contemplating an allegation are encouraged to first discuss the allegation in confidence with the RIO, who will advise the person(s) about the procedures to be followed under this policy.

- (a) If an allegation of research misconduct is made to an institutional official other than the RIO, details of the substance of the allegation will be immediately transmitted to the RIO in writing.
- (b) If the allegation is against the RIO or there is an apparent or actual conflict of interest, the DO will appoint a substitute RIO to act as the RIO in implementing this policy.
- (2) This policy applies to allegations of research misconduct within six years of the date the university, oversight agency or funding entity receives an allegation of research misconduct (42 C.F.R. 93.105). Exceptions include:

 - (a) the respondent(s) continues or renews any incident of alleged research misconduct that happened before the six-year limitation through the citation, republication or other use of research record(s) that is alleged to have been fabricated, falsified or plagiarized for the benefit of the respondent(s).
 - (b) the university determined that the alleged research misconduct may have a substantial adverse effect on the health or safety of the public.
- (3) A finding of research misconduct under this policy requires that:

 - (a) There be a significant departure from accepted practices of the relevant research community; and
 - (b) The misconduct be committed intentionally, knowingly, or recklessly; and
 - (c) The allegation be proven by a preponderance of the evidence.
- (4) Cooperation with research misconduct proceedings.

- (a) Respondent(s), complainant(s) and witness(es) are responsible to fully cooperate with the RIO and other university officials in the review of allegations and in the conduct of inquiries and investigations of research misconduct. These individuals are obligated to provide evidence relevant to the research misconduct proceedings to the RIO, the inquiry and investigation committees, other university officials and any appropriate oversight agency or funding entity.
 - (b) Failure to cooperate with research misconduct proceedings constitutes grounds for disciplinary proceedings against students, faculty and staff under the student code of conduct, applicable collective bargaining agreements, or office of human resources disciplinary proceedings. Failure to cooperate constitutes grounds for termination of a volunteer's agreement with the university.
 - (c) If third parties and other non-university personnel refuse to cooperate in research misconduct proceedings upon request, their refusal may constitute grounds for termination of their affiliation with the university.
- (5) Confidentiality.
- (a) The RIO will limit the disclosure of the identity of respondent(s) and complainant(s), if known, and any records of evidence from which research subjects might be identified, to individuals who need to know in order to carry out a thorough, competent, objective and fair research misconduct proceeding and except as required under certain circumstances, including but not limited to by law, the oversight agency, the rules of the contract or award with the funding entity, the need to inform the research community to protect the research integrity or the human subjects involved, or as part of a corrective action.
 - (b) Except as otherwise required by this policy or by federal, state, or local law or regulation, it is a violation of this policy for any member of the faculty, professional administrative staff or classified staff, an individual

providing services pursuant to an independent contract, or a member of the student body to violate the confidentiality of a proceeding under this policy.

(c) The RIO, in consultation with the DO, may in their discretion consult with experts outside the university community for proper conduct of the review and proceedings and inform other institutional personnel and officials responsible for oversight of the respondent's research activities and institutional response or corrective actions.

(6) Protections.

(a) The university will not tolerate retaliation in any way against complainants, respondents, witnesses, or committee members participating in a research misconduct proceeding. Any alleged or apparent retaliation from other university members against these individuals should be reported immediately to the RIO, who will review and make all reasonable and practical attempts needed to protect or restore the position and reputation of the person whom the retaliation is against. Retaliation by university members will be grounds for university disciplinary procedures.

(b) The RIO and other institutional officials will make all reasonable and practical attempts to protect or restore the reputation of persons alleged to have engaged in research misconduct, but against whom no finding of research misconduct or any other violation is made. The university may, to the extent possible, work with the respondent(s) to rectify the reputation of the respondent(s), including providing a letter stating that there were no findings of research misconduct.

(7) Notifications of oversight agencies and funding entities.

(a) The RIO will make notifications to oversight agencies and funding entities, including but not limited to ORI and the NSF OIG, when allegations of research misconduct relate

to sponsored research, on or before the start of the investigation and at the conclusion of the investigation.

(b) The RIO will immediately notify the appropriate oversight agency if there is reason to believe that any of the following conditions exist:

(i) The health or safety of the public is at risk, including an immediate need to protect human or animal subjects;

(ii) Federal resources or interests are threatened;

(iii) Research activities should be suspended;

(iv) There is indication of possible violations of civil or criminal law;

(v) Federal action is required to protect the interests of those involved in the research misconduct proceeding;

(vi) The research misconduct proceeding may be made public prematurely and agency action may be necessary to safeguard evidence and protect the rights of those involved; or

(vii) The research community or public should be informed, as determined by the institution or appropriate oversight agency or funding entity.

(F) Resolutions and corrective action.

(1) Interim institutional administrative actions.

(a) The RIO will review the circumstances throughout the research misconduct proceedings to determine if there is any threat of harm to public health, federal funds and equipment, or the integrity of externally supported research.

(b) If such a threat exists, the RIO will, in consultation with the DO, other institutional officials and the relevant oversight agency, take appropriate interim action to protect against any such threat. This may include, but is not limited to:

(i) additional monitoring of the research activities and the handling of external funds and equipment;

(ii) reassignment of personnel or of the responsibility for the handling of external funds and equipment; or

(iii) additional review of research data and results or delaying publication.

(2) Admissions and Resolutions.

The respondent(s) should be given the opportunity to admit that research misconduct occurred and that the respondent(s) committed research misconduct, at any phase of the proceedings under this policy. The RIO will acquire a written admission describing the specifics of the research misconduct. The DO, in consultation with the RIO, committee members and other university officials may terminate the proceedings when an allegation has been admitted and all relevant issues are resolved, and further determine corrective actions. The RIO will notify the relevant oversight agency or funding entity. A resolution may be reached when the oversight agency agrees with terminating the research misconduct proceedings and approves the proposed resolution.

(3) Institutional corrective actions.

(a) If the DO determines the presence of research misconduct, the DO will decide on the appropriate corrective actions to be taken, after consultation with the RIO and other university officials.

(b) Appropriate corrective actions may include, but are not limited to:

(i) a letter of reprimand;

- (ii) special monitoring of respondent(s) of future work;
- (iii) removal of respondent(s) from the particular project;
- (iv) termination of the active award;
- (v) restitution of funds from the agency;
- (vi) correction or withdrawal of all pending or published abstracts, manuscripts, publications and grant applications originating from research where misconduct was determined (42 C.F.R. 93.313);
- (vii) disciplinary actions for faculty, staff or students, in accordance with the applicable collective bargaining agreement, disciplinary proceedings established by the office of human resources, or the student code of conduct (university policy 3356-8-01.1 "The Student Code of Conduct" (rule 3356-8-01.1 of the Administrative Code)); or
- (viii) termination of an individual's volunteer agreement with the university.

(G) Procedures.

- (1) The Office of Research Services is charged with developing procedures to implement this policy.
 - (2) Procedures and other information concerning research misconduct, including regulations, charges of committees and outlines for inquiry and investigation reports are available in the office of research services and "PI handbook" at <https://ysu.edu/office-research-services>.
- (1) It is a violation of this policy for any member of the faculty, professional administrative staff, classified staff, an individual

~~working under an independent contract for services, or a student to engage in research misconduct, to retaliate against anyone making a good faith allegation of research misconduct, to obstruct the inquiry into or investigation of allegations of research misconduct, or to make other than in good faith allegations of research misconduct.~~

~~(2) — Except as otherwise required by this policy or by federal, state, or local law or regulation, it is a violation of this policy for any member of the faculty, professional administrative staff or classified staff, an individual providing services pursuant to an independent contract, or a member of the student body to violate the confidentiality of a proceeding under this policy.~~

~~(3) — A finding of research misconduct under this policy requires that:~~

~~(a) — There be a significant departure from accepted practices of the relevant research community; and~~

~~(b) — The misconduct be committed intentionally, knowingly, or recklessly; and~~

~~(c) — The allegation be proven by a preponderance of the evidence.~~

~~(F) — Procedures. Any person, upon observing or having evidence of suspected research misconduct or believing specific actions, activities, or conduct constitutes research misconduct, as defined in paragraph (D)(1)(a) of this policy, may make an allegation. Such person contemplating an allegation is encouraged to, first discuss the contemplated allegation in absolute confidence with the associate vice president for research, as the authorized institutional official for research, grants and sponsored programs, who will advise the person(s) about the procedures to be followed under this policy. The phases of process under this policy are divided into four areas: allegations, assessment and inquiry, investigation, and resolution.~~

~~(G) — Allegations:~~

~~(1) — An allegation of research misconduct may be brought through any means of communication. The disclosure may be by written or oral statement or other communication to an institutional official or, in the case of research funded by the U.S. department of health~~

and human services (“HHS”), to an HHS official, but it may not be anonymous. Anonymous allegations are by their nature made “not in good faith” under this policy.

- (2) If an allegation of research misconduct is made to an institutional official other than to the RIO, details of the substance of the allegation shall be transmitted to the RIO in writing within one working day. If the allegation is against the associate vice president for research, it shall be transmitted to the provost for disposition and the provost will appoint an individual to act for/as the RIO in implementing this policy.
- (3) If the associate vice president for research is in a conflict of interest situation, s/he shall be replaced in the proceedings by the appointment of a substitute RIO by the provost.

(H) — Assessment and inquiry:

- (1) The RIO will initially assess allegations of research misconduct to determine whether they fall within the definition of research misconduct, as covered by 42 C.F.R. 93, and warrant an inquiry on the basis that the allegation is sufficiently credible and specific so that potential evidence of research misconduct may be identified. Only those allegations that meet each of these requirements will result in an inquiry. The RIO will inform the complainant if the allegation is insufficient to result in an inquiry.
- (2) Upon determination by the RIO that a formal allegation of research misconduct falls within the definition of research misconduct, is covered by 42 C.F.R. 93 or other federal agency guidelines, and warrants an inquiry on the basis that the allegation is sufficiently credible and specific so that potential evidence of research misconduct may be identified, the RIO will notify the person(s) against whom an allegation is made about the allegation.

(I) — Resolution:

- (1) Misconduct. Upon receiving a research misconduct investigation report from the RIO in which the allegation of misconduct is in whole or in part substantiated, the appropriate principal administrative officer (the DO) makes final determinations on allegations of research misconduct and any institutional

~~administrative actions and shall be responsible for initiating applicable disciplinary proceedings in accordance with board policy and/or provisions of an applicable collective bargaining agreement as appropriate. Appeal of disciplinary action is permitted in accordance with board policy and/or provisions of an applicable collective bargaining agreement as appropriate, but must be completed within one hundred twenty days of initiation of appeal in accordance with federal regulations.~~

~~(2) — Absence of misconduct. If the results of the inquiry and/or investigation reveal that allegations of misconduct are not supported, then any party making an allegation or against whom an allegation is made and previously notified about the possibility of misconduct or the need to conduct an investigation should be informed of those findings in writing. In announcing a finding that the allegations are not supported, the RIO should consult with the person(s) who were the subject of the allegations to determine:~~

~~(a) — Whether the announcement should be a public announcement; and~~

~~(b) — What organizations beyond those initially informed should receive the information about the findings of no misconduct as a means to restore, repair, or reassure the reputation of those involved.~~

~~(3) — The RIO should normally be guided by whether or not a public announcement will be helpful or cause further harm in restoring the reputations of those against whom the allegations were made and should give weight to their views in determining which additional organizations, if any, should be notified.~~

~~(J) — Notification to federal agencies:~~

~~(1) — The RIO shall immediately notify the cognizant federal funding agency and the office of research integrity if at any time during an inquiry or investigation conducted under this policy it is determined that any of the following conditions exist:~~

~~(a) — Health or safety of the public is at risk, including an immediate need to protect human or animal subjects;~~

- ~~(b) — Research activities should be suspended;~~
 - ~~(c) — Federal or department of health and human services resources or interests are threatened;~~
 - ~~(d) — There is an immediate need to protect the interests of those involved in the research misconduct proceedings;~~
 - ~~(e) — It is probable that the alleged incident is going to be reported publicly prematurely in order to protect the rights of those involved and to safeguard evidence;~~
 - ~~(f) — There is a reasonable indication of possible violations of civil or criminal law;~~
 - ~~(g) — The research community or public should be informed.~~
- ~~(2) — When alleged misconduct involves employees or students conducting research supported by federal agency sponsors, additional agency notification requirements apply as follows:~~
- ~~(a) — When on the basis of an inquiry it is determined that an investigation is warranted, the RIO shall notify the cognizant federal funding agency in writing on or before the date of investigation begins that an investigation is being commenced. The notification should inform the cognizant federal agency, at a minimum, of the name of the person(s) against whom the allegation(s) have been made, the general nature of the allegation(s), and the federal grant application(s) or award(s) involved.~~
 - ~~(b) — The RIO must submit the final report of an investigation to the cognizant federal funding agency if the investigation concerns research being supported by federal funds. This report to the cognizant federal agency must describe the policies and procedures under which the investigation was conducted, how and from whom information relevant to the investigation was obtained, the findings, and the basis for the findings. It must include the actual text or an accurate summary of the views of any individual(s) found to have engaged in misconduct as well as a description of any sanctions or corrective actions taken by the university.~~



**YOUNGSTOWN
STATE
UNIVERSITY**

**RESOLUTION TO AUTHORIZE
CONFERRAL OF HONORARY DEGREE**

BE IT RESOLVED, that the Board of Trustees of Youngstown State University does hereby authorize the conferral of a Doctor of Science, honoris causa, upon William Kennedy, with all the rights and privileges attendant thereto.

**Board of Trustees Meeting
March 3, 2022
YR 2022-**

From: TSudkamp@highered.ohio.gov <TSudkamp@highered.ohio.gov>
Sent: Wednesday, January 26, 2022 1:41 PM
To: McQuade, Cindy <mcquade.2@osu.edu>
Cc: Bruce.Johnson@odrc.state.oh.us
Subject: Low enrollment/duplicate program reports

This message was sent securely using Zix*

Hi Cindy,

We are looking forward to meeting with the IUC Provosts and appreciate that you were able to schedule a time that accommodated the Chancellor's schedule. To provide some background for the meeting to share with the Provosts, I am enclosing the guidance that was provided in the 2017 review of low enrollment classes and duplicate programs. The ORC language requiring this reporting is:

Section 3345.35 | Course evaluation based on enrollment and duplication with other institutions.

Not later than December 31, 2017, and by the first day of September of every fifth year thereafter, the board of trustees of each state institution of higher education, as defined in section [3345.011](#) of the Revised Code, shall evaluate all courses and programs the institution offers based on enrollment and duplication of its courses and programs with those of other state institutions of higher education within a geographic region, as determined by the chancellor of higher education. For courses and programs with low enrollment, as defined by the chancellor, the board of trustees shall provide a summary of recommended actions, including consideration of collaboration with other state institutions of higher education. For duplicative programs, as defined by the chancellor, the board of trustees shall evaluate the benefits of collaboration with other institutions of higher education to deliver the program.

Each board of trustees shall submit its findings under this section to the chancellor not later than thirty days after the completion of the evaluations or as part of submitting the annual efficiency report required pursuant to section [3333.95](#) of the Revised Code.

Note, there have been changes in the requirements since the initial legislation:

- In 2017, the low enrollment and duplicate program reports were separate.
- In 2017, the low enrollment report required only institutional responses/actions for low enrollment courses. The law now requires recommended actions for both low enrollment courses and programs.

Thanks again for allowing us to join your meeting.

Tom

Dr. Thomas Sudkamp
Vice Chancellor for Academic Affairs
Ohio Department of Higher Education

COMPILATION FROM RESOLUTIONS BY THE YOUNGSTOWN STATE UNIVERSITY BOARD OF TRUSTEES RELATED TO CREATING A RENEWED STRATEGIC PLAN AND FROM THE RESULT OF THE PLANNING PROCESS: THE *PLAN FOR STRATEGIC ACTIONS TO TAKE CHARGE OF OUR FUTURE*

EDUCATION QUALITY AND EXPERIENCE

March, 2019

NOW THEREFORE, BE IT RESOLVED, that the following are to be focus areas of the next Board-endorsed Strategic Plan:

Increase educational quality with an emphasis on faculty professional development, faculty and administrative leadership diversity, innovative teaching and measurable learning outcomes that address high impact areas for student learning and experience, and a unique and transformative general education experience that has flexibility while not reducing academic integrity including meaningful experiences possibly linked to institutional learning outcomes, those of which employers nationally have indicated are needed in the work-place as well as creating educational experiences in including study abroad and learning about abroad, and experiential learning opportunities that develop an informed citizenry that is engaged in their work and community the result of which is also related to job placement and a successful career, including assisting students from diverse backgrounds to be academically successful via access to intentional and purposeful systems of support;

September, 2019

WHEREAS, the ultimate objective of a Strategic Action Plan must focus on investing in academic excellence and student success, as noted in previous Resolutions and reiterated here in part, to:

- Support **educational quality** by providing support for teaching and learning to optimize the quality of instruction in all courses, with an emphasis on gateway courses and the adoption of technology to improve student success;
- Assure that the **educational quality** improvement strategy is integrated with the student experience and through applied scholarship that connects to the community in mutually beneficial ways;

And from the student success perspective, assure the development of:

- Robust internships, career-related and relevant service-learning and experiential experiences, and on-going lifelong learning support that becomes a distinctive attribute of a YSU **educational experience**; and

WHEREAS, the academic program effectiveness and advancement process should be predicated upon collaboratively developed clear and known principles, procedures, feedback loops and communication strategies that build on existing foundational strengths as well as a context for a clear and strong linkage between **educational experience** and employability.

NOW, THEREFORE, BE IT RESOLVED, this resolution, those before it and those yet to come, continue to focus our institutional energies to optimize student success as a student- focused campus, the basis upon which rests strong educational experiences that sustain the university because of the attractiveness and unique aspects of that **educational experience**.

GENERAL EDUCATION

December, 2018

WHEREAS, the planning process will be informed by a rigorous assessment of important facets and factors influencing higher education and creating opportunities for YSU including amongst others, enrollment, redesigned student success support structures, inclusive excellence, diversity, and equity, **a revitalized general education curriculum**, and financial integrity, stability and sustainability; and

March, 2019

NOW THEREFORE, BE IT RESOLVED, that the following are to be focus areas of the next Board-endorsed Strategic Plan:

Increase educational quality with an emphasis on faculty professional development, faculty and administrative leadership diversity, innovative teaching and measurable learning outcomes that address high impact areas for student learning and experience, and a unique and **transformative general education experience** that has flexibility while not reducing academic integrity including meaningful experiences possibly linked to institutional learning outcomes, those of which employers nationally have indicated are needed in the work-place as well as creating educational experiences in including study abroad and learning about abroad, and

experiential learning opportunities that develop an informed citizenry that is engaged in their work and community the result of which is also related to job placement and a successful career, including assisting students from diverse backgrounds to be academically successful via access to intentional and purposeful systems of support;

June, 2019

PLAN FOR STRATEGIC ACTIONS TO TAKE CHARGE OF OUR FUTURE

GOAL: ESTABLISH UNIVERSAL LEARNING OUTCOMES TO ENHANCE THE VALUE OF A YSU DEGREE

Strategy: Develop a plan to integrate diversity, equity, and inclusion throughout the university, including in purchasing, hiring, and in the curriculum

Strategy: **Revise General Education Requirements** to reflect the learning outcomes approved by Academic Senate

October, 2021

NOW THEREFORE, BE IT RESOLVED that in consideration of the 14TH-day Enrollment Report for Fall 2021, the trend for decreasing enrollment in previous years and potentially, without significant successful actions to reduce the decline, similar or worse enrollment declines in future years, and because enrollment is related to the academic portfolio both of which directly influence sustainable prosperity of Youngstown State University, this Board of Trustees expects the following:

The academic priorities are aligned with achieving distinction such as:

- the emergence of clearly identified areas of intentional research distinction with the scholarship of teaching as a distinction; and
- **a redesigned transformative "general" educational experience** that has the potential to be a model of distinction to be implemented no later than fall 2023 including minimizing and preferably eliminating stranded credit hours

BADGES, CREDENTIALS, COMPETENCY-BASED EDUCATION, CERTIFICATION

March, 2019

NOW THEREFORE, BE IT RESOLVED, that the following are to be focus areas of the next

Board-endorsed Strategic Plan:

Attention to the enrollment of new students through academic program strength and improvement, new academic program development, including an online strategy, and consideration of **competency-based education and certifications**, in addition to strategic business and industry focused academic programming as well as a strategic YSU brand marketing and communication initiative that emphasizes academic quality and distinction, as well as increasing the numbers of underrepresented, international, and students from other areas of the State and Nation;

June, 2019

PLAN FOR STRATEGIC ACTIONS TO TAKE CHARGE OF OUR FUTURE

GOAL: DEVELOP A CULTURE OF ASSESSMENT THAT ENSURES THE QUALITY OF ACADEMIC PROGRAMS, MAJORS, MINORS, AND OTHER CREDENTIALS

Strategy: Complete program effectiveness and enhancement review including rubrics for recommendations regarding actionable outcomes

Strategy: Develop a mechanism to continually identify, assess, and implement new academic programs, **badges, credentials, certifications**, or coursework integration

LEARNING OUTCOMES

March, 2019

NOW THEREFORE, BE IT RESOLVED, that the following are to be focus areas of the next Board-endorsed Strategic Plan:

Increase educational quality with an emphasis on faculty professional development, faculty and administrative leadership diversity, innovative teaching and measurable learning outcomes that address high impact areas for student learning and experience, and a unique and transformative general education experience that has flexibility while not reducing academic integrity including meaningful experiences possibly linked to **institutional learning outcomes**, those of which employers nationally have indicated are needed in the work-place as well as creating educational experiences in including study abroad and learning about abroad, and experiential learning opportunities that develop an informed citizenry that is engaged in their work and community the result of which is also related to job placement and a successful career, including assisting students from diverse backgrounds to be academically successful via access to intentional and purposeful systems of support;

June, 2019

PLAN FOR STRATEGIC ACTIONS TO TAKE CHARGE OF OUR FUTURE

GOAL: ESTABLISH UNIVERSAL LEARNING OUTCOMES TO ENHANCE THE VALUE OF A YSU DEGREE

Strategy: Develop a plan to integrate diversity, equity, and inclusion throughout the university, including in purchasing, hiring, and in the curriculum

Strategy: Revise General Education Requirements to reflect the learning outcomes approved by Academic Senate

HIGH LEVEL OVERVIEW: ACADEMIC PROGRAM EFFECTIVENESS AND ENHANCEMENT INITIATIVE (2021-2022)

Program Economics	Mission Alignment	February - OAA/Gray engagement with deans, chairs, and program faculty
		Familiarization with updated (2020-2021) mission, market and academic metrics and associated Dashboard ScoreCard; Curricular Efficiency is a concurrent initiative
		Update BOT on Academic Program Enhancement and Effectiveness Initiative
		March - chair engagement with faculty
		Colleges, departments and programs continue progress on achieving goals and strategies outlined in program Dashboard; assess new market and economics data in the context of an adjusted rating (grow+; grow; sustain; adjust)
		April - chair engagement with faculty
		Colleges, departments, programs assess progress on goals and strategies associated with the Dashboards and propose adjustments as warranted; <u>Program, chair, dean suggested rating associated with the Dashboard (grow+; grow; sustain; adjust)</u>
		May - OAA Assessment and Feedback Given Anticipated Recommendations to the Board of Trustees
		Early May - Office of Academic Affairs (OAA) synthesis and clarification of information associated with APEEI including ratings and via deans/chairs, assure faculty understand the status of the process and their program as it relates to APEEI ratings
		Late May - OAA finalizes any outstanding issues related to APEEI and prepares for upcoming BOT meeting to report on APEEI during the academic year, particularly shifts in ratings and pointing out movement on University metrics as related to BOT Key Performance Indicators
Mission Aligned; Economics Aware; Margin Sensitive	Mission Alignment	June - Board of Trustees
		OAA overview of APEEI progress and adjustments to program assessments as warranted
		On-going Continuous Improvement and BOT Engagement

DRAFT: WORK IN PROGRESS; FOR DISCUSSION

ACADEMIC PROGRAM OPTIMIZATION AND FISCAL INTEGRITY STRATEGIES

An Institution of Opportunity: YSU Inspires Individuals; Enhances Futures; Enriches Lives

Mission Aligned: Markets Connected: Margin Smart

Fall-2021		Winter-2021/2022		Spring-2022		Summer-2022		Fall-2022	
September	BOT	December	BOT	March	BOT	June	BOT	September	BOT

Academic Program Continuous Quality Improvement Process and Alignment with Goals and Strategies Implementing the Strategic Plan				
APEEI	<p>OAA-instigated College convenings to affirm implementing goals and strategies as outlined in Dashboard attributes</p>	<p>Systematic and sequential engagement with the departments and programs on updated markets and economics for 2020-2021 including an additional year of university metrics linked to the Board of Trustees Key Performance Indicators. This timeframe will include assuring alignment with goals and strategies associated with the Academic Program Dashboards that align with emerging College Dashboards to support implementing the Plan for Strategic Actions to Take Charge of Our Future. Included will also be overseeing the associated placements of programs as Grow, Grow, Sustain or Adjust. This will include aligning progress on implementing the Plan with alignment of aggregating HLC information annually.</p>	<p>OAA-instigated College convenings to assess progress and make adjustments to improve Dashboard attributes</p>	<p>OAA/Colleges/Departments adjust goals and strategies specified in the Dashboard having consulted with faculty in Spring</p>
Colleges/Departments/Programs support faculty to implement goals and strategies specified in the Dashboard to enhance the academic programs				

EFFICIENCY	EFFECTIVENESS	ENHANCEMENT	OPTIMIZATION	TRANSFORMATION
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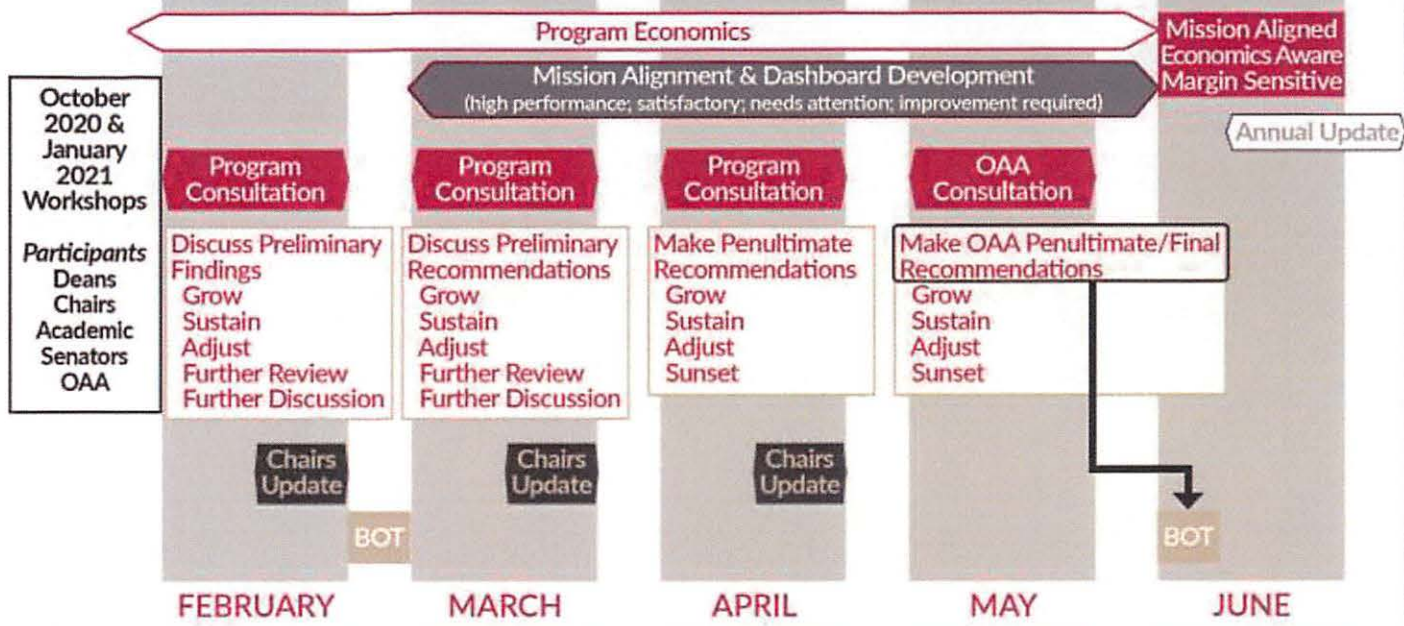
Curricular Efficiency & Effectiveness (CEE) Strategies to Improve the Quality of the Educational Experience	There are many interactions within and across each of these categories of potential actions				
		Assure fidelity between program recommendations and PES	Minimize small sections; Offer courses that directly contribute to completion; schedule optimization	Vitality of programs with low numbers of majors at both UG and G levels	General Education Transformative Redesign (universal courses; minimal stranded credits; minimized credit hours) Implement Fall 2023
Other actions underway include: reducing the number of courses in the Catalog; adjusting to the most appropriate section cap; reducing course pre-requisites, optimizing part-time appointments, etc.					

Update on Progress related to CEE & APEEI

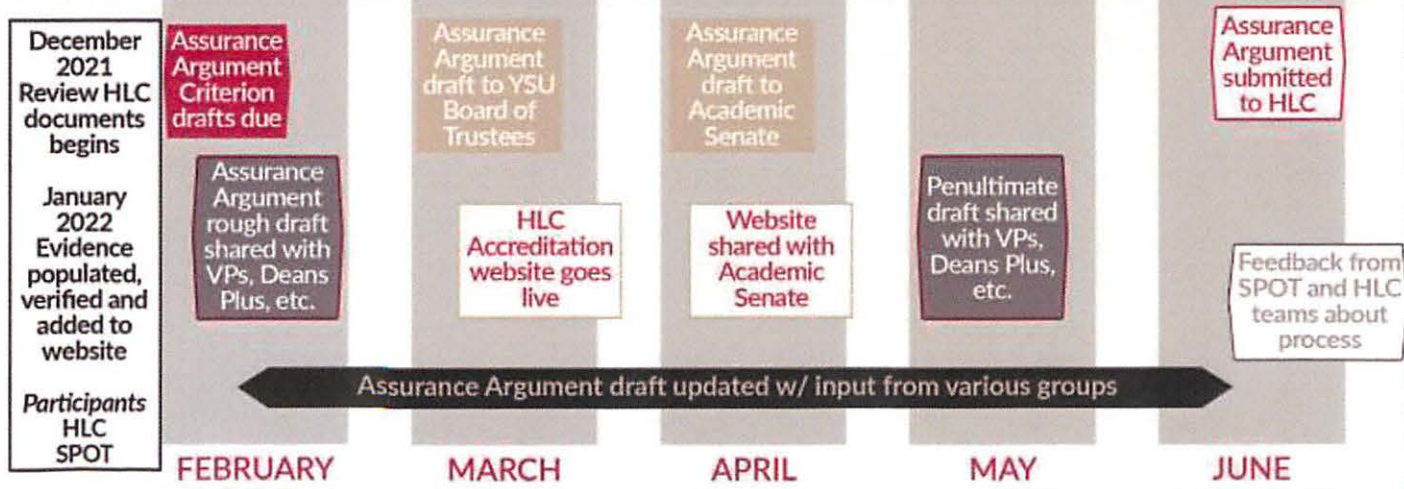
Update on Progress related to CEE & APEEI

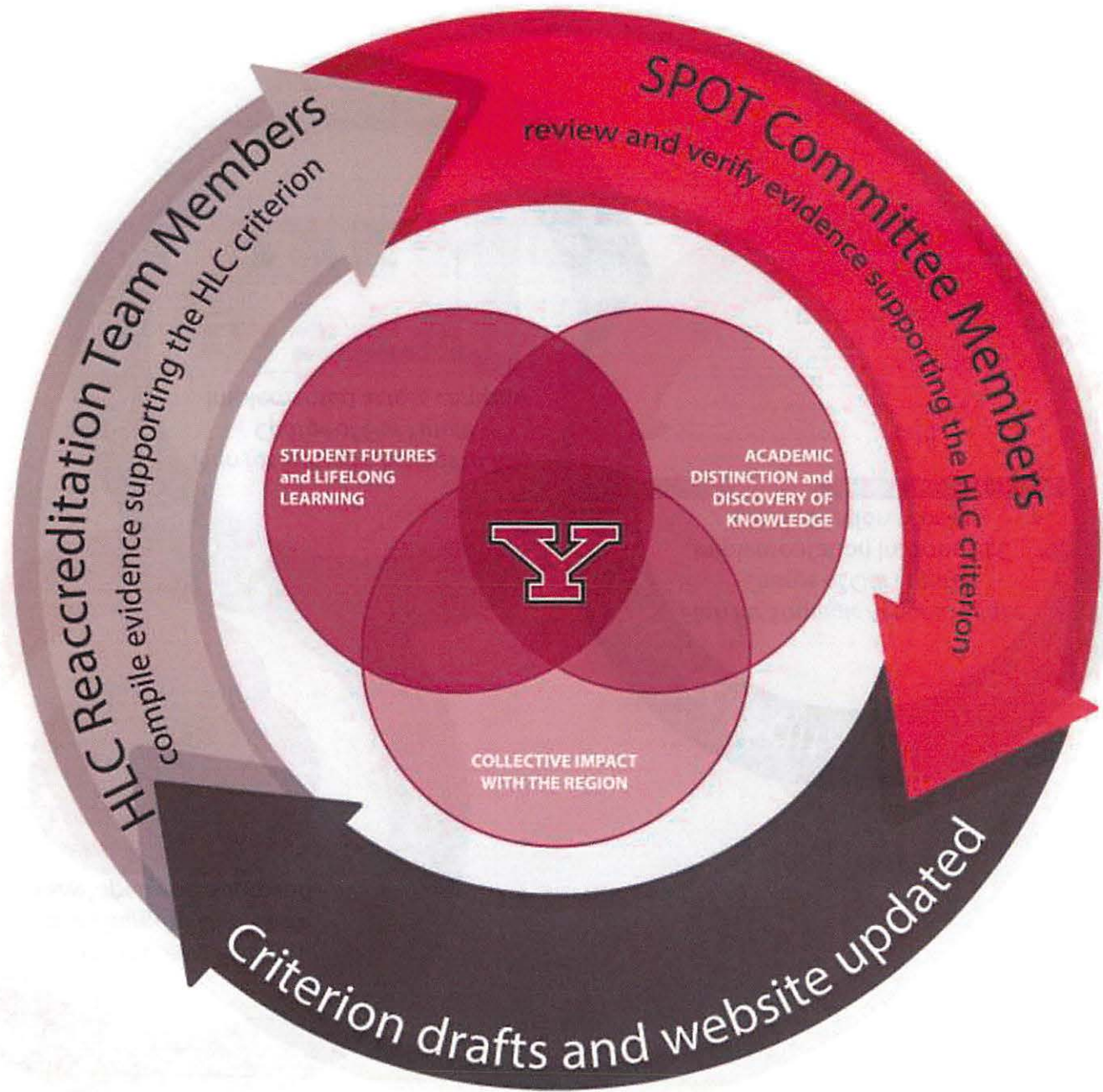
Update on Progress related to CEE & APEEI

Academic Program Enhancement and Effectiveness



Higher Learning Commission







Plan for Strategic Actions to Take Charge of Our Future developed and approved

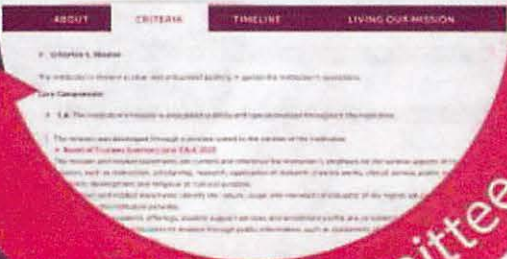


Plan for Strategic Actions to Take Charge of Our Future implemented across campus

Strategic Area	Program	Project	Project	Project	Project
Leadership	Leadership Institute	Leadership Institute	Leadership Institute	Leadership Institute	Leadership Institute
Academic	Academic Excellence	Academic Excellence	Academic Excellence	Academic Excellence	Academic Excellence
Student	Student Success	Student Success	Student Success	Student Success	Student Success
Community	Community Engagement	Community Engagement	Community Engagement	Community Engagement	Community Engagement
Research	Research Excellence	Research Excellence	Research Excellence	Research Excellence	Research Excellence
Global	Global Engagement	Global Engagement	Global Engagement	Global Engagement	Global Engagement
Technology	Technology Integration	Technology Integration	Technology Integration	Technology Integration	Technology Integration
Finance	Financial Stewardship	Financial Stewardship	Financial Stewardship	Financial Stewardship	Financial Stewardship
Operations	Operational Excellence	Operational Excellence	Operational Excellence	Operational Excellence	Operational Excellence
Marketing	Marketing Excellence	Marketing Excellence	Marketing Excellence	Marketing Excellence	Marketing Excellence
Legal	Legal Compliance	Legal Compliance	Legal Compliance	Legal Compliance	Legal Compliance
Human Resources	Human Resources Excellence	Human Resources Excellence	Human Resources Excellence	Human Resources Excellence	Human Resources Excellence
Information Technology	Information Technology Excellence	Information Technology Excellence	Information Technology Excellence	Information Technology Excellence	Information Technology Excellence
Facilities	Facilities Management	Facilities Management	Facilities Management	Facilities Management	Facilities Management
Environmental	Environmental Stewardship	Environmental Stewardship	Environmental Stewardship	Environmental Stewardship	Environmental Stewardship
Public Affairs	Public Affairs Excellence	Public Affairs Excellence	Public Affairs Excellence	Public Affairs Excellence	Public Affairs Excellence
Alumni	Alumni Engagement	Alumni Engagement	Alumni Engagement	Alumni Engagement	Alumni Engagement
Development	Development Excellence	Development Excellence	Development Excellence	Development Excellence	Development Excellence
Special Programs	Special Programs Excellence	Special Programs Excellence	Special Programs Excellence	Special Programs Excellence	Special Programs Excellence
Emergency Management	Emergency Management Excellence	Emergency Management Excellence	Emergency Management Excellence	Emergency Management Excellence	Emergency Management Excellence
Security	Security Excellence	Security Excellence	Security Excellence	Security Excellence	Security Excellence
Accessibility	Accessibility Excellence	Accessibility Excellence	Accessibility Excellence	Accessibility Excellence	Accessibility Excellence
Quality	Quality Excellence	Quality Excellence	Quality Excellence	Quality Excellence	Quality Excellence
Compliance	Compliance Excellence	Compliance Excellence	Compliance Excellence	Compliance Excellence	Compliance Excellence
Research	Research Excellence	Research Excellence	Research Excellence	Research Excellence	Research Excellence
Academic	Academic Excellence	Academic Excellence	Academic Excellence	Academic Excellence	Academic Excellence
Student	Student Excellence	Student Excellence	Student Excellence	Student Excellence	Student Excellence
Community	Community Excellence	Community Excellence	Community Excellence	Community Excellence	Community Excellence
Global	Global Excellence	Global Excellence	Global Excellence	Global Excellence	Global Excellence
Technology	Technology Excellence	Technology Excellence	Technology Excellence	Technology Excellence	Technology Excellence
Finance	Finance Excellence	Finance Excellence	Finance Excellence	Finance Excellence	Finance Excellence
Operations	Operations Excellence	Operations Excellence	Operations Excellence	Operations Excellence	Operations Excellence
Marketing	Marketing Excellence	Marketing Excellence	Marketing Excellence	Marketing Excellence	Marketing Excellence
Legal	Legal Excellence	Legal Excellence	Legal Excellence	Legal Excellence	Legal Excellence
Human Resources	Human Resources Excellence	Human Resources Excellence	Human Resources Excellence	Human Resources Excellence	Human Resources Excellence
Information Technology	Information Technology Excellence	Information Technology Excellence	Information Technology Excellence	Information Technology Excellence	Information Technology Excellence
Facilities	Facilities Excellence	Facilities Excellence	Facilities Excellence	Facilities Excellence	Facilities Excellence
Environmental	Environmental Excellence	Environmental Excellence	Environmental Excellence	Environmental Excellence	Environmental Excellence
Public Affairs	Public Affairs Excellence	Public Affairs Excellence	Public Affairs Excellence	Public Affairs Excellence	Public Affairs Excellence
Alumni	Alumni Excellence	Alumni Excellence	Alumni Excellence	Alumni Excellence	Alumni Excellence
Development	Development Excellence	Development Excellence	Development Excellence	Development Excellence	Development Excellence
Special Programs	Special Programs Excellence	Special Programs Excellence	Special Programs Excellence	Special Programs Excellence	Special Programs Excellence
Emergency Management	Emergency Management Excellence	Emergency Management Excellence	Emergency Management Excellence	Emergency Management Excellence	Emergency Management Excellence
Security	Security Excellence	Security Excellence	Security Excellence	Security Excellence	Security Excellence
Accessibility	Accessibility Excellence	Accessibility Excellence	Accessibility Excellence	Accessibility Excellence	Accessibility Excellence
Quality	Quality Excellence	Quality Excellence	Quality Excellence	Quality Excellence	Quality Excellence
Compliance	Compliance Excellence	Compliance Excellence	Compliance Excellence	Compliance Excellence	Compliance Excellence



Plan for Strategic Actions to Take Charge of Our Future implementation informs HLC reaccreditation process



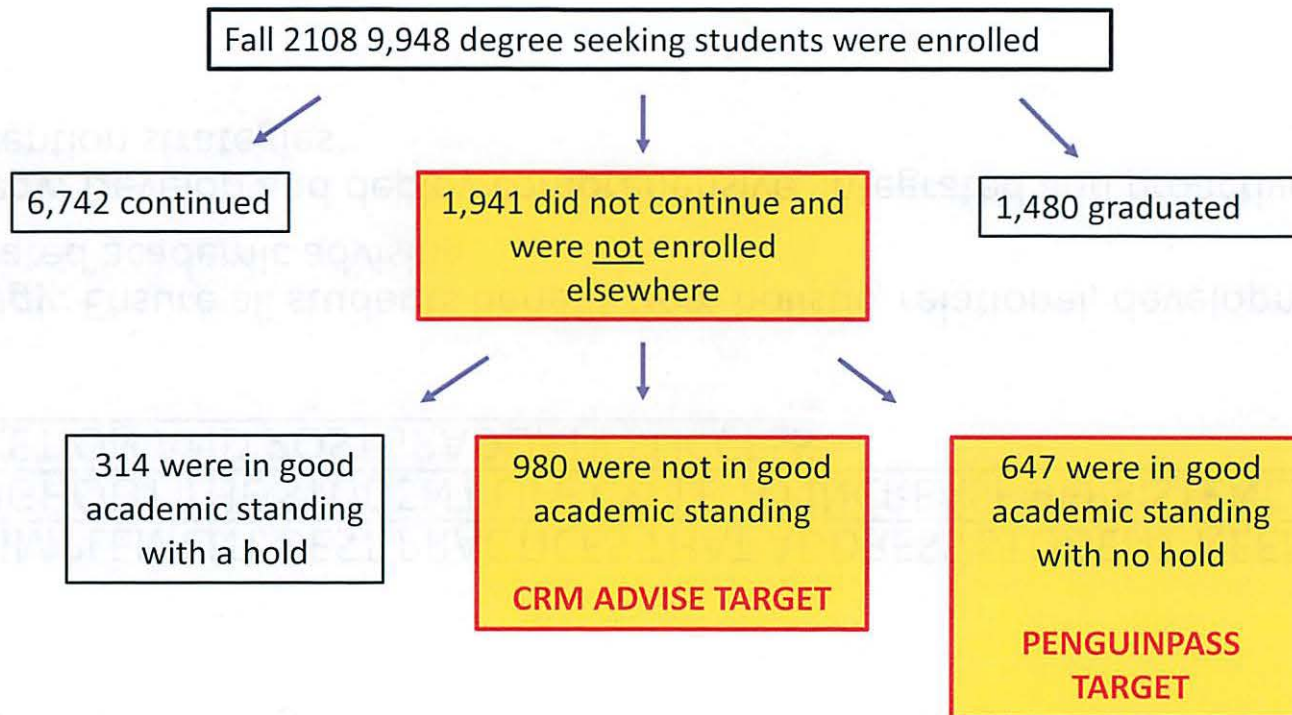
Plan for Strategic Actions to Take Charge of Our Future

GOAL: IMPLEMENT BEST PRACTICES THAT ADDRESS STUDENT NEEDS THROUGHOUT THE STUDENT LIFE CYCLE TO INCREASE PERSISTENCE, COMPLETION AND POSTGRADUATE SUCCESS

- **Strategy:** Ensure all students benefit from holistic, relational, developmental, and integrated academic advising
- **Strategy:** Develop and deploy comprehensive, integrated and proactive student intervention strategies



Fall 2018 to Fall 2019 Event History Analysis



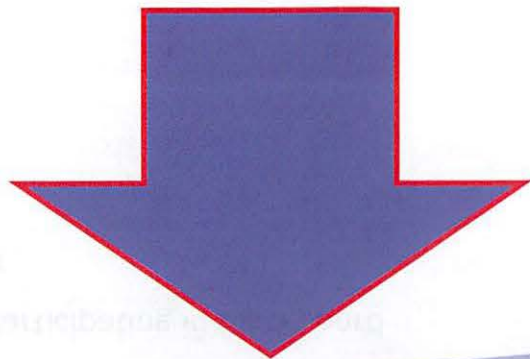
Source: Institutional Research & Analytics



CRM Advise Faculty Alerts

- Recent Attendance Concerns
- Chronic Absences
- Never Attended
- Frequently Late to Class
- Not Engaged or Distracted
- Late or Missing Assignments Affecting Grade
- Not Participating in Blackboard
- Other
- Poor Performance on Tests, Quizzes, or Assignments
- Referral to the Writing Center
- Referral to the Math Achievement Center
- Referral to the ConneXLab
- Referral to the Language Learning Resource Center
- Referral to the Resch Academic Success Center

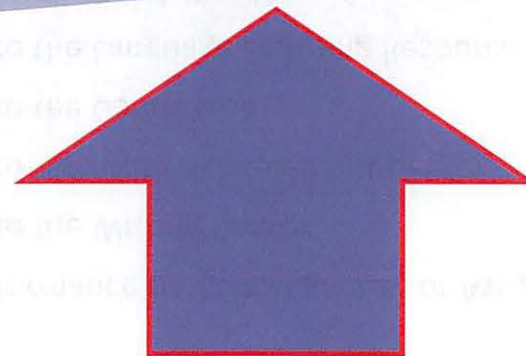




Decrease advising loads to ensure effective outreach

BALANCE = HIGHEST IMPACT ON STUDENT SUCCESS AND RETENTION

Increase the number of faculty who will raise an alert



Fall 2021 CRM Advise Impact

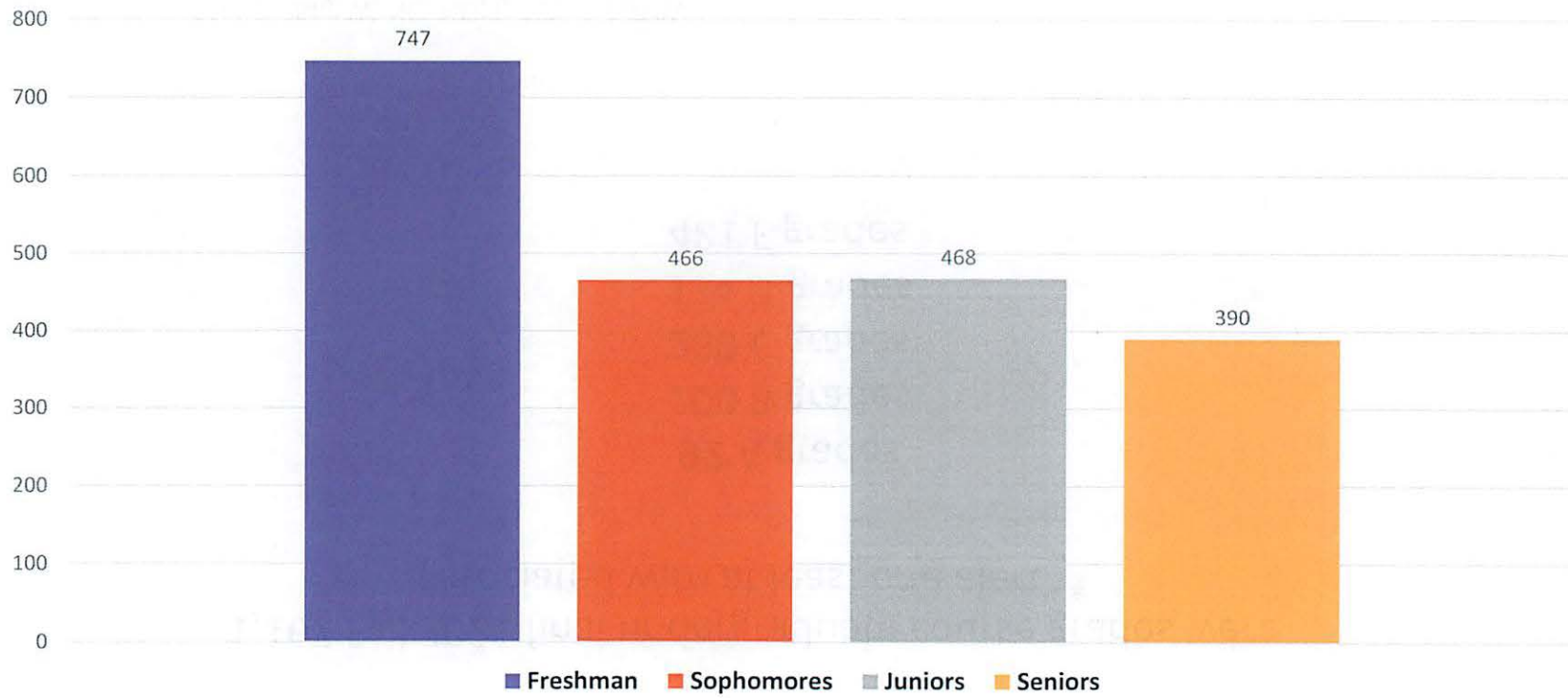
1,167 Fall 2021 final undergraduate course grades were associated with at least one alert**

92 A grades
200 B grades
260 C grades
134 D grades
481 F grades

**excluding W, NC, NG, I, AU, and AUW



Number of alerts raised Fall 2021 by class level



CRM Advise Spring 2022

	February 21, 2020 (EARS)	February 21, 2021 (EARS)	February 21, 2022 (CRM Advise)
Actionable alerts raised	455	209	
Students with actionable alerts	383	143	
FY students with actionable alerts	153	140	
Faculty using system	97	75	
Sections	154	105	



Number of alerts raised by week



Penguin PASS Advantage

Prior Degree Audit System

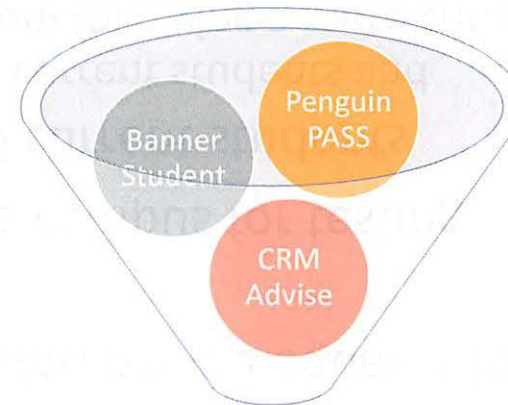
U.Achieve, Degree Audit System

- All transfer equivalencies were stored in this system. It was separate from the student system, and did not connect to registration. This resulted in continuous overrides needed for transfer students

Banner Student

- New transfer student data was uploaded from U.Achieve, causing time delays and mapping issues. Required IT intervention to effectively transfer student data

Ellucian Degree Audit System



All student systems integrated
Data is real time

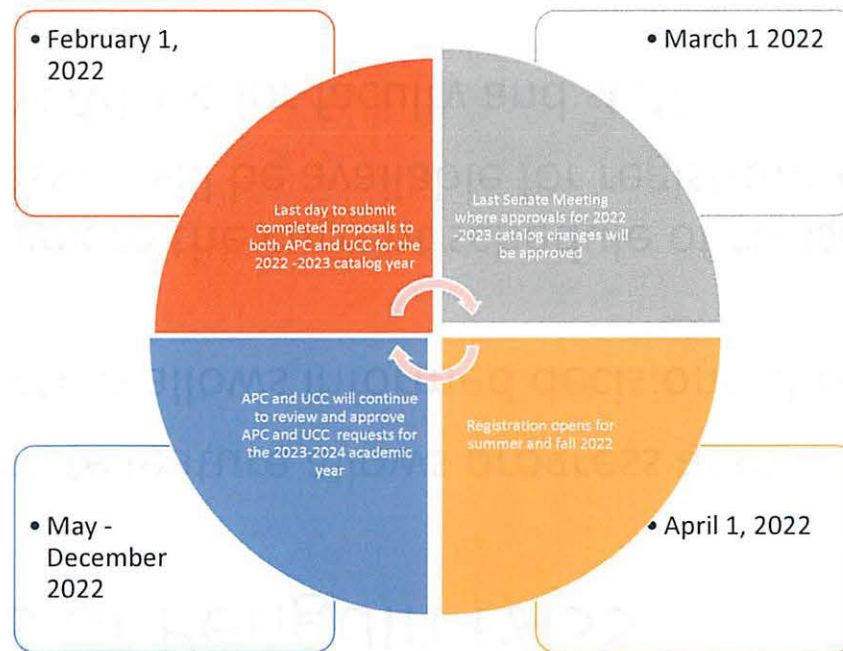


Penguin PASS Advantage Implementation Strategy

- Migrated over 2000 transfer institutions with course equates into the Banner Student module
- Teamed up with academic partners across campus for testing
- Adjusted catalog year for more than 2800 current students
 - Academic advisors in every college reviewed current students and determined which students would benefit from following a more current catalog year
- More than 100 faculty and staff attended training
- Senate endorsed deadlines to ensure Penguin Pass remains current



Senate Endorsed Deadlines



Key Features of Penguin PASS

- *Percentage Complete* feature allows progress assessment
- *What if* audit function allows informed decisions about changing majors
- There is a direct link to the current schedule of classes, showing students what classes will be available for registration
- Connected to CRM Advise for faculty and staff
- Student plans



Penguin PASS Responsive Dashboard

The screenshot displays a 'Worksheet' interface for a student. At the top, it shows 'Data refreshed 02/21/2022 4:09 AM'. Below this is a search bar with 'Student ID' and 'Name' fields, and a dropdown for 'Degree: Bach of Science in Business Ad'. An 'Advanced search' link is also present. The student's details are listed: 'Level Undergraduate', 'Classification junior', 'Major BSB in Accounting', 'Program BSB in Accounting', and 'College Business Administration'. The 'Academic Standing' is 'Good Standing'. There are tabs for 'Academic' and 'What-if', with a 'View historic audit' dropdown set to '02/21/2022 at 8:19 AM UG/BSB'. A 'Formal Student View' dropdown is also visible. The 'Degree progress' section features two circular gauges, both at 75%, for 'Requirements' and 'Semester Hours'. The 'Overall GPA' is 3.92. There are checkboxes for 'In-progress classes' and 'Preregistered classes', both checked, and a 'PROCESS' button. At the bottom left, the 'Audit date' is '02/21/2022 8:19 AM'.



Student Plans

Bachelor of Arts in Music Theory ✎ 🗄

PLAN LIST **NEW PLAN**

Degree Bachelor of Arts
Level Undergraduate
Active Yes | **Status** Not locked | **Tracking Status** 🗄

Last updated: Verdone, Kimberly J on 01/20/2022
 Audit | What-if | Delete plan | Save as copy | Create block

ADD SEMESTER		
Spring 2022 🗄 Semester Hours: 14.00 + ENGL 1551 Semester Hours: 3.00 MUCO 3715 Semester Hours: 3.00 MUEN 0023 Semester Hours: 1.00	Fall 2023 🗄 Semester Hours: 6.00 + CMST 1545 Semester Hours: 3.00 MUHL 3773 Semester Hours: 3.00 Comment 3 semester hours	Spring 2024 🗄 Semester Hours: 3.00 + Comment 9 semester hours Comment 3 semester hours MUEN 0002 or MUEN 0004 or MUEN 0005 or MUEN 0007 or MUEN 0008 or MUEN 0025 Semester Hours: 3.00

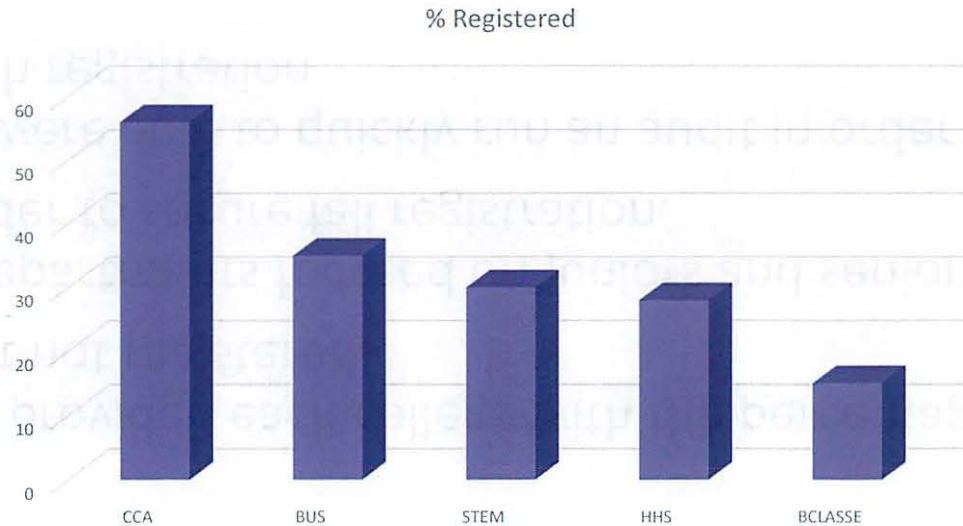


Assist with Registration/Retention Efforts

- Late July we provided each college with the percentage completed of each student not registered.
- Academic Departments focused on juniors and seniors for outreach efforts in order to secure fall registration.
- All advisors were able to quickly run an audit in order to assist students with registration.



Fall 2021 -Targeted Outreach to Juniors and Seniors Using Penguin PASS Data



Penguin PASS: Key Component for Enrollment and Retention Initiatives

- College Comeback
 - A program designed to entice students to return to college for degree completion. We will rely on Penguin PASS to help us identify those most likely or most willing to return to the University. Penguin PASS will help to keep the student on track.
- College Completion
 - Penguin PASS can identify those student with many credit hours completed, but may still have many more hours needed for degree completion. This tool gives us the ability to identify and address barriers of degree progression and completion.

