# LOUISIANA STATE UNIVERSITY

# STRATEGIC PLAN

# FY 2026-2027 through FY 2030-2031

**Revised July 1, 2025**

**Louisiana State University Agricultural and Mechanical College**
**2026-2027 through 2030-2031 Strategic Plan**

## Louisiana State University Strategic Plan

**Vision Statement:** As Louisiana's flagship university, LSU will deploy the knowledge generated through the work of our faculty, staff, and students to build a more healthy, prosperous, and secure future for the state.

**Mission Statement:** Designated as a Land-, Sea-, and Space-grant institution, LSU secures, elevates, and advances Louisiana and the world through the generation, preservation, dissemination, and application of knowledge and cultivation of the arts and develops students who are prepared, confident, and inspired to achieve lifelong success.

**Philosophy Statement:** LSU is recognized as the state's premier research university by the Board of Regents' Master Plan for Public Postsecondary Education. It is the only Southern Regional Education Board Four-Year I University in Louisiana, it is one of only 135 public institutions classified by the Carnegie Foundation as Very High Research Spending and Doctorate Production, and it is a Land-, Sea-, and Space-grant institution. The federal judiciary has also recognized LSU's unique role, stipulating in the 1994 desegregation Settlement Agreement that LSU "shall continue to be recognized as Louisiana's flagship state institution and its only comprehensive research institution. LSU shall continue to have the greatest number of graduate and research programs and selective admissions criteria."

Because of its role, scope, and mission, and because of the degree of selectivity in admissions on both the undergraduate and graduate levels (a degree of selectivity unequaled among the public institutions of higher education in Louisiana), LSU must serve the entire state of Louisiana by providing bachelor's, master's, and doctoral programs comparable to those afforded to the citizens of other states at their flagship institutions of higher education.

It is this institution's conviction, accordingly, that LSU will best serve the citizens of Louisiana by pursuing its goal of being recognized nationally as one of the leading public universities in the South and as one of the top public universities in the nation; that it can model the highest aspirations of higher education as a learner-centered, faculty and staff supportive, research intensive, diverse university, with a continuous commitment to public service; and that it must continue to lead public higher education in Louisiana in undergraduate education, graduate and professional education, research, service, and economic development.

**Goals and Objectives:**

## I. Goal: Increase Opportunities for Student Access and Success

**Objective I.1.** **Increase fall headcount enrollment by 9.0% from the baseline level of 43,441 in fall 2024 to 47,350 by fall 2029.**

Link to State Outcome Goals: Youth Education, Better Health, Diversified Economic Growth, and Transparent, Accountable and Effective Government

Other Link: Master Plan for Postsecondary Education.

**Strategy I.1.1:** Expand recruiting to attract more high-achieving undergraduate and graduate students.

**Strategy I.1.2:** Improve outreach programs to recruit more low income and first-generation students.

**Strategy I.1.3:** Develop recruitment materials to increase the number of transfer students enrolling at LSU.

**Strategy I.I.4:** Continue to develop partnerships with community colleges to implement 2+2 programs and other articulation transfer agreements.

**Strategy I.1.5:** Increase dual enrollment participation with public school districts and develop more cross-enrollment agreements with postsecondary institutions.

**Strategy I.I.6:** Continue to develop partnerships with high schools to prepare students for postsecondary education.

**Strategy I.1.7:** Extend LSU's inventory of online degree programs (distance learning activities).

**Performance Indicators:**

Output: Number of students enrolled in fall (full term).

Outcome: Percent change in the number of students enrolled in fall (full term).

**II. Goal: Ensure Quality and Accountability**

**Objective II.1: Increase the percentage of first-time in college, full-time, degree-seeking students retained to the second fall at the same institution of initial enrollment by 3.0 percentage points from the fall 2023 cohort (to fall 2024) baseline level of 84.0% to 87.0% by fall 2029 (retention of fall 2028 cohort).**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

Other Link: Master Plan for Postsecondary Education

**Strategy II.1.1:** Increase student retention by offering additional first-year support programs to improve student learning, such as first-year seminars.

**Strategy II.1.2:** Create, revise, and implement effective policies to improve retention and graduation rates.

**Strategy II.1.3:** Expand on-campus summer enrichment and transition programs.

**Strategy II.1.4:** Enhance the experience of first-year undergraduates through continuing development of the residential college program and other initiatives.

**Strategy II.1.5:** Focus on refining advising's outreach initiatives through the enhanced use of technology.

**Strategy II.1.6:** Continue to monitor the degree progression to ensure that undergraduates are progressing toward graduation.

**Strategy II.1.7:** Expand mentoring, tutoring, service-learning, and teaching assistant training programs.

**Strategy II.1.8:** Implement professional development for those faculty teaching catapult courses.

**Performance Indicators:**

Output: Percentage of first-time in college, full-time, degree-seeking students retained to the second fall at the same institution of initial enrollment.

Outcome: Percentage point change in percentage of first-time in college, full-time, degree-seeking students retained to the second fall at the same institution of initial enrollment.

Efficiency: Additional tuition & fee revenue generated per undergraduate student retained.

**Objective II.2:** **Increase the percentage of first-time in college, full-time, degree-seeking students retained to the third fall at the same four-year institution of initial enrollment by 3.0 percentage points from the fall 2022 cohort (to fall 2024) baseline level of 73.4% to 76.4% by fall 2029 (retention of fall 2027 cohort).**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

Other Link: Master Plan for Postsecondary Education

**Strategy II.2.1:** Increase student retention by using curricular analytics to address courses that are bottlenecks and key courses.

**Strategy II.2.2:** Create, revise, and implement effective policies to improve retention and graduation rates.

**Strategy II.2.3:** Continue to assess and address factors involved in student retention rates, such as financial need.

**Strategy II.2.4:** Enhance the experience of second-year undergraduates through development of sophomore year programs.

**Strategy II.2.5:** Continue to monitor degree progression to ensure that undergraduates are progressing toward graduation.

**Strategy II.2.6:** Expand mentoring, tutoring, service-learning, and teaching assistant training programs.

**Strategy II.2.7:** Educate administrators, faculty, and staff on their roles in promoting student success.

**Performance Indicators:**

Output: Percentage of first-time in college, full-time, degree-seeking students retained to the third fall at the same institution of initial enrollment.

Outcome: Percentage point change in the percentage of first-time in college, full-time, degree-seeking students retained to the third fall at the same institution of initial enrollment.

**Objective II.3:** **Increase the institutional statewide graduation rate (defined as a student completing an award within 150% of "normal time") from the baseline rate (fall 2017 cohort for all institutions) of 73.2% to 75.0% by 2028-29 (Fall 2022 cohort).**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

Other Link: Master Plan for Postsecondary Education

**Strategy II.3.1:** Increase student retention by creating a growth mindset learning environment for students.

**Strategy II.3.2:** Create, revise, and implement effective policies to improve retention and graduation rates.

**Strategy II.3.3:** Continue to assess and address factors involved in student retention rates.

**Strategy II.3.4:** Continue to monitor degree progression to ensure that undergraduates are progressing toward graduation.

**Strategy II.3.5:** Expand mentoring, tutoring, service-learning, and teaching assistant training programs.

**Strategy II.3.6:** Educate administrators, faculty, and staff on their roles in promoting student success.

**Performance Indicators:**

Output: Percentage of students enrolled at a 4-year institution identified in a first-time, full-time, baccalaureate degree seeking cohort, graduating within 150% of "normal" time of degree completion from any public state institution.

Outcome: Number of students enrolled at a 4-year institution identified in a first-time, full-time, baccalaureate degree seeking cohort, graduating within 150% of "normal" time of degree completion from any public state institution.

**Objective II.4:** **Increase the total number of Baccalaureate Degree completers in a given academic year from the baseline year number of 5,303 in 2023-24 academic year to 5,525 in academic year 2028-29. Students may only be counted once per award level.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

Other Link: Master Plan for Postsecondary Education

**Strategy II.4.1:** Increase student retention by creating a growth mindset learning environment for students.

**Strategy II.4.2:** Create, revise, and implement effective policies to improve retention and graduation rates.

**Strategy II.4.3:** Continue to assess and address factors involved in student retention rates.

**Strategy II.4.4:** Continue to monitor degree progression to ensure that undergraduates are progressing toward graduation.

**Strategy II.4.5:** Expand mentoring, tutoring, service-learning, and teaching assistant training programs.

**Strategy II.4.6:** Continue to develop partnerships with high schools to prepare students for postsecondary education.

**Strategy II.4.7:** Continue to develop partnerships with community colleges to implement 2+2 programs and other articulation transfer agreements.

**Strategy II.4.8:** Educate administrators, faculty, and staff on their roles in promoting student success.

**Performance Indicators:**

Output: Total number of completers for baccalaureate level.

Outcome: Percent change in number of completers for baccalaureate level from the baseline year.

**Objective II.5:** **Increase the total number of Graduate Degree completers in a given academic year from the baseline year number of 2,718 in 2023-24 academic year to 2,800 in academic year 2028-29. Students may only be counted once per award level.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

Other Link: Master Plan for Postsecondary Education

**Strategy II.5.1:** Enhance graduate student recruitment to ensure highly qualified and motivated students admitted to LSU graduate programs.

**Strategy II.5.2:** Create, revise, and implement effective policies and procedures to improve retention and graduation rates.

**Strategy II.5.3** Develop programs to support graduate students inside and outside of the classroom.

**Strategy II.5.4:** Continue to assess and address factors involved in graduate student retention rates.

**Strategy II.5.5** Increase funding for graduate teaching and research assistantships.

**Strategy II.5.6** Implement strategic modality changes for graduate programs linked to workforce needs.

**Performance Indicators:**

Output: Total number of completers for graduate level.

Outcome: Percent change in number of completers for graduate level from the baseline year.

**Objective II.6:** **Increase the unduplicated number of Undergraduate degree completers age 25+ in a given academic year from the baseline year number of 348 in 2023-24 academic year to 500 in academic year 2028-29.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

Other Link: Master Plan for Postsecondary Education

**Strategy II.6.1:** Create articulation agreements with community colleges and high schools to offer seamless learner pathways into LSU system of institutions.

**Strategy II.6.2:** Develop employer and industry partnerships and align programming to address skill needs and career outcomes.

**Strategy II.6.3:** Refine and implement student-friendly policies for transfers, credit for prior learning, and other advanced standing mechanisms so no credit goes to waste.

**Strategy II.6.4:** Maximize Average Credit Hour (ACH) in UG programs to ensure students are moving through their program and graduating in a timely manner.

**Strategy II.6.5:** Train administrators, faculty, and staff on effective and efficient recruitment/retention practices for online. (Administrative perspective).

**Performance Indicators:**

Output: Total number of undergraduate completers age 25+.

Outcome: Percent change in number of undergraduate completers age 25+ from the baseline year.

**Objective II.7:** **Increase the unduplicated number of underrepresented minorities (all races other than white, Asian, non-residents & unknown/not reported) degree completers in a given academic year from the baseline year number of 1,967 in 2023-24 academic year to 2,042 in academic year 2028-29. Students may only be counted once per award level.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

Other Link: Master Plan for Postsecondary Education

**Strategy II.7.1:** Provide students with summer programs that offer students the opportunity to become adjusted to academic, personal, and social challenges at LSU.

**Strategy II.7.2:** Provide assistance at every stage of the undergraduate experience including intensive academic, personal, and career counseling.

**Strategy II.7.3:** Promote opportunities that assist with students' life experiences, cultures and perspectives represented in academia for low-income and first generation students.

**Strategy II.7.4:** Create a structured environment conducive to building the fundamental skills necessary to enhance the likelihood of successful completion of a baccalaureate degree.

**Strategy II.7.5:** Continue to grow bridge programs and develop robust procedures for supporting students.

**Performance Indicators:**

Output: Total number of minority completers for all levels.

Outcome: Percent change in number of minority completers for all levels from the baseline year.

**Louisiana State University Agricultural and Mechanical College**
**2026-2027 through 2030-2031 Strategic Plan**

*In Compliance with Act 1465 of 1997, each strategic plan must include the following process:*

## I. A brief, general description of how the strategic planning process was implemented.

Strategic planning at LSU is currently guided by the LSU Strategic Plan 2025, an extension of the initial National Flagship Agenda, which focuses on how the University can improve its research and educational enterprise to make it more nationally competitive. According to the University's core values of collegiality and open dialogue, this agenda is the culmination of discussions and debates among the faculty, staff, students, and friends of the University. To measure progress, the University has selected a group of national research universities as peers and will benchmark its performance relative to theirs. The agenda further recognizes that, as a public institution, LSU must be accountable and accessible, always demonstrating that it uses its resources wisely and efficiently.

## II. A brief statement identifying the principal clients and users of each program and the specific service or benefit derived by such persons or organizations:

LSU's instructional programs include 251 undergraduate degrees, graduate/professional degrees, and graduate certificates. The University attracts about 19 percent of the state's total enrollment in higher education, and LSU students come from many ethnic and religious backgrounds. The student body consists of more than 41,000 students from 50 states and over 100 foreign countries. Since its first commencement in 1869, LSU has awarded more than 322,000 degrees. The University produces about 28 percent of Louisiana's baccalaureate graduates, approximately 21 percent of the master's degrees, and about 53 percent of the doctoral degrees. The university has over 2,000 full-time and part-time faculty members--approximately 87 percent of whom have terminal degrees. The University's success in the leveraging of state funds to obtain federal dollars represents a good investment of taxpayers' money. At any given time more than 1,200 active sponsored research projects are in progress. Additionally, faculty and staff members and graduate students pursue numerous research projects that are not sponsored by outside agencies. LSU annually brings in grants and contracts from federal, state, and private sources with 2023-24 expenditures of approximately $431 million --a significant factor for the Louisiana economy. The University Libraries comprise the largest research library in the state and provide services for LSU faculty, students, and staff and for state, parish, and school libraries.

## III. An identification of potential external factors that are beyond the control of the entity and that could significantly affect the achievement of its goals or objectives:

All the listed performance goals for LSU depend greatly on state funding. Attainment of the goals are contingent on full funding of the State's TOPS program and State funding at a level that at minimum supports the annual increases in state mandated costs/inflation. Other external factors that could significantly affect the attainment of its goals and objectives are new demands, requirements, and/or changes in federal and state statutes, rules and regulations; new or changed criteria for accreditation by regional or specialized accrediting agencies; and changes in the rules and regulations of governing boards. In addition, University funding is dependent upon economic changes on the local, state, national, and/or international levels. Federal and state appropriations may vary depending upon these economic fluctuations and are subject to the special priorities and/or targeted programs corresponding to legislative initiatives.

## IV. The statutory requirement or other authority for each goal of the plan.

The following statutory requirements and authorities are applicable to all the goals below:

Master Plan for Public Postsecondary Education, Board of Regents, State of Louisiana, March 2001, p.29; Louisiana Constitution of 1974, Article 8, §7; Louisiana Revised Statutes, 17:3216; Reaffirmation of Accreditation, Southern Association of Colleges and Schools, Commission on Colleges, 2004; Minutes, Louisiana State University Board of Supervisors, October 24, 1991; United States District Court, Eastern District of Louisiana, Civil Action Number 80-3300, Section "A," p.3 and pp. 20-23

## V. A description of any program evaluation used to develop objectives and strategies.

LSU maintains an ongoing cycle of planning and evaluation for the purposes of program improvement. Strategic planning requires an annual reporting of progress made in achieving strategic goals as demonstrated through performance measures. The evaluation process allows for new objectives and strategies to be developed to further progress toward the desired strategic outcomes.

## VI. An explanation of how duplication of effort will be avoided when the operations of more than one program are directed at achieving a single goal, objective, or strategy.

For the purposes of Act 1465 of 1997, LSU is a single program. Duplication of effort of more than one program is thus not applicable.

## VII. Documentation as to the validity, reliability, and appropriateness of each performance indicator, as well as the method used to verify and validate the performance indicators as relevant measures of each program's performance.

See Performance Indicator Documentation attached for each performance indicator.

## VIII. A description of how each performance indicator is used in management decision making and other agency processes.

See Performance Indicator Documentation attached for each performance indicator.

## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: LSU

## I. Goal: Increase Opportunities for Student Access and Success

**Objective I.1**:
Increase fall 14th full term headcount enrollment by 9.0% from the baseline level of 43,441 in fall 2024 to 47,350 by fall 2029.

**Indicator Name:**
Number of students enrolled in fall (full term).

**Indicator LaPAS PI Code**: 15352

**Type and Level: Output**, Key

**Rationale**:
LSU is committed to improving the educational attainment of the Louisiana citizenry.

**Use**:
Enrollment drives many management decisions. The size of an institution's enrollment impacts scheduling, hiring, future planning, program demands, facilities management, etc.

**Clarity:**
Headcount enrollment refers to the actual number of students enrolled (as opposed to full time equivalent enrollment (FTE) which is calculated from the number of student credit hours enrolled divided by a fixed number).

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Student Profile System (SSPS).

**Data Source, Collection and Reporting:**
SSPS data is gathered three times annually, in the fall, spring, and summer. For this indicator, fall data will be used. The indicator will be reported at the end of the fourth quarter. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
The Regents SSPS is a unit record system where each enrolled student, regardless of course load, is counted.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses other than potential external factors as stated in Section III above. The reader must understand that this indicator reflects headcount enrollment and is not the enrollment calculation used for funding or reimbursement calculations.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: LSU

**Objective I.1**:
Increase fall full term headcount enrollment by 9.0% from the baseline level of 43,441 in fall 2024 to 47,350 by fall 2029.

**Indicator Name:**
Percent change in the number of students enrolled in fall (full term).

**Indicator LaPAS PI Code**: 15353

**Type & Level: Outcome**, Supporting

**Rationale**:
LSU is committed to improving the educational attainment of the Louisiana citizenry.

**Use**:
Enrollment drives many management decisions. The size of an institution's enrollment impacts scheduling, hiring, future planning, program demands, facilities management, etc.

**Clarity:**
Headcount enrollment refers to the actual number of students enrolled (as opposed to full time equivalent enrollment (FTE) which is calculated from the number of student credit hours enrolled divided by a fixed number).

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Student Profile System (SSPS).

**Data Source, Collection and Reporting:**
SSPS data is gathered three times annually, in the fall, spring, and summer. The indicator will be reported at the end of the fourth quarter. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
The Regents SSPS is a unit record system where each enrolled student, regardless of course load, is counted. The change will be calculated using a standard mathematical approach, subtracting the baseline year from the year being examined and dividing the difference by the baseline year, resulting in a percentage change.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses other than potential external factors as stated in Section III above. The reader must understand that this indicator reflects headcount enrollment and is not the enrollment calculation used for funding or reimbursement calculations.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: LSU

**II. Goal: Ensure Quality and Accountability**

**Objective II.1**:
Increase the percentage of first-time in college, full-time, degree-seeking students retained to the second fall at the same institution of initial enrollment by 3.0 percentage points from the fall 2023 cohort (to fall 2024) baseline level of 84.0% to 87.0% by fall 2029 (retention of fall 2028 cohort).

**Indicator Name:**
Percentage of first-time in college, full time, degree seeking students retained to the second fall at the same institution of initial enrollment.

**Indicator LaPAS PI Code**: 24438

**Type & Level:** Output, Key

**Rationale**:
The postsecondary education system must be committed not only to recruiting and enrolling students, but also to retaining them in school, thus preparing them for more productive lives.

**Use**:
Increased student retention within the Louisiana public postsecondary system contributes to an increase in the number of degree completers and as a consequence leads to a more educated citizenry.

**Clarity:**
This indicator tracks degree seeking first-time in college students enrolled full-time in credit courses as of the 14$^{th}$ class day of the fall semester.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Student Profile System (SSPS).

**Data Source, Collection and Reporting:**
SSPS data is gathered three times annually, in the fall, spring, and summer. For this indicator, fall data (the national standard) will be used. The indicator will be reported at the end of the fourth quarter. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This number is calculated using the institutional classified cohort of degree seeking, first-time in college, full-time students in a given fall who re-enroll the following fall semester at the same institution. The number of students found re-enrolled will be divided by the number of students in the cohort to obtain a retention percentage.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses other than potential external factors as stated in Section III above. The reader must understand that this indicator reflects retention at the same institution and does not include students who transfer to other institutions.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: LSU

**Objective II.1**:
Increase the percentage of first-time in college, full-time, degree-seeking students retained to the second fall at the same institution of initial enrollment by 3.0 percentage points from the fall 2023 cohort (to fall 2024) baseline level of 84.0% to 87.0% by fall 2029 (retention of fall 2028 cohort).

**Indicator Name:**
Percentage point change in the percentage of first-time in college, full time, degree-seeking students retained to the second fall at the same institution of initial enrollment.

**Indicator LaPAS PI Code**: 24439

**Type & Level:** Outcome, Supporting

**Rationale**:
The postsecondary education system must be committed not only to recruiting and enrolling students but also to retaining them in school, thus preparing them for more productive lives.

**Use**:
Increased student retention within the Louisiana public postsecondary system contributes to an increase in the number of degree completers and as a consequence leads to a more educated citizenry.

**Clarity:**
This indicator tracks degree seeking first-time in college students enrolled full-time in credit courses as of the 14$^{th}$ class day of the fall semester.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Student Profile System (SSPS).

**Data Source, Collection and Reporting:**
SSPS data is gathered three times annually, in the fall, spring, and summer. For this indicator, fall data (the national standard) will be used. The indicator will be reported at the end of the fourth quarter. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This calculation is based on subtracting the respective retention rate from the fall 2023 baseline year retention rate.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses other than potential external factors as stated in Section III above. The reader must understand that this indicator reflects retention at the same institution and does not include students who transfer to other institutions.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: LSU

**Objective II.1**:
Increase the percentage of first-time in college, full-time, degree-seeking students retained to the second fall at the same institution of initial enrollment by 3.0 percentage points from the fall 2023 cohort (to fall 2024) baseline level of 84.0% to 87.0% by fall 2029 (retention of fall 2028 cohort).

**Indicator Name:**
Additional tuition & fee revenue generated per undergraduate student retained.

**Indicator LaPAS PI Code**: N/A

**Type & Level:** Efficiency

**Rationale**:
The mission of LSU is to support student success and help more students earn their degrees on time. This goal also supports the state's broader efforts to increase college completion and strengthen the workforce. Raising retention rates will build on current efforts like better advising, stronger first-year support, and programs that help students feel connected and supported at the university.

**Use**:
Increasing the number of students retained from fall one to fall two will strengthen student persistence, improve graduation rates, and enhance the overall effectiveness of institutional support services, contributing to higher educational attainment and long-term workforce readiness across the state.

**Clarity:**
This indicator tracks degree seeking first-time in college students enrolled full-time in credit courses as of the 14$^{th}$ class day of the fall semester.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Student Profile System (SSPS).

**Data Source, Collection and Reporting:**
SSPS data is gathered three times annually, in the fall, spring, and summer. For this indicator, fall data (the national standard) will be used. The indicator will be reported at the end of the fourth quarter. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
To measure efficiency, the additional tuition and fee revenue generated by retaining more students between the first and second fall will be calculated. This helps quantify the financial return on improved retention. Students retained uses a standard mathematical approach, subtracting the baseline year from the year being examined and dividing the difference by the baseline year, resulting in a percentage change.

Additional Revenue=Number of Additional Students Retained×Average Tuition and Fees per Student

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses other than potential external factors as stated in Section III above. The reader must understand that this indicator reflects retention at the same institution and does not include students who transfer to other institutions.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: LSU

**Objective II.2**:
Increase the percentage of first-time in college, full-time, degree-seeking students retained to the third fall at the same institution of initial enrollment by 3.0 percentage points from the fall 2022 cohort (to fall 2024) baseline level of 73.4% to 76.4% by fall 2029 (retention of fall 2027 cohort).

**Indicator Name:**
Percentage of first-time in college, full time, degree seeking students retained to the third fall at the same institution of initial enrollment.

**Indicator LaPAS PI Code**: 24440

**Type & Level:** Output, Key

**Rationale**:
The postsecondary education system must be committed not only to recruiting and enrolling students, but also to retaining them in school, thus preparing them for more productive lives.

**Use**:
Increased student retention within the Louisiana public postsecondary system contributes to an increase in the number of degree completers and as a consequence leads to a more educated citizenry.

**Clarity:**
This indicator tracks degree seeking first-time in college students enrolled full-time in credit courses as of the 14$^{th}$ class day of the fall semester.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Student Profile System (SSPS).

**Data Source, Collection and Reporting:**
SSPS data is gathered three times annually, in the fall, spring, and summer. For this indicator, fall data (the national standard) will be used. The indicator will be reported at the end of the fourth quarter. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This number is calculated using the institutional classified cohort of degree seeking, first-time in college, full-time, students in a given fall who re-enroll the third fall semester at the same institution. The number of students found re-enrolled will be divided by the number of students in the cohort to obtain a retention percentage.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses other than potential external factors as stated in Section III above. The reader must understand that this indicator reflects retention at the same institution and does not include students who transfer to other institutions.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: LSU

**Objective II.2**:
Increase the percentage of first-time in college, full-time, degree-seeking students retained to the third fall at the same institution of initial enrollment by 3.0 percentage points from the fall 2022 cohort (to fall 2024) baseline level of 73.4% to 76.4% by fall 2029 (retention of fall 2027 cohort).

**Indicator Name:**
Percentage point change in the percentage of first-time in college, full time, degree seeking students retained to the third fall at the same institution of initial enrollment.

**Indicator LaPAS PI Code**: 24441

**Type & Level:** Outcome, Supporting

**Rationale**:
The postsecondary education system must be committed not only to recruiting and enrolling students, but also to retaining them in school, thus preparing them for more productive lives.

**Use**:
Increased student retention within the Louisiana public postsecondary system contributes to an increase in the number of degree completers and as a consequence leads to a more educated citizenry.

**Clarity:**
This indicator tracks degree seeking first-time in college students enrolled full-time in credit courses as of the 14$^{th}$ class day of the fall semester.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Student Profile System (SSPS).

**Data Source, Collection and Reporting:**
SSPS data is gathered three times annually, in the fall, spring, and summer. For this indicator, fall data (the national standard) will be used. The indicator will be reported at the end of the fourth quarter. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This calculation is based on subtracting the respective retention rate from the baseline year retention rate.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses other than potential external factors as stated in Section III above. The reader must understand that this indicator reflects retention at the same institution and does not include students who transfer to other institutions.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: LSU

**Objective II.3**:
Increase the institutional statewide graduation rate (defined as a student completing an award within 150% of "normal time") from the baseline year rate (fall 2017 cohort for all institutions) of 73.2% to 75.0% by 2028-29 (fall 2022 cohort).

**Indicator Name:**
Percentage of students enrolled in a first-time, full-time, degree seeking cohort, graduating within 150% of "normal" time of degree completion from any public state institution.

**Indicator LaPAS PI Code**: 24442

**Type & Level:** Output, Key

**Rationale**:
The postsecondary education system must be committed not only to recruiting and enrolling students, but also to retaining them in school, thus preparing them for more productive lives. It is important for the further development of the state's economy that a higher percentage of students who enroll in college earn a degree.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
LSU will report its individual graduation rate, while the system will report an aggregate rate.

**Validity, Reliability and Accuracy:**
The student cohort data includes those students who entered a four-year institution six years earlier and reflects how many and what percentage graduated from any public state institution.

**Data Source, Collection and Reporting:**
Data will be retrieved from the Board of Regents' Statewide Completers System (SCS) and Statewide Student Profile System (SSPS). The indicator will be reported at the end of the fourth quarter. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
Graduation rate is calculated by dividing the number from an entering cohort who earn a baccalaureate degree within six years by the number in the original cohort.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the SCS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SCS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses other than potential external factors as stated in Section III above. The reader must understand that this indicator reflects the baccalaureate graduation rate all Louisiana public institutions and includes students who transfer to other institutions.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: LSU

**Objective II.3**:
Increase the institutional statewide graduation rate (defined as a student completing an award within 150% of "normal time") from the baseline year rate (fall 2017 cohort for all institutions) of 73.2% to 75.0% by 2028-29 (fall 2022 cohort).

**Indicator Name:**
Percentage point change in the percentage of students enrolled in a first-time, full-time, degree seeking cohort, graduating within 150% of "normal" time of degree completion from any public state institution.

**Indicator LaPAS PI Code**: 24443

**Type & Level:** Output, Supporting

**Rationale**:
The postsecondary education system must be committed not only to recruiting and enrolling students, but also to retaining them in school, thus preparing them for more productive lives. It is important for the further development of the state's economy that a higher percentage of students who enroll in college earn a degree.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
LSU will report its individual graduation rate, while the system will report an aggregate rate.

**Validity, Reliability and Accuracy:**
The student cohort data includes those students who entered a four-year institution six years earlier and reflects how many and what percentage graduated from any public state institution.

**Data Source, Collection and Reporting:**
Data will be retrieved from the Board of Regents' Statewide Completers System (SCS) and Statewide Student Profile System (SSPS). The indicator will be reported at the end of the fourth quarter. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This calculation is based on subtracting the respective graduation rate from the baseline year graduation rate.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the SCS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SCS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses other than potential external factors as stated in Section III above. The reader must understand that this indicator reflects the baccalaureate graduation rate all Louisiana public institutions and includes students who transfer to other institutions.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

Program: LSU

**Objective II.4:**
Increase the total number of Baccalaureate Degree completers in a given academic year from the baseline year number of 5,303 in 2023-24 academic year to 5,525 in academic year 2028-29. Students may only be counted once per award level.

**Indicator Name:**
Total number of completers for the baccalaureate level.

**Indicator LaPAS PI Code**: 24444

**Type:** Output, Key

**Rationale**:
The mission of LSU is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
This indicator is the total number of students awarded degrees at the baccalaureate level. Students may only be counted once per institution per award level within a fiscal year.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Completers System. This system has been in existence for over 25 years.

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Statewide Completers System. The BOR collects data on completers each July for the previous fiscal year. The indicator will be reported at the end of the fourth quarter for the prior fiscal year. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This indicator is a unique student count of completers for the baccalaureate award level offered at the institution.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the data electronically to the Board of Regents. Board of Regents staff perform numerous edits and work with the campuses to correct errors.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
The award must be recognized by the Regents and included in the institution's curriculum inventory.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

Program: LSU

**Objective II.4:**
Increase the total number of Baccalaureate Degree completers in a given academic year from the baseline year number of 5,303 in 2023-24 academic year to 5,525 in academic year 2028-29. Students may only be counted once per award level.

**Indicator Name:**
Percentage change in the number of baccalaureate level completers from the baseline year.

**Indicator LaPAS PI Code**: 24444

**Type:** Outcome, Supporting

**Rationale**:
The mission of LSU is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
This indicator is the total number of students awarded baccalaureate degrees. Students may only be counted once per institution per award level within a fiscal year.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Completers System. This system has been in existence for over 25 years.

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Statewide Completers System. The BOR collects data on completers each July for the previous fiscal year. The indicator will be reported at the end of the fourth quarter for the prior fiscal year.

**Calculation Methodology:**
This indicator will be calculated using a standard mathematical approach, subtracting the baseline year from the year being examined and dividing the difference by the baseline year, resulting in a percentage change.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the data electronically to the Board of Regents. Board of Regents staff perform numerous edits and work with the campuses to correct errors.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
The award must be recognized by the Regents and included in the institution's curriculum inventory.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

Program: LSU

**Objective II.5:**
Increase the total number of Graduate Degree completers in a given academic year from the baseline year number of 2,718 in 2023-24 academic year to 2,800 in academic year 2028-29. Students may only be counted once per award level.

**Indicator Name:**
Total number of completers for the graduate level.

**Indicator LaPAS PI Code**: 26179

**Type:** Output, Key

**Rationale**:
The mission of LSU is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of individuals with advanced college degrees will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
This indicator is the total number of students awarded degrees at the graduate level. Students may only be counted once per institution per award level within a fiscal year.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Completers System. This system has been in existence for over 25 years.

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Statewide Completers System. The BOR collects data on completers each July for the previous fiscal year. The indicator will be reported at the end of the fourth quarter for the prior fiscal year. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This indicator is a unique student count of completers for the graduate level offered at the institution.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**

Each institution submits the data electronically to the Board of Regents. Board of Regents staff perform numerous edits and work with the campuses to correct errors.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
The award must be recognized by the Regents and included in the institution's curriculum inventory.

**Responsible Person: Troy Blanchard**

## PERFORMANCE INDICATOR DOCUMENTATION

Program: LSU

**Objective II.5:**
Increase the total number of Graduate Degree completers in a given academic year from the baseline year number of 2,718 in 2023-24 academic year to 2,800 in academic year 2028-29. Students may only be counted once per award level.

**Indicator Name:**
Percentage change in the number of graduate level completers from the baseline year.

**Indicator LaPAS PI Code**: 26179

**Type:** Outcome, Supporting

**Rationale**:
The mission of LSU is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of individuals with advanced college degrees will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
This indicator is the total number of students awarded graduate degrees. Students may only be counted once per institution per award level within a fiscal year.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Completers System. This system has been in existence for over 25 years.

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Statewide Completers System. The BOR collects data on completers each July for the previous fiscal year. The indicator will be reported at the end of the fourth quarter for the prior fiscal year.

**Calculation Methodology:**
This indicator will be calculated using a standard mathematical approach, subtracting the baseline year from the year being examined and dividing the difference by the baseline year, resulting in a percentage change.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the data electronically to the Board of Regents. Board of Regents staff perform numerous edits and work with the campuses to correct errors.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
The award must be recognized by the Regents and included in the institution's curriculum inventory.

**Responsible Person: Troy Blanchard**

## PERFORMANCE INDICATOR DOCUMENTATION

Program: LSU

**Objective II.6:**
Increase the total number of Undergraduate degree completers age 25+ in a given academic year from the baseline year number of 348 in 2023-24 academic year to 500 in academic year 2028-29.

**Indicator Name:**
Total number of undergraduate completers age 25+.

**Indicator LaPAS PI Code**: 6002001

**Type:** Output, Key

**Rationale**:
The mission of LSU is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
This indicator is the total number of students age 25+ awarded undergraduate degrees. Students may only be counted once per institution within a fiscal year.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Completers System. This system has been in existence for over 25 years.

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Statewide Completers System. The BOR collects data on completers each July for the previous fiscal year. The indicator will be reported at the end of the fourth quarter for the prior fiscal year. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This indicator is a unique student count of undergraduate completers age 25+ at the institution.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**

Each institution submits the data electronically to the Board of Regents. Board of Regents staff perform numerous edits and work with the campuses to correct errors.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
The award must be recognized by the Regents and included in the institution's curriculum inventory.

**Responsible Person: Kappie Mumphrey**

## PERFORMANCE INDICATOR DOCUMENTATION

Program: LSU

**Objective II.6:**
Increase the total number of Undergraduate degree completers age 25+ in a given academic year from the baseline year number of 348 in 2023-24 academic year to 500 in academic year 2028-29.

**Indicator Name:**
Percentage change in the number of undergraduate completers age 25+ from the baseline year.

**Indicator LaPAS PI Code**: 6002001

**Type:** Outcome, Supporting

**Rationale**:
The mission of LSU is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
This indicator is the total number of undergraduate degree completers age 25+. Students may only be counted once per institution per award level within a fiscal year.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Completers System. This system has been in existence for over 25 years.

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Statewide Completers System. The BOR collects data on completers each July for the previous fiscal year. The indicator will be reported at the end of the fourth quarter for the prior fiscal year.

**Calculation Methodology:**
This indicator will be calculated using a standard mathematical approach, subtracting the baseline year from the year being examined and dividing the difference by the baseline year, resulting in a percentage change.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**

Each institution submits the data electronically to the Board of Regents. Board of Regents staff perform numerous edits and work with the campuses to correct errors.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
The award must be recognized by the Regents and included in the institution's curriculum inventory.

**Responsible Person: Kappie Mumphrey**

## PERFORMANCE INDICATOR DOCUMENTATION

Program: LSU

**Objective II.7:**
Increase the unduplicated number of underrepresented minorities (all races other than white, Asian, non-residents & unknown/not reported) completers in a given academic year from the baseline year number of 1,967 in 2023-24 academic year to 2,042 in academic year 2028-29. Students may only be counted once per award level.

**Indicator Name:**
Total number of minority completers at all levels.

**Indicator LaPAS PI Code**: 6002002

**Type:** Output, Key

**Rationale**:
The mission of LSU is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of individuals with college degrees will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
This indicator is the total number of minority students awarded degrees at all levels. Students may only be counted once per institution per award level within a fiscal year.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Completers System. This system has been in existence for over 25 years.

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Statewide Completers System. The BOR collects data on completers each July for the previous fiscal year. The indicator will be reported at the end of the fourth quarter for the prior fiscal year. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This indicator is a unique student count of minority completers at all levels offered at the institution.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**

Each institution submits the data electronically to the Board of Regents. Board of Regents staff perform numerous edits and work with the campuses to correct errors.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
The award must be recognized by the Regents and included in the institution's curriculum inventory.

**Responsible Person: Danny Barrow**

## PERFORMANCE INDICATOR DOCUMENTATION

Program: LSU

**Objective II.7:**
Increase the unduplicated number of underrepresented minorities (all races other than white, Asian, non-residents & unknown/not reported) completers in a given academic year from the baseline year number of 1,967 in 2023-24 academic year to 2,042 in academic year 2028-29. Students may only be counted once per award level.

**Indicator Name:**
Percentage change in the number of minority completers from the baseline year.

**Indicator LaPAS PI Code**: 6002002

**Type:** Outcome, Supporting

**Rationale**:
The mission of LSU is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of individuals with college degrees will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
This indicator is the total number of minority students awarded degrees. Students may only be counted once per institution per award level within a fiscal year.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Completers System. This system has been in existence for over 25 years.

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Statewide Completers System. The BOR collects data on completers each July for the previous fiscal year. The indicator will be reported at the end of the fourth quarter for the prior fiscal year.

**Calculation Methodology:**
This indicator will be calculated using a standard mathematical approach, subtracting the baseline year from the year being examined and dividing the difference by the baseline year, resulting in a percentage change.

**Scope:**
This indicator is reported for LSU only.

**Responsible for data collection, analysis, and quality**
Each institution submits the data electronically to the Board of Regents. Board of Regents staff perform numerous edits and work with the campuses to correct errors.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
The award must be recognized by the Regents and included in the institution's curriculum inventory.

**Responsible Person: Danny Barrow**

# Louisiana State University Alexandria

# Strategic Plan
# FY 2026-2027 through FY 2030-2031

**Revised**
July 1, 2025

## Vision Statement:

LSU of Alexandria will be recognized across the state of Louisiana and beyond as a destination of choice for the outstanding undergraduate experience it offers.

## Mission Statement:

LSU at Alexandria is committed to providing our students with the education, skills, development, and resources needed to establish a strong foundation for their future success. We create a welcoming environment that emphasizes critical thinking, experiential learning, workforce readiness, and community engagement, preparing students to excel in their chosen careers and contribute meaningfully to society.

## Values:

Truth: LSUA is committed to the pursuit of truth, wherever it may lead.

Autonomy: LSUA recognizes the broad freedom to design and execute a life plan consistent with one's principled beliefs.

Community: LSUA is comprised of dedicated, caring individuals who treat each other as family and operate as a team.

Perspective: LSUA strives to assist students and other members of its community to understand the varied viewpoints and worldviews generated by the many cultures across the state, the nation, and the globe.

## Overview of Institution:

LSUA is one of the eight member institutions of Louisiana State University. The others are LSU Agricultural and Mechanical College (Baton Rouge); LSU Shreveport; LSU Eunice; LSU Agricultural Center; LSU Pennington Biomedical Research Center; LSU Health Sciences Center New Orleans; and LSU Health Sciences Center Shreveport. The By-Laws and Regulations of the Board of Supervisors specify that LSUA will "extend basic as well as unique programs to citizens of Central Louisiana," a mission articulated by LSU President Troy Middleton when he spoke at LSUA's dedication on December 3, 1960. At that time, President Middleton said that LSUA must maintain the same academic standards and academic respectability that existed on the main campus.

Now in its seventh decade, LSUA continues to fulfill this mission by providing high-quality undergraduate level education to the people of Central Louisiana. The university is also keenly aware of the opportunities and challenges that lie ahead. Under the leadership of its current chancellor, LSUA has taken strong measures to meet the challenges (e.g., the projected "enrollment cliff," the decline in state funding of public universities over the last two decades, and the general loss of public faith in the efficacy of the nation's institutions of higher learning) and to seize the many opportunities available to the university (e.g., the development of new degree programs that align closely with workforce development needs; the adoption of online modalities to broaden the audience for the university's existing programs; the development of partnerships with local and regional businesses, school districts, and other colleges and universities; and the garnering of financial support from

individual donors and donor organizations).

In all its initiatives, the university is guided by four overarching frameworks:1) the holistic development of students and their achievement of academic excellence; 2) the forging of strong connections with the communities that it serves; 3) the creation of a vibrant campus environment; and d) the enhancement of the university's infrastructure and the improved efficiency of its operations.

## Goals and Objectives

The many initiatives that LSUA has undertaken over the past five years has led to substantial growth in the number of enrolled students; the retention of enrolled students from 1st to 2nd year and from 1st to 3rd year; the number of students graduating each year; and the number of students graduating within six years of their initial enrollment. What follows in the remainder of this document is the establishment of specific Goals and Objectives for each of the metrics listed above.

**Goals and Objectives:**

## I. Goal: Increase Opportunities for Student Access and Success

**Objective I.1.** **Increase the fall 14th class day headcount enrollment at Louisiana State University Alexandria by 46.7% from the baseline level of 6,815 in Fall 2024 to 10,000 by Fall 2030.**

Link to State Outcome Goals: Youth Education, Better Health, Diversified Economic Growth, and Transparent, Accountable and Effective Government

| | |
|---|---|
| **Strategy I.1.1:** | Have effective policies to improve retention and graduation rates. |
| **Strategy I.1.2:** | Promote electronic (distance) learning activities in each region of the state. |
| **Strategy I.1.3:** | Enhance effective transfers between and among campuses at all levels. |
| **Strategy I.1.4:** | Comply with state and federal regulations for access to programs and services to citizens with disabilities. |
| **Strategy I.1.5** | Have effective dual and cross enrollment agreements with public school districts and among postsecondary institutions. |
| **Strategy I.1.6:** | Administer Educational Planning and Assessment System (EPAS). |
| **Strategy I.1.7:** | Develop partnerships with high schools to prepare students for postsecondary education. |
| **Strategy I.1.8:** | Develop partnerships with community colleges to implement 2+2 programs and other articulation transfer agreements. |
| **Strategy I.1.9:** | Improve access to academic programs for active military members and their dependents in partnership with the Fort Johnson military installation. |

**Performance Indicators:**

Output: Number of students enrolled in fall (as of 14th day) at LSUA.

Outcome: Percent change in the number of students enrolled in fall (as of 14th day) at LSUA.

## II. Goal: Ensure Quality and Accountability

**Objective II.1: Increase the percentage of first-time in college, full-time, degree-seeking students retained to the second Fall at the same institution of initial enrollment by 2 percentage points from 68% in the Fall 2023 cohort (to Fall 2024) to 70% by Fall 2030.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

| | |
|---|---|
| **Strategy II.1.1:** | Maintain outreach programs to retain students. |
| **Strategy II.1.2:** | Maintain on-campus summer enrichment/transition programs. |
| **Strategy II.1.3:** | Have effective recruitment and hiring practices for administrators, faculty and staff. |
| **Strategy II.1.4:** | Develop/provide access to ACT preparation courses to increase eligibility for participation in TOPS program. |
| **Strategy II.1.5** | Maintain mentoring, tutoring, and related programs. |
| **Strategy II.1.6:** | Develop partnerships with high schools to prepare students for postsecondary education. |
| **Strategy II.1.7:** | Develop partnerships with community colleges to implement 2+2 programs and other articulation transfer agreements. |
| **Strategy II.1.8** | Develop a pipeline of students graduating from STEM programs for graduate and professional degrees across the LSU system. |
| **Strategy II.1.9** | Enhance tutoring service and faculty development to improve success rates in gateway courses. |
| **Strategy II.1.10** | Facilitate career confidence and readiness among students through the Command Your Career, an initiative of LSUA's Quality Enhancement Plan. |

**Performance Indicators:**

Output: Percentage of first-time, full-time, degree-seeking freshmen retained to the second year at LSUA.

Outcome: Percentage point change in percentage of first-time, full-time, degree-seeking freshmen retained to the second year at LSUA.

**Objective II.2:** **Increase the percentage of first-time in college, full-time, degree- seeking students retained to the third Fall at the same institution of initial enrollment by 2 percentage points from 49% in the Fall 2023 cohort (to Fall 2024) baseline level to 51% by Fall 2030.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

| | |
|---|---|
| **Strategy II.2.1:** | Maintain outreach programs to retain students. |
| **Strategy II.2.2:** | Maintain on-campus summer enrichment/transition programs. |
| **Strategy II.2.3:** | Have effective recruitment and hiring practices for administrators, faculty and staff. |
| **Strategy II.2.4:** | Develop/provide access to ACT preparation courses to increase eligibility for participation in TOPS program. |
| **Strategy II.2.5** | Maintain mentoring, tutoring, and related programs. |
| **Strategy II.2.6:** | Develop partnerships with high schools to prepare students for postsecondary education. |
| **Strategy II.2.7:** | Develop partnerships with community colleges to implement 2+2 programs and other articulation transfer agreements. |
| **Strategy II.2.8** | Develop a pipeline of students graduating from STEM programs for graduate and professional degrees across the LSU system. |
| **Strategy II.2.9** | Enhance tutoring service and faculty development to improve success rates in gateway courses. |
| **Strategy II.2.10** | Facilitate career confidence and readiness among students through the Command Your Career, an initiative of LSUA's Quality Enhancement Plan. |

**Performance Indicators:**

Output: Percentage of first-time, full-time, degree-seeking students retained to the third year at LSUA.

Outcome: Percent point change in the percentage of first-time, full-time, degree-seeking students retained to the third year at LSUA.

**Objective II.3:** **Increase the graduation rate for baccalaureate degrees from the Fall 2024 baseline rate of 37% to 40% by Fall 2030.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

| | |
|---|---|
| **Strategy II.3.1:** | Maintain outreach programs to retain students. |
| **Strategy II.3.2:** | Maintain on-campus summer enrichment/transition programs. |
| **Strategy II.3.3:** | Have effective recruitment and hiring practices for administrators, faculty and staff. |
| **Strategy II.3.4:** | Develop/provide access to ACT preparation courses to increase eligibility for participation in TOPS program. |
| **Strategy II.3.5** | Maintain mentoring, tutoring, and related programs. |
| **Strategy II.3.6:** | Develop partnerships with high schools to prepare students for postsecondary education. |
| **Strategy II.3.7:** | Develop partnerships with community colleges to implement 2+2 programs and other articulation transfer agreements. |
| **Strategy II.3.8** | Develop a pipeline of students graduating from STEM programs for graduate and professional degrees across the LSU system. |
| **Strategy II.3.9** | Enhance tutoring service and faculty development to improve success rates in gateway courses. |
| **Strategy II.3.10** | Facilitate career confidence and readiness among students through the Command Your Career, an initiative of LSUA's Quality Enhancement Plan. |

**Performance Indicators:**

Outcome: Percentage of students enrolled at LSUA identified in a first-time, full-time, degree seeking cohort, graduating within 150% of "normal" time of degree completion from the institution of initial enrollment.

**Objective II.4:** **Increase the total number of completers (all degrees and certificates) from a baseline of 1285 in the 2024-25 academic year (AY) to 1500 per year through the 2030-31 AY.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

| | |
|---|---|
| **Strategy II.4.1:** | Maintain outreach programs to retain students. |
| **Strategy II.4.2:** | Maintain on-campus summer enrichment/transition programs. |
| **Strategy II.4.3:** | Have effective recruitment and hiring practices for administrators, faculty and staff. |
| **Strategy II.4.4:** | Develop/provide access to ACT preparation courses to increase eligibility for participation in TOPS program. |
| **Strategy II.4.5** | Maintain mentoring, tutoring, and related programs. |
| **Strategy II.4.6:** | Develop partnerships with high schools to prepare students for postsecondary education. |
| **Strategy II.4.7:** | Develop partnerships with community colleges to implement 2+2 programs and other articulation transfer agreements. |
| **Strategy II.4.8** | Develop a pipeline of students graduating from STEM programs for graduate and professional degrees across the LSU system. |
| **Strategy II.4.9** | Enhance tutoring service and faculty development to improve success rates in gateway courses. |
| **Strategy II.4.10** | Facilitate career confidence and readiness among students through the Command Your Career, an initiative of LSUA's Quality Enhancement Plan. |

**Performance Indicators:**

Output: An increase in the number of completers at LSUA.

**Objective II.5:** **Increase the total number of adult completers (graduates over 25 years of age) in a given academic year (AY) from the baseline of 730 in the 2024-25 AY to 1000 per year through the 2030-31 AY.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

| | |
|---|---|
| **Strategy II.5.1:** | Maintain outreach programs to retain students. |
| **Strategy II.5.2:** | Maintain on-campus summer enrichment/transition programs |
| **Strategy II.5.3:** | Have effective recruitment and hiring practices for administrators, faculty and staff. |
| **Strategy II.5.4:** | Develop/provide access to ACT preparation courses to increase eligibility for participation in TOPS program. |
| **Strategy II.5.5** | Maintain mentoring, tutoring, and related programs. |
| **Strategy II.5.6:** | Develop partnerships with high schools to prepare students for postsecondary education. |
| **Strategy II.5.7:** | Develop partnerships with community colleges to implement 2+2 programs and other articulation transfer agreements. |
| **Strategy II.5.8** | Develop a pipeline of students graduating from STEM programs for graduate and professional degrees across the LSU system. |
| **Strategy II.5.9** | Enhance tutoring service and faculty development to improve success rates in gateway courses. |
| **Strategy II.5.10** | Facilitate career confidence and readiness among students through the Command Your Career, an initiative of LSUA's Quality Enhancement Plan. |

**Performance Indicators:**

Output: An increase in the number of adult completers at LSUA.

**Objective II.6:** **Decrease the average number of years to complete a baccalaureate degree from 5.8 years of the 2024-25 baseline academic year (AY) to 5 years by the 2030-31 AY.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

| | |
|---|---|
| **Strategy II.6.1:** | Maintain outreach programs to retain students. |
| **Strategy II.6.2:** | Maintain on-campus summer enrichment/transition programs. |
| **Strategy II.6.3:** | Have effective recruitment and hiring practices for administrators, faculty and staff. |
| **Strategy II.6.4:** | Develop/provide access to ACT preparation courses to increase eligibility for participation in TOPS program. |
| **Strategy II.6.5** | Maintain mentoring, tutoring, and related programs. |
| **Strategy II.6.6:** | Develop partnerships with high schools to prepare students for postsecondary education. |
| **Strategy II.6.7:** | Develop partnerships with community colleges to implement 2+2 programs and other articulation transfer agreements. |
| **Strategy II.6.8** | Develop a pipeline of students graduating from STEM programs for graduate and professional degrees across the LSU system. |
| **Strategy II.6.9** | Enhance tutoring service and faculty development to improve success rates in gateway courses. |
| **Strategy II.6.10** | Facilitate career confidence and readiness among students through the Command Your Career, an initiative of LSUA's Quality Enhancement Plan. |

**Performance Indicators:**

Outcome: A decrease in the average number of years to complete a baccalaureate degree at LSUA

**Louisiana State University Alexandria**
**2026-2027 through 2030-2031 Strategic Plan**

*In Compliance with Act 1465 of 1997, each strategic plan must include the following process:*

**I. A brief statement identifying the principal clients and users of each program and the specific service or benefit derived by such persons or organizations:**

LSUA primarily serves Central Louisiana and the Region 6 labor market. The program provides highly trained, college graduates for that area, the state of Louisiana, and the Nation.

**II. An identification of potential external factors that are beyond the control of the entity and that could significantly affect the achievement of its goals or objectives:**

The projected "enrollment cliff," the decline in state funding of public universities over the last two decades, and the general loss of public faith in the efficacy and return on investment of the nation's institutions of higher learning.

**III. The statutory requirement or other authority for each goal of the plan.**

The following statutory requirements and authorities are applicable to all of the goals below: Master Plan for Public Postsecondary Education, Board of Regents, State of Louisiana, March 2011, revised April 2012, ; Louisiana Constitution of 1974, Article 8, §7; Louisiana Revised Statutes, 17:3216; Reaffirmation of Accreditation, Southern Association of Colleges and Schools, Commission on Colleges, 2015; Minutes, Louisiana State University Board of Supervisors, October 24, 1991; United States District Court, Eastern District of Louisiana, Civil Action Number 80-3300, Section "A," p.3 and pp. 20-23

**IV. A description of any program evaluation used to develop objectives and strategies.**

The Board of Regents is required by the state constitution to develop and make timely revision of a master plan for higher education. The goals and objectives in this Five-year strategic plan align with the Regents' revised Master Plan adopted in 2019.

**V. Identification of the primary persons who will benefit from or be significantly affected by each objective within the plan.**

See Performance Indicator Documentation attached for each objective.

**VI. An explanation of how duplication of effort will be avoided when the operations of more than one program are directed at achieving a single goal, objective, or strategy.**

For the purposes of Act 1465 of 1997, LSUA is a single program. Duplication of effort of more than one program is thus not applicable

**VII. Documentation as to the validity, reliability, and appropriateness of each performance indicator, as well as the method used to verify and validate the performance indicators as relevant measures of each program's performance.**

See Performance Indicator Documentation attached for each performance indicator.

**VIII. A description of how each performance indicator is used in management decision making and other agency processes.**

See Performance Indicator Documentation attached for each performance indicator.

**IX. A statement regarding the Human Resource policies benefiting women and families.**
LSUA is compliant with EEO and other governing standards.

**Person Responsible for completing this plan:** Rocaille Roberts

**Contact Person/s:**
**Name:** Rocaille Roberts
**Title:** Director, Institutional Research and Effectiveness
**Telephone:** (318) 619 - 2970
**E-mail:** rroberts@lsua.edu

## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: Louisiana State University Alexandria

**Goals and Objectives:**

**I. Goal: Increase Opportunities for Student Access and Success**

**Objective I.1**:
Increase the fall 14th class day headcount enrollment at Louisiana State University Alexandria by 46.7% from the baseline level of 6,815 in Fall 2024 to 10,000 by Fall 2030.

**Indicator Name:**
Number of students enrolled in fall (as of 14th day) at Louisiana State University Alexandria

**Indicator LaPAS PI Code**: 15291

**Type and Level:** Output, Key

**Rationale**:
Recognition of the importance of Louisiana having an educated citizenry

**Use**:
Enrollment drives many management decisions. The size of an institution's enrollment impacts scheduling, hiring, future planning, program demands, facilities management, etc.

**Clarity:**
Headcount enrollment refers to the actual number of students enrolled (as opposed to fulltime equivalent enrollment (FTE) which is calculated from the number of student credit hours enrolled divided by a fixed number)

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Student Profile System (SSPS).

**Data Source, Collection and Reporting:**
For this indicator, SPSS Fall data (the national standard) will be used. Data will be retrieved from the Board of Regents Statewide Student Profile System (SSPS). This system has been in existence for over 25 years.

**Calculation Methodology:**
The standard method practiced nationwide for reporting headcount enrollment is as of the 14th class day of the semester. The Regents SSPS is a unit record system where each enrolled student, regardless of course load, is counted.

**Scope:**
This indicator is the aggregate of all enrolled students at Louisiana State University Alexandria.

**Responsible for data collection, analysis, and quality**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses. The reader must understand that this indicator reflects headcount enrollment and is not the enrollment calculation used for funding or reimbursement calculations.

**Responsible Person:**

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## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: Louisiana State University Alexandria

**II. Goal: Ensure Quality and Accountability**

**Objective II.1**:
Increase the percentage of first-time in college, full-time, degree-seeking students retained to the second Fall at the same institution of initial enrollment by 2 percentage points from 68% in the Fall 2023 cohort (to Fall 2024) to 70% by Fall 2030.

**Indicator Name:**
Percentage of first-time in college, full time, degree seeking students retained to the second Fall at the same institution of initial enrollment, Louisiana State University Alexandria.

**Indicator LaPAS PI Code**: 24527

**Type and Level:** Output, Key

**Rationale**:
The postsecondary education system must be committed not only to recruiting and enrolling students, but also to retain them in school, thus preparing them for more productive lives.

**Use**:
Increased student retention within the Louisiana public postsecondary system contributes to an increase in the number of degree completers and as a consequence leads to a more educated citizenry.

**Clarity:**
This indicator tracks degree seeking first-time in college students enrolled full-time in credit courses as of the 14$^{th}$ class day of the fall semester. It does not reflect the total retention for the college.

**Validity, Reliability and Accuracy:**
Data will be retrieved from LSUA and/or from the Board of Regents' Statewide Student Profile System (SSPS).

**Data Source, Collection and Reporting:**
SSPS data is gathered twice annually, in the Fall and Spring. For this indicator, Fall data (the national standard) will be used.

**Calculation Methodology:**
This number is calculated using the institutional classified cohort of degree seeking, first-time in college, full-time, students in a given Fall which re-enroll the following fall semester at the same

institution. The number of students found re-enrolled will be divided by the number of students in the cohort to obtain a retention percentage.

**Scope:**
This indicator is the aggregate of Louisiana State University Alexandria.

**Responsible for data collection, analysis, and quality**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses. The reader must understand that this indicator reflects retention at the same institution and does not include students who transfer to other institutions.

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## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: Louisiana State University Alexandria

**Objective II.2**:
Increase the percentage of first-time in college, full-time, degree-seeking students retained to the third Fall at the same institution of initial enrollment by 2 percentage points from 49% in the Fall 2023 cohort (to Fall 2024) baseline level to 51% by Fall 2030.

**Indicator Name:**
Percentage point change of first-time in college, full time, degree-seeking students retained to the third fall at the same institution of initial enrollment at Louisiana State University Alexandria.

**Indicator LaPAS PI Code**: 24530

**Type and Level:** Outcome, Supporting

**Rationale**:
The postsecondary education system must be committed not only to recruiting and enrolling students, but also to retain them in school, thus preparing them for more productive lives.

**Use**:
Increased student retention within the Louisiana public postsecondary system contributes to an increase in the number of degree completers and consequently leads to a more educated citizenry.

**Clarity:**
This indicator tracks degree seeking first-time in college students enrolled full-time in credit courses as of the 14$^{th}$ class day of the fall semester. It does not reflect the total retention for the college.

**Validity, Reliability and Accuracy:**
Data will be retrieved from LSUA and/or from the Board of Regents' Statewide Student Profile System (SSPS).

**Data Source, Collection and Reporting:**
For this indicator, SSPS Fall data (the national standard) will be used.

**Calculation Methodology:**
This calculation is based on subtracting the respective retention rate from the Fall 2013 baseline year retention rate.

**Scope:**
This indicator is the aggregate of Louisiana State University Alexandria.

**Responsible for data collection, analysis, and quality**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses/systems to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?** No real weaknesses. The reader must understand that this indicator reflects retention at the same institution and does not include students who transfer to other institutions.

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## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: Louisiana State University Alexandria

**Objective II.3**:
Increase the graduation rate for baccalaureate degrees from the Fall 2024 baseline rate of 37% to 40% by Fall 2030.

**Indicator Name:**
Percentage of students enrolled at LSUA identified in a first-time, full-time, degree-seeking cohort, graduating within 150% of "normal" time of degree completion from the institution of initial enrollment, Louisiana State University Alexandria.

**Indicator LaPAS PI Code**: 24531

**Type and Level:** Output, Key

**Rationale**:
The postsecondary education system must be committed not only to recruiting and enrolling students, but also to retain them in school, thus preparing them for more productive lives. It is important for the further development of the state's economy that a higher percentage of students who enroll in college earn a degree.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
The indicator is calculated as a rate of the number of students in a cohort who graduate within the allotted time divided by the number of students in a cohort.

**Validity, Reliability and Accuracy:**
The student cohort data includes those students who entered a four-year institution six year earlier (three years for community colleges) and reflects how many and what percentage graduated from the original institution.

**Data Source, Collection and Reporting:**
The source of data is the Integrated Postsecondary Education Data System (IPEDS). Each campus is responsible for the reporting and reliability of the data reported to IPEDS.

**Calculation Methodology:**
Graduation Rate is calculated by dividing the number of first-time, full-time graduates to the original cohort.

**Scope:**
This indicator is the aggregate of Louisiana State University Alexandria.

**Responsible for data collection, analysis, and quality**
Each institution submits the data electronically to IPEDS.

**Caveats? Limitations or weaknesses? Does the source of the data have a bias or agenda?**
No real weaknesses. The reader must understand that this indicator reflects retention at the same institution and does not include students who transfer to other institutions.

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## PERFORMANCE INDICATOR DOCUMENTATION

Program: Louisiana State University Alexandria

**Objective II.4:**

Increase the total number of completers (all degrees and certificates) from a baseline of 1285 in the 2024-25 academic year (AY) to 1500 per year through the 2030-31 AY.

**Indicator Name:** Total number of completers.

**Indicator LaPAS PI Code**: 24533

**Type and Level:** Output, Key

**Rationale**:
The mission of the LSUA campuses is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
The indicator is calculated as the sum of unique Baccalaureate degrees completers at LSUA.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Statewide Completer System. This system has been in existence for over 25 years. The indicator will be reported for the prior academic year at the end of the fourth quarter.

**Data Source, Collection and Reporting:**
The source of data is the Board of Regents' Completers System. The BOR collects data on completers each July for the previous academic year.

**Calculation Methodology:**
This is a summary of a unique student count of completers (all degrees and certificates) at LSUA.

**Scope:**
This indicator is the aggregate of students at Louisiana State University Alexandria that receive a credential during the academic year.

**Caveats:**
Students may only be counted once per institution per award level within an academic year.

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## PERFORMANCE INDICATOR DOCUMENTATION

Program: Louisiana State University Alexandria

**Objective II.5:**
Increase the total number of adult completers (graduates over 25 years of age) in a given academic year (AY) from the baseline of 730 in the 2024-25 AY to 1000 per year through the 2030-31 AY.

**Indicator Name:** Undergrad Adult Completers 2 & 4 yr (unduplicated)

**Indicator LaPAS PI Code**: N/A

**Type and Level:** Output, Key

**Rationale**:
The mission of the LSUA campuses is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of adult completers will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
The indicator is calculated as the sum of unique adult completers at LSUA.

**Validity, Reliability and Accuracy:**
Data will be retrieved from the Board of Regents' Completer System. This system has been in existence for over 25 years. The indicator will be reported for the prior academic year at the end of the fourth quarter

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Completers System. The BOR collects data on completers each July for the previous academic year.

**Calculation Methodology:**
This is a summary of a unique student count of adult completers at LSUA. A student may be counted once.

**Scope:**
This indicator is the aggregate of adult (25 years of age or older) students at Louisiana State University Alexandria that graduate with a degree during the academic year.

**Caveats:**
Students may only be counted once per institution per award level within an academic year.

**Responsible Person:**

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## PERFORMANCE INDICATOR DOCUMENTATION

Program: Louisiana State University Alexandria

**Objective II.6:**

Decrease the average number of years to complete a baccalaureate degree from 5.8 years of the 2024-25 baseline academic year (AY) to 5 years by the 2030-31 AY.

**Indicator Name:** Average time to degree

**Indicator LaPAS PI Code**: N/A

**Type and Level:** Output, Key

**Rationale**:
The mission of the LSUA campuses is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Shortening the time of completion leads to more graduates entering the workforce or transitioning into other educational pipelines sooner. These gains in efficiency contributes to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
N/A

**Validity, Reliability and Accuracy:**
Data will be retrieved from LSUA's Student Information Management System (SIS), and will undergo internal data validation procedures.

**Data Source, Collection and Reporting:**
Data will be retrieved from LSUA's Student Information Management System (SIS) and reported annually as part of LSUA's annual quality improvement assessment.

**Calculation Methodology:**
The calculation is based on the average number of years students take to complete a baccalaureate degree.

**Scope:**
This indicator reflects the average time to complete a baccalaureate degree at Louisiana State University Alexandria that graduate with a degree during the academic year.

**Caveats:**
N/A

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# Louisiana State University at Eunice

# Strategic Plan
# FY 2026-2027 through FY 2030-2031

**Revised**
July 1, 2025

**Louisiana State University at Eunice**
**2026-2027 through 2030-2031 Strategic Plan**

## Overview

Louisiana State University at Eunice is engaged in a comprehensive Strategic Planning Initiative that is documented at www.lsue.edu/institutional-effectiveness/planning. It is expected to be completed in the 2025-2026 academic year. A previous attempt began in 2020. It was delayed by recovery from the pandemic and the selection of a new President of the Louisiana State University system, Dr. William F. Tate IV in 2021. The LSU system began its own strategic planning which resulted in *Scholarship First: The Strategic Planning Framework*, completed in March 2024. LSU Eunice began work on its 10-year SACSCOC Reaffirmation Plan in 2022 which concluded in December 2024 with Reaffirmation with no findings. The Vision and Mission statements below are undergoing revision and a new strategic plan will be presented to the LSU Board of Supervisors in the 2025-2026 year. From 2020 to present, LSU Eunice has experienced dramatic enrollment growth; led a rapid expansion of the Allied Health Division; created a Student Success and Integrated Learning Center; been selected as a Rural Cohort Institute by Achieving the Dream (ATD™) and is currently in two capital campaigns that have been funded by the Legislature which are 1) a new baseball stadium (Bengal Stadium) and 2) the STEAM (Science Technology Engineering Agriculture and Mathematics) Innovation Center which will house current and future academic and workforce programs. LSU Eunice continues to have transfer and six-year graduation rates (of those transfer students) that far exceed national standards and out performs many four-year universities. Ninety percent of LSUE graduates continue to live and work in Louisiana 10 years after graduation.

## Vision Statement:

To establish LSU Eunice as the model comprehensive two-year college in Louisiana through a total institutional commitment to quality, "state-of-the-art" education and student success in: degrees, transfer preparation, career education, adult/workforce education and customized business/industry training

## Mission Statement:

The purpose of Louisiana State University Eunice is to serve the needs of its constituency in keeping with the mission of the overall Louisiana State University. Specifically, LSU Eunice seeks to provide programs and services normally associated with a comprehensive two-year college. Accordingly, the role, scope, and mission statement for LSU Eunice, as promulgated in the "LSU at Eunice Strategic Plan: Blueprint for the Future" and approved by the LSU Board of Supervisors is as follows:

Louisiana State University Eunice, a campus of Louisiana State University, is a comprehensive, open admissions institution of higher education. LSUE is dedicated to high quality, low-cost education and is committed to academic excellence and the dignity and worth of the individual. To this end, Louisiana State University Eunice offers associate degrees, technical diplomas, certificates, and continuing education programs as well as transfer curricula. Its curricula span the liberal arts, sciences, business and technology, pre-professional, and professional areas for the benefit of a diverse population. All who can benefit from its resources deserve the opportunity to pursue the goal of lifelong learning and to expand their knowledge and skills at LSU Eunice.

In fulfillment of this mission, Louisiana State University Eunice strives to achieve the following:

1. Encourage traditional and nontraditional populations to take advantage of educational opportunities.
2. Create a learning environment which facilitates the integration of knowledge and the development of the whole person.
3. Provide a general education which requires all students to master the skills and competencies necessary for lifelong learning.
4. Provide programs which parallel four-year college and university courses which are directly transferable.
5. Prepare students to meet employment opportunities as determined by regional needs.
6. Prepare programs of developmental studies which will upgrade student skills to the levels necessary for successful college experience.
7. Provide the necessary support services to help students realize their maximum potential.
8. Create and offer programs of Continuing/Adult Education and community service which respond to the needs of the area.

LSU Eunice will continue to serve the educational and cultural needs of its service area by offering necessary certificate and associate degree programs. Since high quality technical programs are crucial to economic development, LSU Eunice will continue to expand its relationship with local business and industry to identify area workforce needs. The institution will also work closely with four-year colleges in the area to further increase matriculation opportunities for its students. Public service activities will be undertaken to meet the needs of the service area and to raise the level of education and improve the quality of life for area citizens.

## Philosophy Statement

Louisiana State University Eunice is committed to the principle that individuals should have the opportunity to develop themselves through education commensurate with their capabilities and interests. To this end, LSUE strives to provide educational programs and related services which reflect and respond to the diversified interests, aptitudes, talents, needs, and goals of its constituency.

## Strategic Goals

To serve the citizens of Louisiana and position the University strategically, LSU Eunice seeks to:

1. Ensure student access
2. Strengthen student success
3. Expand partnerships
4. Demonstrate a culture of continuous improvement

**Goals and Objectives:**

## I. Goal: Increase Opportunities for Student Access and Success

**Objective I.1.** **Increase the fall headcount enrollment 10.40% from Fall 2023 baseline of 3623 to Fall 2030 of 4000.**

Link to State Outcome Goals: Youth Education, Better Health, Diversified Economic Growth, and Transparent, Accountable and Effective Government

**Strategy I.1.1:** Implement the LSUE Strategic Enrollment Plan.
**Strategy I.1.2:** Strengthen partnership with Louisiana State University at Alexandria.
**Strategy I.1.3:** Strengthen the LSU Pathway Referral program.
**Strategy I.1.4:** Strategically expand online enrollments through partnership with LSU Online.
**Strategy I.1.5:** Expand dual and cross enrollment agreements with public school districts and among postsecondary institutions.
**Strategy I.1.6:** Develop a plan to recruit and retain non-traditional students.

**Performance Indicators:**

Output: Number of students enrolled in fall (as of 14th day) in LSU at Eunice

Outcome: Percent change in the number of students enrolled in fall (as of 14th day) in LSU at Eunice

**II. Goal: Ensure Quality and Accountability**

**Objective II.1: Increase the percentage of first-time in college, full-time, associate degree-seeking students retained to the second Fall at the same institution of initial enrollment by 2.0 percentage points from the Fall 2023 cohort (to Fall 2024) baseline level of 52.42% to 54.42% by Fall 2031 (retention of Fall 2030 cohort).**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

**Strategy II.1.1:** Implement the LSUE Strategic Enrollment Plan.
**Strategy II.1.2:** Develop and implement comprehensive curricular revision of catapult courses through the Meauxmentum Framework,

**Strategy II.1.3:** Expand early alert and academic support initiatives.
**Strategy II.1.4:** Provide at-risk students resources for meaningful assistance/planning.
**Strategy II.1.5:** Strengthen higher education partnerships by insuring quality 2+2 programs, articulation transfer agreements and internship opportunities
**Strategy II.1.6:** Refine the strategic communication plan to encourage existing students to enroll in the upcoming semester.

**Performance Indicators:**

Output: Percentage of first-time, full-time, associate degree-seeking freshmen retained to the second year at the same institution within LSU at Eunice.
Outcome: Percentage of first-time, full-time, associate degree-seeking freshmen retained to the second year at the same institution within LSU at Eunice.

**Objective II.2:** **Increase the institutional statewide graduation rate (defined as a student completing an award within 150% of "normal time") from the baseline rate (Fall 2017 Cohort for all institutions) of 27.41% 2.0 percentage points to 29.41% by 2030-2031 (Fall 2025 cohort).**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

**Strategy II.2.1:** Implement a process to maximize upward transfer to LSU and other four-year institutions.

**Strategy II.2.2:** Implement a user-friendly degree audit tracking system.

**Strategy II.2.3:** Maximize a course rotation and delivery options to ensure students have access to a robust number of courses during the annual schedule.

**Strategy II.2.4:** Utilize Competency Based Education, Advance Placement, CLEP, and Prior Learning Assessment to help students earn the maximum number of courses per year.

**Strategy II.2.5:** Evaluate and improve mentoring, tutoring, and advising policies.

**Strategy II.2.6:** Expand pathway opportunities for students to complete stackable academic credentials.

**Performance Indicators:**

Output: Percentage of students enrolled at a **2-Year** institution identified in a first-time, full-time, degree seeking cohort, graduating within 150% of "normal" time of degree completion from the institution of initial enrollment

Outcome: Number of students graduating at a **2-Year** institution identified in a first-time, full-time, degree seeking cohort, graduating within 150% of "normal" time of degree completion from the institution of initial enrollment

**Objective II.3:** **Increase the total number of 1-year Certificate completers in a given academic year from the baseline year number of 283 in 2023-2024 to 400 in 2030-2031. Students may only be counted once per award level.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

**Strategy II.3.1:** Align certificate programs directly to workforce and degree completion.
**Strategy II.3.2:** Target adult and non-traditional populations for certificate pathways.
**Strategy II.3.3:** Identify mandated industry certifications and align those certificates with state and national needs.

**Performance Indicators:**

Output: Total number of completers for 1-year Certificate award level.
Outcome: Percent change in number of completers for 1-year Certificate award level at Louisiana State University at Eunice from the baseline year.

**Objective II.4:** **Increase the total number of Associate completers in a given academic year from the baseline year number of 318 in 2020-21 to 368 in AY 2025-2026. Students may only be counted once per award level.**

Link to State Outcome Goals: Youth Education, Better Health, and Diversified Economic Growth

**Strategy II.4.1:** Implement a First-Year Experience within the Meauxmentum Framework.
**Strategy II.4.2:** Integrate national best practices into the LSUE advisement model.
**Strategy II.4.3:** Develop co-curricular and service-learning opportunities for traditional, commuter, and distance learning students.
**Strategy II.4.4:** Expand the early alert process and academic support for at risk students.

**Performance Indicators:**

Output: Total number of completers for Associate award level at Louisiana State University at Eunice.
Outcome: Percent change in number of completers for Associate award level at Louisiana State University at Eunice from the baseline year.

**Louisiana State University at Eunice**
**2026-2027 through 2030-2031 Strategic Plan**

*In Compliance with Act 1465 of 1997, each strategic plan must include the following process:*

## I. A brief, general description of how the strategic planning process was implemented.

Strategic planning at LSUE is guided by the overall goals and objectives of LSU and focuses on how LSUE can improve enrollment, retention, transfer and meet the needs of workforce. Senior leadership reviewed past performance indicators and developed the benchmarks necessary to achieve future growth and meet the needs of our constituencies.

## II. A brief statement identifying the principal clients and users of each program and the specific service or benefit derived by such persons or organizations:

Louisiana State University at Eunice is LSU's only two-year institution that provides access to and is vertically integrated with the flagship campus. LSUE is open admission and offers associate degrees, certificates, and continuing education programs as well as transfer curricula. Its clients include all Louisiana citizens who desire access to an LSU education. LSUE provides economic benefit to business and industry and to the State of Louisiana by developing a skilled workforce and producing high quality transfer students to four-year universities.

## III. An identification of potential external factors that are beyond the control of the entity and that could significantly affect the achievement of its goals or objectives:

Louisiana High School/College Going Rate
Competition among post-secondary institutions will likely increase as the traditional market shrinks. This market may have a negative influence on LSUE's ability to attract first-time, full-time in college students. Following the pandemic, all four-year universities in Louisiana lowered the requirements for admission to maintain enrollment. This had a negative effect in the number of traditional first-time, full-time students applying to LSUE.

Louisiana State Funding/Appropriations
As the state legislature and governmental leadership work to address revenue availability and priorities, higher education in general has experienced reduced appropriations while working to increase enrollment and degree completion metrics. While the 2024 and 2025 legislative sessions have been positive for LSU Eunice, it is challenging to reverse the effects of the cumulative funding cuts (since 2009) to date. The potential for future further reductions in state appropriations will curtail progress and will place an already financially fragile university at risk. LSU Eunice is under resourced, despite performance, in comparison to the two year colleges in the LCTCS system.

Federal Policies
National higher education policy has a direct impact on colleges and universities within each state. Various accountability and compliance measures require unfunded mandates to colleges and universities. Future federal legislation may have a greater negative impact on institutions in order to maintain compliance with federal guidelines.

## IV. The statutory requirement or other authority for each goal of the plan.

The following statutory requirements and authorities are applicable to all the goals below: Master

Plan for Public Postsecondary Education, Board of Regents, State of Louisiana, March 2001, p.29; Louisiana Constitution of 1974, Article 8, §7; Louisiana Revised Statutes, 17:3216; Reaffirmation of Accreditation, Southern Association of Colleges and Schools, Commission on Colleges, 2014; Minutes, Louisiana State University Board of Supervisors, October 24, 1991; United States District Court, Eastern District of Louisiana, Civil Action Number 80-3300, Section "A," p.3 and pp. 20-23.

**V. A description of any program evaluation used to develop objectives and strategies.**

LSUE maintains an ongoing cycle of planning and evaluation for the purposes of tracking institutional effectiveness and program improvement. Strategic planning utilizes information gathered in the annual reporting of progress made in achieving the learning and performance outcomes established in the planning process. LSUE's *Strategic Plan FY2026-2027 through FY2030-2031* was derived in part from LSU's Strategic Plan and is included in the overall goals and objectives for the entire LSU academic enterprise.

**VI. An explanation of how duplication of effort will be avoided when the operations of more than one program are directed at achieving a single goal, objective, or strategy.**

For the purposes of Act 1465 of 1997, the Louisiana State University at Eunice is a single program. Duplication of effort of more than one program is thus not applicable.

**VII. Documentation as to the validity, reliability, and appropriateness of each performance indicator, as well as the method used to verify and validate the performance indicators as relevant measures of each program's performance.**

See Performance Indicator Documentation attached for each performance indicator.

**VIII. A description of how each performance indicator is used in management decision making and other agency processes.**

See Performance Indicator Documentation attached for each performance indicator.

**Person Responsible for completing this plan:**

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## PERFORMANCE INDICATOR DOCUMENTATION

**Program**: Louisiana State University at Eunice

**Goals and Objectives:**

### I. Goal: Increase Opportunities for Student Access and Success

**Objective I.1**:
**Increase the fall headcount enrollment 10.4% from Fall 2023 baseline of 3623 to Fall 2030 of 4000.**

**Indicator Name:**
Number of students enrolled in fall (as of 14th day) in the Louisiana State University at Eunice

**Indicator LaPAS PI Code**: 15171

**Type and Level:** Output, Key

**Rational, Relevance, Reliability**:
Recognition of the importance of Louisiana having educated citizens.

**Use**:
Enrollment drives many management decisions. The size of an institution's enrollment impacts scheduling, hiring, future planning, program demands, facilities management, etc.

**Clarity:**
Headcount enrollment refers to the actual number of students enrolled (as opposed to full-time equivalent enrollment (FTE) which is calculated from the number of student credit hours enrolled divided by a fixed number)

**Data Source, Collection and Reporting:**
SSPS data is gathered twice annually, in the Fall and Spring. For this indicator, Fall data (the national standard) will be used. The indicator will be reported at the end of the third quarter. This will allow time for collection, aggregation, and editing of the data. Data will be retrieved from the Board of Regents Statewide Student Profile System (SSPS). This system has been in existence for over 25 years.

**Calculation Methodology:**
The standard method practiced nationwide for reporting headcount enrollment is as of the 14th class day of the semester (9th class day for quarter systems). The Regents SSPS is a unit record system where each enrolled student, regardless of course load, is counted.

**Scope:**
This indicator is reported for LSU at Eunice only.

**Caveats:**
No real weaknesses. The reader must understand that this indicator reflects headcount enrollment and is not the enrollment calculation used for funding or reimbursement calculations.

**Accuracy, Maintenance, Support:**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

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## PERFORMANCE INDICATOR DOCUMENTATION

**Program:** Louisiana State University at Eunice

**Goals and Objectives:**

**II. Goal: Ensure Quality and Accountability**

**Objective II.1**:
Increase the percentage of first-time in college, full-time, associate degree-seeking students retained to the second Fall at the same institution of initial enrollment by 2.0 percentage points from the Fall 2023 cohort (to Fall 2024) baseline level of 52.42% to 54.42% by Fall 2031 (retention of Fall 2030 cohort).

**Indicator Name:**
Percentage of first-time in college, full-time, associate degree-seeking students retained to the second fall at the same institution of initial enrollment in the Louisiana State University at Eunice

**Indicator LaPAS PI Code**: 24582

**Type and Level:** Output, Key

**Rational, Relevance, Reliability**:
The post-secondary education system must be committed not only to recruiting and enrolling students, but also to retain them in school, thus preparing them for more productive lives.

**Use**:
Increased student retention within the Louisiana public postsecondary system contributes to an increase in the number of degree completers and consequently leads to a more educated citizenry.

**Clarity:**
This indicator tracks associate degree seeking first-time in college students enrolled full-time in credit courses as of the 14th class day of the fall semester. It does not reflect the total retention for the college.

**Data Source, Collection and Reporting:**
SSPS data is gathered twice annually, in the Fall and Spring. For this indicator, Fall data (the national standard) will be used. The indicator will be reported at the end of the third quarter. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This number is calculated using the institutional classified cohort of associate degree seeking, first-time in college, full-time, students in a given fall which re-enroll the following fall semester at the same institution. The number of students found re-enrolled will be divided by the number of students in the cohort to obtain a retention percentage.

**Scope:**
This indicator is reported for LSU at Eunice only.

**Caveats:**
No real weaknesses. The reader must understand that this indicator reflects retention at the same institution and does not include students who transfer to other institutions.

**Accuracy, Maintenance, Support:**
Each institution submits the SSPS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SSPS.

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## PERFORMANCE INDICATOR DOCUMENTATION

**Program:** Louisiana State University at Eunice

**Objective II.2**:
Increase the institutional statewide graduation rate (defined as a student completing an award within 150% of "normal time") from the baseline rate (Fall 2017 cohort) of 27.19% 2.0 percentage points to 29.19% by 2030-2031 (Fall 2025 cohort).

**Indicator Name:**
Percentage of students enrolled at a **2-Year** institution identified in a first-time, full-time, degree seeking cohort, graduating within 150% of "normal" time of degree completion from the institution of initial enrollment

**Indicator LaPAS PI Code**: new

**Type and Level:** Output, Key

**Rational, Relevance, Reliability**:
The post-secondary education system must be committed not only to recruiting and enrolling students, but also to retain them in school, thus preparing them for more productive lives. It is important for the further development of the state's economy that a higher percentage of students who enroll in college earn a degree.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
The indicator is calculated as a weighted composite of each campus's number of graduates. Each campus will report their individual graduation rate, while the systems will report an aggregate rate.

**Data Source, Collection and Reporting:**
The source of the data is the National Center for Education Statistics (NCES) Graduation Rate Survey (GRS). Each campus is responsible for the reporting and reliability of the data reported to NCES.

**Calculation Methodology:**
Graduation Rate is calculated by dividing the number of first-time, full-time graduates to the original cohort.

**Scope:**
This indicator is reported for Louisiana State University at Eunice only.

**Caveats:**
No real weaknesses. The reader must understand that this indicator reflects retention at the same institution and does not include students who transfer to other institutions.

**Accuracy, Maintenance, Support:**
Each institution submits the SCS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SCS.

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## PERFORMANCE INDICATOR DOCUMENTATION

**Program:** Louisiana State University at Eunice

**Objective II.3:**
Increase the total number of 1-year Certificate completers in a given academic year from the baseline year number of 283 in 2023-2024 to 400 in AY 2030-2031. Students may only be counted once per award level.

**Indicator Name:** Total number of 1-year completers.

**Indicator LaPAS PI Code**: new

**Type and Level:** Output, Key

**Rational, Relevance, Reliability**:
The mission of the LSU at Eunice is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
The indicator is calculated as a cumulative composite of each campus's degrees awarded.

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Completers System. The BOR collects data on completers each July for the previous academic year.

**Calculation Methodology:**
This summary of a unique student count of completers for each award level offered at the institution.

**Scope:**
This indicator is reported for LSU at Eunice only.

**Caveats:**
The award must be recognized by the Regents and included in the institutions' Curriculum inventory. Students may only be counted once per institution per award level within an academic year.

**Accuracy, Maintenance, Support:**
Each institution submits the SCS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SCS.

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## PERFORMANCE INDICATOR DOCUMENTATION

**Program:** Louisiana State University at Eunice

**Objective II.4:**
Increase the total number of Associate completers in a given academic year from the baseline year number of 398 in 2023-2024 to 540 in AY 2030-2031. Students may only be counted once per award level.

**Indicator Name:** Total number of completers for the associate level.

**Indicator LaPAS PI Code**: new

**Type and Level:** Output, Key

**Rational, Relevance, Reliability**:
The mission of the LSU at Eunice is to produce well prepared graduates for Louisiana and the nation.

**Use**:
Increasing the number of graduates will lead to a more educated citizenry and as a result will contribute to higher incomes, greater economic productivity, and improved quality of life for Louisiana.

**Clarity:**
The indicator is the total number of students awarded degrees as the associate level. Students may only be counted once per institution per award level within a fiscal year.

**Data Source, Collection and Reporting:**
The source of the data is the Board of Regents' Completers System. The BOR collects data on completers each July for the previous academic year. The indicator will be reported at the end of the fourth quarter for the prior fiscal year. This will allow time for collection, aggregation, and editing of the data.

**Calculation Methodology:**
This indicator is a unique student count of completers for the associate award level offered at the institution.

**Scope:**
This indicator is reported for LSU at Eunice only.

**Caveats:**
The award must be recognized by the Regents and included in the institutions' Curriculum inventory. Students may only be counted once per institution per award level within an academic year

**Accuracy, Maintenance, Support:**
Each institution submits the SCS data electronically to the Board of Regents. The Board of Regents performs numerous edits and works with the campuses to correct errors. When all campus submissions are complete, the BOR's staff builds a master file for SCS.

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# LOUISIANA SOLUTIONS GLOBAL IMPACT

## THE LSU AGRICULTURE STRATEGIC VISION TO SECURE OUR FUTURE

LSU AgCenter
Research · Extension · Teaching

LSU
College of Agriculture

# Table of Contents

# INTRODUCTION

LSU Agriculture is composed of the LSU AgCenter and College of Agriculture (COA). This exceptional research, extension and teaching enterprise seeks to position LSU as one of the top agricultural institutions in the country. This document serves as an integrated planning instrument articulating our strategic vision to attain national and international prominence and impact. It defines strategic goals and aspirational targets, and details the tools, talent and culture needed to achieve success. The vision is elegant: Providing solutions to Louisiana challenges will generate transformational global impact for production agriculture, natural resource stewardship, human health and community well-being. In short, our strategic vision is to secure our future through **Louisiana Solutions, Global Impact**.

This bold vision requires that we unleash the potentially explosive strength of our interconnected research, extension and educational ecosystem. We must rethink multi-institutional partnerships to facilitate discovery at scale. Industry collaborations must be radically expanded, innovating together for the common good. Unprecedented federal and state investment in transformational ideas and infrastructure must be attracted. We must be national leaders in extension, expanding on emerging communication modalities and assessing uptake and impact with novel and rigorous methods. Leveraging these expanded tools to become world-class in our core proficiencies, we must change the scale at which we educate the next generation of agricultural innovators and leaders to secure our future.

This document serves as a playbook to realize this vision. LSU Agriculture drives significant innovation, talent development and economic growth for Louisiana and beyond. The AgCenter maintains a cooperative extension presence in all 64 parishes in the state; has 14 active experiment stations; a large complement of specialized research labs, centers and institutes; and approximately 1,000 employees. In keeping with the Morrill Act of 1862, the AgCenter and College of Agriculture offer high-quality educational engagement to learners from all walks of life to improve socioeconomic development, with the College of Agriculture conferring more than 400 degrees annually. This enterprise is threaded together by a common mission and a data-driven decision-making culture upholding the principles of access, opportunity and success for all our constituents. Evidence-based practices in research, extension and teaching elevate our ability to deliver exceptional impact and value.

This vision is designed to align with the LSU Scholarship First Strategic Framework. There is enormous potential to improve conditions in the state and beyond if we leverage complementary strengths with other parts of the LSU system as the Statewide University. This approach also illuminates the critical role that our people, infrastructure, relationships and culture play in achieving excellence. Attaining the lofty goals delineated in this plan will yield an agricultural enterprise among the strongest and highest-performing in the country. The resulting innovation, talent development and economic growth ecosystem will tangibly enhance the quality of life across Louisiana and beyond, providing **Louisiana Solutions, Global Impact**, and securing our future.

# FOUNDATIONAL ELEMENTS

## Value Alignment

Organizational values serve as an internal architecture binding dissimilar parts together into a cohesive and functioning whole. Prior versions of LSU Agriculture strategic plans delineate values that closely map to the values laid out in the Scholarship First Strategic Framework. We, therefore, have ongoing congruence in foundational values supporting our work.

| Scholarship First | Existing LSU Agriculture Value Statements |
|---|---|
| Seek Truth | Seek intellectually and culturally diverse perspectives. |
| Embody Integrity | Enhance the lives of others. |
| Empower Excellence | Create bold and transformative educational experiences. |
| Engage in Service | Advance the land-grant mission. Cultivate a community of engaged partners. |

## Vision and Mission

The vision for LSU Agriculture is to secure our future through **Louisiana Solutions, Global Impact**. Realizing this vision will elevate us to national and international leadership, as signified by the National Science Foundation (NSF) ranking and elite reputational standing in the field. The mission of LSU Agriculture is to **Innovate. Educate. Improve Lives.**, impacting citizens served in Louisiana and beyond.

## *Strategic Goals*

The strategic goals for LSU Agriculture acknowledge our foundation in the land-grant system and prioritize serving the state, providing exportable solutions (**Louisiana Solutions, Global Impact**). To secure our future, we seek to:

**Increase agricultural production and enhance the conservation of Louisiana's natural resources** by developing talent, technologies, products and practices.

**Provide programming and solutions to strengthen rural communities** and ensure economic prosperity, a healthy population and flourishing institutional structures.

Identify incentives and programs to place much-needed professional services in rural communities **supporting local and state decision-makers and enhancing community resilience**.

**Collect and analyze data to identify opportunities and strategies for market growth**, ultimately strengthening food and fiber production capacity.

**Expand the talent pipeline** through youth development, Ag Leadership and college academic and workforce development programming that returns talent to rural communities in Louisiana.

**Support small business startups and workforce development** through FOODii, the Seafood Safety Lab, Industry Based Credential programs, our intellectual property commercialization program, and other mechanisms.

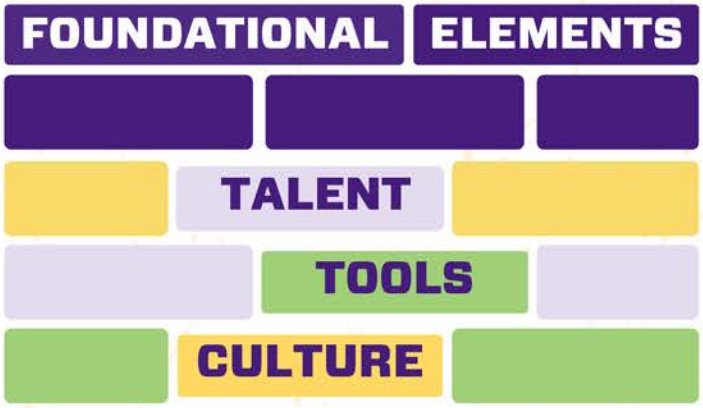
## Aspirational Targets

As a core element of the LSU Pentagon of Priorities, LSU Agriculture occupies a central role in realizing the Scholarship First vision for the Statewide University. In order to achieve the above-stated goals, a set of ***Aspirational Targets*** are critical. When achieved, LSU Agriculture will be actively meeting and exceeding the goals and key performance indicators (KPIs) laid out in the rest of this document. They include:

| | |
|---|---|
| **8% ANNUAL INCREASE RESEARCH** | **Increase average research expenditures by 8% annually.** |
| **1.7M EDUCATIONAL CONTACTS** | **Reach 1.7 million extension educational contacts annually, coupled with uptake and behavioral change rates among the top 10% in the nation.** |
| **ENGAGE 4-H & FFA** | **Engage 150,000 4-H and FFA program participants.** |
| **GROW ENROLLMENT** | **Grow College of Agriculture undergraduate enrollment to 2,000 students and graduate enrollment to 450 students.** |
| **$12M FUNDRAISING** | **Support research, extension and teaching excellence by securing $12 million annually in philanthropic donations.** |
| **TOP 10 AG SCIENCES** | **Achieve Top 10 university ranking in agricultural sciences research expenditures.** |

When we successfully achieve these goals, LSU Agriculture will be a model within the U.S. land-grant university system. As a top producer of rice, sugar, forestry products and other critical commodities, Louisiana agriculture is essential to national agricultural stability and success. For the people we serve, we will have helped Louisiana growers fulfill their role in providing a consistent, low-cost food and fiber supply and improved community health and resilience, securing our future.

## *Foundation and Pillars of Excellence*




Foundational inputs are required to achieve these goals and aspirational targets, including:

- *talent* (people)
- *tools* (facilities, equipment, collections and computation, brand, partnerships and relationships)
- and *culture* (a focus on people, excellence and success).

These foundational elements support exceptional work in our three pillars of excellence (research, extension and academics), fostering individual accomplishment and distinction and facilitating the development of highly impactful teams that drive us toward national prominence.


The following sections articulate the specific key performance indicators (KPIs) for each area of excellence. They also articulate how the foundational inputs are necessary to achieve our aspirational targets, and ultimately to attain our overall strategic goals.

# RESEARCH EXCELLENCE

While all research and scholarly activity conducted under the auspices of the AgCenter and College of Agriculture are mission-aligned, exceptional research organizations focus on their premier research proficiencies. LSU Agriculture has identified several areas where we are best positioned to address challenges to the future of production agriculture, natural resource stewardship, human health and community resilience. These areas clearly articulate our aforementioned goals and align with federal and state agency priorities. The current delineation of the focal areas of excellence includes the following:

## *Soil Health, Land and Water Management*

Land and water are vital natural resources for agricultural production. Research activities focus on identifying best management practices that promote soil health while conserving land and water resources.

## *Crop Genetics, Plant Breeding and Plant Health*

Feeding growing populations is placing increasing demands on crop productivity. This population growth, coupled with the impacts of more frequent extreme weather events, is increasing the demand for solutions to increase crop performance. Research and innovation in crop genetics, plant breeding and plant health management are essential for ensuring food security, agricultural sustainability and the adaptation of crops to changing environmental conditions. Advances in these fields through our variety development programs have produced crops with improved yields, increased resistance to pests and diseases, and enhanced nutritional quality. Research activities focused on plant resistance to biotic and abiotic stresses, host-parasite interactions, etiology and epidemiology of plant diseases, sustainable management of pests and diseases, clean seed programs and plant diagnostics will deliver the answers to further enhance crop growth and productivity.

## *Invasive Species Management*

Invasive species can be plants, animals or other non-native living organisms. Invasives can have substantial adverse impacts on a wide range of areas, from the sustainability of agricultural production to the conservation and protection of critical natural resources. Research activities focus on detecting and identifying invasive species, estimating potential impacts and developing control measures to prevent environmental and economic losses from invasive species infestation.

## Precision and Digital Agriculture

Precision agriculture is a rapidly expanding area transforming traditional agricultural production and decision-making. Research activities focus on several areas, including traditional precision agriculture issues, high-throughput phenotyping, environmental and crop modeling, and precision animal agriculture.

## Livestock Production and Management

Livestock management encompasses a broad area of research ranging from basic research in animal biology to more applied research in commercial livestock production. Research activities include the biological, physical and social science problems associated with commercial livestock production and management.

## Aquatics and Wildlife Management

Louisiana is home to an incredible diversity of forestry, wildlife and fisheries habitats that provide critical ecological services, aesthetic and recreational benefits, and economic opportunities to residents and visitors alike. Research activities involve the management of animal and plant populations and the conservation of their habitats (e.g., soil, water, land, etc.), as well as technological innovations to preserve aquatic species. Natural resources management research aims to maintain ecosystem integrity while promoting sustainability.

## Nutrition, Health and Food Safety

Nutrition and food sciences make significant contributions to the food industry through research on food product development, processing and safety, as well as research and outreach on the beneficial nutritional impacts of healthy dietary practices. Research activities include basic and applied product development and processing research to enhance consumer product quality, food safety and research to improve the nutritional health and well-being of individuals and populations.

## Biofuels, Feedstocks and Bioproducts

Demand for alternative fuels and other products made from renewable sources continues to increase as a means of protecting the environment and conserving natural resources. Research activities focus on developing a range of bioproducts produced from renewable sources and evaluating suitable feedstocks as input into bioproduct production processes.

To achieve a Top 10 ranking in research and excel at achieving our other strategic goals, laserlike focus on the management of the overall research enterprise is critical. A variety of key performance indicators are relevant to the management of any research program. These include the following:

## Research KPIs

***Publications***

Key Performance Indicator

**R1: Annualized number of peer-reviewed publications per capita**

Publication in rigorously peer-reviewed academic journals remains the gold standard for all scholarly work. Research-active faculty are expected to maintain a regular stream of academically reviewed publications, prioritizing quality of scholarship over quantity. The number of peer-reviewed publications is tracked at the individual level through the annual review process and in the aggregate through standardized reporting systems.

***Citations***

Key Performance Indicator

**R2: Annualized number of citations**

The quality of publications is proxied by impact, primarily through citation counts. Citation patterns are discipline-specific and, hence, are tracked chiefly at the individual and disciplinary levels. Of note here is that credit should typically be given for positive citation counts, meaning a given study is regularly cited as advancing knowledge and understanding and not cited as an example of flawed scholarly work. Impact factors, H-indices and other similar measures serve as a guide for faculty in determining the highest-impact journals.

***Grant-Making***

Key Performance Indicators

**R3: Federal grant awards per research FTE**

**R4: Federal grant expenditures per research FTE**

**R5: Non-federal grant awards per research FTE**

**R6: Non-federal grant expenditures per research FTE**

Grant-making is a critical component of institutional rankings and is an essential element in driving STEM innovation and commercialization. Federal competitive grant awards that yield research expenditures take primacy and are routinely tracked at the individual, program/department, and unit levels.

***Books***

Key Performance Indicators

**R7: Number of University Press books per capita**

**R8: Number of trade books per capita**

Books, specifically peer-reviewed University Press books, are another indicator of high-quality scholarly productivity. Book production varies significantly by discipline and is less prominent in STEM disciplines than in the humanities. Individual faculty will be recognized for their contribution to disciplinary knowledge via book publication.

***Awards and Recognitions***

Key Performance Indicator

**R9: Number of awards and recognitions**

The organization has identified and circulated a detailed academic awards and recognitions list. Receipt of such awards signifies substantial accomplishment, reputational standing in the discipline and a degree of respect from peers that signifies exceptional scholarly accomplishment.

***Intellectual Property and Commercialization***

Key Performance Indicators

**R10: Number of disclosures**

**R11: Number of patents**

**R12: Number of startups**

**R13: Number of licenses**

**R14: Royalty income**

Intellectual property and commercialization are essential to the advancement of our research impact. Standard measures of these activities, as reported to the Association of University Technology Managers (AUTM), are tracked annually.

## Talent

Exceptional research and scholarly accomplishment require a deep talent pool to drive discovery and innovation. LSU Agriculture must continue to attract and recruit the best available talent from top-ranked R1 and Association of American Universities (AAU) schools. These premier thinkers attract significant research funding to support groundbreaking work, which is published as peer-reviewed articles and University Press books and subsequently highly cited by peers. The accumulation of such accomplishments yields nominations for significant awards and recognitions. Much of our talent is recruited into tenure-track faculty lines at the assistant professor level. Occasionally, the opportunity to make a transformational mid- or senior-level hire is presented, and where appropriate, the organization strives to capitalize on such opportunities. Additionally, exceptional research associates, post-doctoral researchers, non-tenure track researchers, and graduate and undergraduate scholars round out the talent pool, elevating our research productivity.

## Tools

As conducted under the auspices of the AgCenter and College of Agriculture, scholarly work requires many tools to ensure success. Included here are research station field sites, state-of-the-art laboratory space, modern equipment and instrumentation, and human capital infrastructure such as well-trained research associates, doctoral scholars and post-doctoral scholars. Moreover, institutional support tools such as properly designed, staffed, and functioning pre- and post-award offices, human resources, procurement, accounting and executive leadership functions are also essential to attain research excellence.

## Culture

Maintaining and accelerating a culture emphasizing and rewarding research accomplishment is a core requirement for success. This culture starts at the unit level and moves through the organization to the executive leadership level. A robust annual review process and a rigorous promotion and tenure process are necessary to achieve a research culture of excellence. This requires setting clear expectations at all levels regarding each individual's role and function relative to research success, from assistant professors to the executive leadership team. Establishing a set of institutional operating rules promoting the highest level of integrity in the conduct of exceptional research accomplishment, while amplifying every opportunity to succeed, is necessary. Promoting the pursuit of big ideas, collaboration and strategic investment in critical projects further characterizes a culture of research excellence.

# EXTENSION EXCELLENCE

The Louisiana Cooperative Extension Service (LCES) empowers individuals, families, and urban and rural communities through research-based education, innovative solutions and outreach programs fostering sustainable agricultural practices, youth development, healthy and resilient communities, economic prosperity and improved quality of life across Louisiana. There is a symbiotic relationship between the innovations derived from the research program and the translation of this work out to producers, consumers and communities. Research and extension are highly intertwined at LSU, and this is a primary strength of the design of our organization.

**Agriculture & Natural Resources**

**Youth Development**

**Nutrition & Community Health**

There are three signature programming areas for extension excellence. Agriculture and Natural Resources (ANR) programs focus on increasing the environmental and economic sustainability of agricultural production systems across the state. Key disciplines include agronomic crop production, forestry and natural resources, horticulture and livestock production. ANR extension initiatives are directly aligned with the research priority areas outlined above.

Youth development programs such as 4-H and FFA have a tremendous impact on the youth of Louisiana. These programs provide opportunities for young people to develop leadership skills, gain knowledge about agriculture and other industries and build relationships with peers and adults. Through these programs, youth learn essential life skills such as decision-making, communication and problem-solving. It is paramount that we meet youth where they are and develop market-applicable programs that allow youth to thrive in rural communities and urban centers throughout the state.

Nutrition and Community Health (NCH) extension programs are focused on empowering individuals, families and communities to embrace a healthy lifestyle and promote resilient community environments. NCH extension programs align with the various research priority areas, including Nutrition, Health and Food Safety. Our nutrition programs have a presence throughout the state, and we are working to establish healthy communities and partnerships through research-based nutrition education programs in rural and urban communities. In addition, the community resilience and health programs promote socioeconomic and infrastructural resilience to secure our future.

Like the research arena, several KPIs exist across all three extension program areas. These common KPIs include:

## Extension KPIs

Key Performance Indicators

**E1: Number of in-person programmatic contacts**

**E2: Number of online contacts**

**E3: Number of annual educational programs**

**E4: Rate of adoption of innovations**

**E5: Number of extension publications**

**E6: Number of internships**

Contemporary cooperative extension programming achieves impacts through in-person and online connectivity with stakeholders. A well-developed set of educational outreach programs supported by a significant publication portfolio is necessary to foster the adoption of innovations measured through assessment surveys. In addition, the next generation of extension personnel is exposed to this field of work through extension internships that train and develop the next generation of talent.

In addition, discrete sets of KPIs by program area acknowledge the nuances of delivering high-caliber extension programming across these distinct areas. These include:

***Agriculture and Natural Resources***

Key Performance Indicators

**E7: Number of Master Program graduates**

**E8: Number of field days/number of attendees**

**E9: Number of workshops**

**E10: Number of pesticide safety recertifications**

**E11: Number of on-farm demonstrations**

**E12: Number of Beef Quality Assurance (BQA) completions**

**E13: Number of conservation plans**

**E14: Community and school gardens**

ANR programming relies heavily upon traditional on-farm demonstrations, field days, workshops and recertification programs. Some ANR areas have specific “Master” level certifications that promote sound practices, while other programmatic areas rely on developing current-state conservation plans. All of these are critical for a high-functioning ANR extension program.

***4-H and FFA***

Key Performance Indicators

- **E15: Base enrollment**
- **E16: Enrichment numbers**
- **E17: Volunteers**
- **E18: Service-learning numbers**
- **E19: Industry-based credentials**
- **E20: Internships**

***Nutrition and Community Health***

Key Performance Indicators

- **E21: Documented positive change in health disparities**
- **E22: Documented changes in eating habits**
- **E23: EFNEP participants**
- **E24: SNAP participants**
- **E25: Number enrolled in Flavors of Health (FOH) curriculum**
- **E26: Healthy Communities initiatives**
- **E27: Farmers markets started**
- **E28: Complete Street plans finalized**
- **E29: Funding received for community and municipal partners**
- **E30: Policy System Environmental changes**

## Talent

Successfully implementing the LCES mission requires ongoing attention to recruiting, developing and retaining significant talent. Exceptionally well-trained extension faculty from top-ranked R1 and AAU agricultural schools will be the focus of searches for extension faculty. Beyond this, we seek to grow our talent pool further by establishing a network of community economic development programs statewide. In addition, enhancing a disaster response extension team for Louisiana will help ensure we fulfill our stated mission and achieve our goals.

## Tools

Funding is a critical part of the formula for a successful extension enterprise. The LCES will continue to increase federal, state and local funding to ensure ongoing development and delivery of exceptional programming. Ongoing efforts to improve web-based resources, another critical tool for program and information delivery, will continue and accelerate. Moreover, to capitalize on the rapid pace of technological development, the LCES will require integrating AI technology into extension programming in the coming years.

## Culture

Organizational culture is a critical component of extension programming, and ongoing, required professional development for all extension faculty is a foundational aspect of this culture. This sustainable professional development framework is essential to the long-term prosperity of the Cooperative Extension Service. As well, the geographically dispersed nature requires a communications culture adapted to this situation.

# ACADEMIC EXCELLENCE

The LSU College of Agriculture seeks to educate the next generation of innovators and leaders through credit-based academic programming. Offering a diverse complement of eight undergraduate degrees and 40 academic concentrations, the College of Agriculture strives to deliver cutting-edge learning experiences and state-of-the-art knowledge. Likewise, through 10 doctoral and 10 master's degree programs, graduate education in the College of Agriculture trains a national and international group of scientists and scholars who advance global agricultural interests and related industries by working on solutions to Louisiana challenges. Together, these programs serve as a substantial talent pipeline for Louisiana and beyond.

## DEPARTMENTS & SCHOOLS

AGRICULTURAL ECONOMICS & AGRIBUSINESS

AGRICULTURAL & EXTENSION EDUCATION & EVALUATION

ANIMAL SCIENCES

ENTOMOLOGY

EXPERIMENTAL STATISTICS

NUTRITION & FOOD SCIENCES

PLANT, ENVIRONMENTAL & SOIL SCIENCES

PLANT PATHOLOGY & CROP PHYSIOLOGY

RENEWABLE NATURAL RESOURCES

TEXTILES, APPAREL DESIGN & MERCHANDISING

Academic programming is grounded in the principles of affordability and accessibility for all students. This partly focuses on refining student recruitment strategies through data analysis. We routinely evaluate the success of outreach efforts, admission criteria and engagement initiatives to maximize opportunities for a broad range of prospective students, yielding heterogeneous learning communities. In addition, by raising and awarding scholarship funds, we seek to ensure accessibility for students from all socioeconomic circumstances. Physical accessibility to field trips, laboratory and classroom experiences for all students are a critical part of our curriculum and fully aligns with our emphasis on access. Finally, access to academic and career advising, mentoring, and co-curricular activities supporting leadership development, career readiness, first-year experiences, health and wellness, scholarship support, internships and student affinity groups are all intended to elevate the academic experience.

Ensuring high-quality academic programming is also critical to our success. Implementing a wide range of high-impact practices across the curriculum is intended to enhance the engagement of our students with their learning experience and challenge them to grow and excel. We therefore emphasize engagement with the agriculture residential college, undergraduate research experiences, internships, communication-intensive courses, service-learning courses and other recognized high-impact learning practices.

Readily accessible academic and career advising resources allow students to explore their interests and identify the intersection of their passions and aptitudes. With these support programs, we leverage data to identify areas for improvement in student success rates and implement targeted academic support programs.

By analyzing learning outcomes (e.g., retention and graduation, awards and recognitions, and job and graduate school placement) and adapting relevant support structures, we ensure that every student can excel academically, irrespective of background or prior experience. The outcomes associated with our data-informed access and opportunity approach focus on organizational and individual success. At the organizational level, graduation rates reflecting parity across subgroups of students are a primary indicator of success. In addition, regional or national recognition for student groups and programs points to organizational success. At the individual level, students recognized for outstanding academic performance through internal and external mechanisms (e.g., Dean's list; awards from professional associations) reflect success in our approach to student access and opportunity. Graduate school placement and job placement rates also serve as indicators of success for student engagement.

In summary, academic excellence encompasses affordability and accessibility in terms of maintaining a diverse complement of educational pathways, demonstrably high-quality learning experiences as referenced through the proliferation of American Association of Colleges and Universities (AAC&U) high-impact learning practices, and a properly functioning pipeline in terms of robust enrollments, retention and progression, graduation rates and post-graduation placements.

## Academic KPIs

***Affordability***

Key Performance Indicators

**A1: Annual scholarship dollars awarded**

**A2: Average time to degree completion**

To achieve academic excellence, the agricultural educational experience must first be affordable. Given the baseline tuition and fee requirements set at the institutional level, the College of Agriculture's effort to ensure affordability includes increasing scholarship availability and the dollar value. In addition, costs can be reduced by minimizing the time required to complete the degree. Scholarship dollars will be tracked at the college level. Time to completion will be tracked at the college and the programmatic level. Timely completion is a de facto cost-saving measure.

***Accessible Pathways***

Key Performance Indicators

**A3: Number of undergraduate concentrations**

**A4: Number of online degree programs**

Accessibility is defined here in two ways. The first is having an appropriate number of degrees and concentrations to meet the needs of students and serve industry needs for workforce development. This annualized measure is tracked at the college level. It is not subject to an expectation for an annualized increase but rather an ongoing tracking, benefitting from consultation with appropriate industry partners. Examples of accessibility in current programming include core programming in natural resources, plant and animal management, nutrition and food safety, economics and agribusiness, and value-added processing. The second measure indicates our ability to serve non-traditional students through asynchronous online delivery. The future state of the College of Agriculture will entail remote delivery of undergraduate and graduate programs to meet evolving industry and labor market needs, as well as the needs of a diverse base of learners.

***Quality Experiences – High-Impact Practices (HIPs)***

Key Performance Indicators

**A5: Proportion of course sections delivered offering HIPs**

**A6: Enrollment in HIPs/proportion of graduating students exposed to each HIP**

The primary way we measure the quality of educational experiences is through the implementation of HIPs as defined by the AAC&U. The implementation of these practices is measured at the college level and includes the number of course sections and students engaging in HIPs. The College of Agriculture typically offers an array of HIP options, including first-year seminars, communication-intensive courses, learning communities through the Agriculture Residential College, internships, undergraduate research experiences, service learning and community-based learning, global learning through an international emphasis on courses or study abroad and the like.

***Undergraduate Enrollment, Retention and Graduation***

Key Performance Indicators

**A7: Undergraduate enrollment**

**A8: Second, third and fourth year retention rate**

**A9: Undergraduate four-year graduation rate**

**A10: Undergraduate six-year graduation rate**

We embrace another widely used set of indicators of academic excellence that include rates of enrollment, year-over-year retention and graduation rates. The LSU Office of Enrollment Management primarily controls undergraduate enrollments; however, the College of Agriculture recruitment office can influence college-level recruitment strategies. Given that graduation rates are more directly influenced by college, department, and program-level practices, tracking retention rates after students enter the College of Agriculture is essential.

### Academic KPIs

***Graduate Training***

Key Performance Indicators

**A11: Graduate student enrollment**

**A12: Graduate student time to degree completion**

**A13: Graduate student placement**

Graduate student success is a core part of our plan for demonstrating excellence in the academic, research, and extension realms. To this end, we set five-year Ph.D. student enrollment growth goals and began tracking graduate student time to completion and placement. Support for doctoral students comes primarily from extramurally funded faculty research programs, and growth in graduate student enrollments is corollary to growth in the research program.

## *Undergraduate and Graduate Student Talent*

The talent required to elevate these KPIs includes adequate development personnel to continually raise scholarship dollars and personnel to manage the awarding of scholarship dollars. Additionally, time to degree completion is influenced by appropriate staffing for student advising and success functions and appropriate instructional capabilities at the departmental level to ensure an acceptable cadence of curricular offerings.

Supporting a heterogeneous graduate student program requires faculty expertise to teach state-of-the-art subjects. We maintain this talent pool through ongoing deliberative hiring processes, ensuring alignment between teaching, research and extension needs. Moreover, a high-quality educational experience requires instructional faculty steeped in their discipline's subject matter and pedagogical best practices. Maintaining current-state and forward-leaning academic programming also requires industry counsel, and departments, therefore, need appropriate ties to industry through professional association participation, unit-level industry councils and the like.

A top-flight recruitment team within the College of Agriculture that works closely with Enrollment Management to enroll the most promising and committed students underlies success in the enrollment metrics. High-caliber student service professionals in the College of Agriculture and appropriately trained faculty advisors housed in the academic departments work to ensure progress on retention and graduation rates. In addition, premier student-centered academic programming and pedagogical delivery that cultivate passion and deep engagement with the subject matter are provided by the faculty as a mechanism that further invests students in the completion project.

Additionally, we realize that appropriate support and professional development resources are needed for faculty to realize maximum performance. The College of Agriculture is committed to faculty development based on performance metrics. Through a data-driven approach, we identify opportunities for growth, recognize achievements and provide resources to support continuous improvement, contributing to a faculty community that excels in core mission areas of teaching, research and extension. Appropriate opportunities to achieve excellence in all three areas must be provided, including core resources to support scholarly work, professional development opportunities and clear expectations on achievements that will yield the awarding of promotion and tenure. Examples of how to achieve this include peer-coordinated faculty instructional training, mechanisms to directly connect faculty for collaborative opportunities and ongoing faculty development through the cooperative extension service and human resource management.

## Tools

State-of-the-art instructional facilities are necessary to support all undergraduate and graduate programmatic offerings. These include standard lecture-style classrooms with appropriate and functional teaching technologies, updated laboratory facilities with functioning equipment equivalent to current business and industry laboratories, and access to equipment, instrumentation and field study sites to foster contemporary skill sets and proficiencies in demand in the labor market. This will be achieved through targeted development activities, accessing institutional funds that support rectifying deferred maintenance and optimizing legislatively driven funding when available. The tools to maintain viable concentrations include degree pathway charts maintained by departmental advisors, College of Agriculture student services staff and appropriate learning facilities such as those mentioned above.

Appropriate professional development training from units that support HIPs and other impactful pedagogical approaches provide the tools for success in delivering high-quality educational experiences. Units such as Communication across the Curriculum (CxC); Center for Community Engagement, Learning, and Leadership (CCELL); the Office of Undergraduate Research; the Learning and Teaching Collaborative and others are critical for success. Faculty engagement in ongoing professional development and monitoring of best practices is critical for success on this front.

Concerning graduate students, funding is a significant tool needed to ensure high-level graduate training in attracting and retaining students and supplying them with a focused learning experience. The AgCenter and College of Agriculture currently adhere to assistantship funding levels prescribed by LSU A&M, which are among the highest paying in the region. Facilities to support graduate training are another critical tool, and the AgCenter maintains a full portfolio of experiment stations, research labs, and a variety of institutes to support graduate training.

## Culture

A culture of excellence in educational delivery requires appropriate institutional support, especially in implementing high-impact practices. Professional development for instructional faculty to ensure quality assessment of learning outcomes and implementation of best-in-class teaching techniques is also a core component of sustaining a culture of instructional excellence. A cultural commitment to continually refining programmatic offerings to ensure alignment with labor market and non-governmental organization (NGO) needs is essential. This is maintained through departmental and college curricular committees and ongoing connections with industry partners.

The College of Agriculture must maintain a culture of academic excellence, Scholarship First and a student-centered learning environment. A student-centered culture of success that demands rigor and accountability from students and faculty alike is necessary to improve retention and graduation rates. Nuances include expecting appropriate course loads each semester (e.g., 15 to Finish), close monitoring of D/F/W rates (% of D and F grades and withdrawals), mentoring programs, and early assessment and intervention culturally aligned to support the completion agenda. Cocurricular experiences give students a sense of belonging and community, which is essential to student success and completion, realized through student clubs, the Ag Residential College and the like.

Like undergraduate student success, exceptional graduate training requires an intellectual culture of exceptional expectations for student-centered scholarly development. Simultaneously promoting collaborative skills and the ability to work as an independent scholar, the research and extension training provided by LSU Ag faculty seeks to socialize the next generation of land-grant leaders and innovators.

# REALIZING THE VISION:
# STAKEHOLDER ENGAGEMENT

As a land-grant institution, direct connection to our constituents (producers, community partners, youth participants), as well as partner state and federal agencies, nonprofits, industry and stakeholder commodity groups, is foundational to the execution of our vision and mission. The tripartite mission to Innovate. Educate. Improve Lives., must be aligned with the needs of the citizens we serve.

As a public organization that directly supports one of the largest industries in the state, access to our faculty and programs is imperative. The Louisiana Cooperative Extension Service is the primary conduit through which LSU Agriculture engages with our stakeholders across the state. Opportunities for community and industry engagement are varied and include parish and regional advisory committees, community advisory boards, engagement with commodity boards, and local, state and federal agencies.

Moreover, 4-H and FFA youth development programming is a core mission area to prepare the next generation of agricultural innovators and leaders. Likewise, the Ag Leadership program is a significant tether to various industry sectors that maintains the talent pipeline for Louisiana agriculture.

Engagement and collaboration with industry will continue to contribute to growth and sustainability in programming and impact as we move forward. Industry partners are supporting the entirety of LSU Agriculture and contributing to the success and impacts realized across all three mission areas. Direct engagement with our constituency and advisory groups will continue moving forward, with an overall goal of materially strengthening our agriculture system and building an institution that will set the bar for excellence in research, extension and teaching across the United States Land-Grant University System.

LSU Agriculture is committed to securing our future through **Louisiana Solutions, Global Impact**. Pursuing our high-level goals and aspirational targets through an unyielding and strategic commitment to research, extension and academic excellence will position us to attain elite national ranking and global reputational advantage. LSU Agriculture will not achieve these goals in isolation, but can only do so through strategic internal and external partnerships that will foster the tools, talent and culture needed to Win for Louisiana!

# LOUISIANA SOLUTIONS GLOBAL IMPACT

LSU AgCenter
Research · Extension · Teaching

LSU
College of Agriculture

Office of the Vice President for Agriculture
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# PENNINGTON BIOMEDICAL RESEARCH CENTER

# STRATEGIC PLAN

## FY 2026-2027 THROUGH FY 2030-2031

Revised June 2025

## TABLE OF CONTENTS

## Vision

By the year 2031, Pennington Biomedical Research Center (PBRC) will be the leading nutrition and disease prevention research center in the world recognized through its outstanding quality of research, its contribution to scientific discovery, and its commitment to professional and public health education initiatives.

## Mission

The mission of the Pennington Biomedical Research Center is to promote healthier lives through research and education in nutrition and preventive medicine.

## Philosophy

The philosophy of the Pennington Biomedical Research Center is to attain its mission through the work of the Center's dedicated staff of researchers, technical support personnel, and generous donors by utilizing educated, proactive, and rational decision-making practices and upholding the ideals of ethical scientific and administrative conduct.

## Goals/Objectives/Strategies/and Performance Indicators

The Pennington Biomedical Research Center has established the following goals to be achieved by the year 2031: 1.) To further our identification as an internationally known leading research institution in nutrition and preventive medicine; 2.) Become a greater force for economic development; and 3.) To improve the education aspect of the Center's mission. The following is a description of objectives and strategies necessary to accomplish these goals, as well as performance indicators.

**Goal I. To further our identification as an internationally known leading research institution in nutrition and preventive medicine.**

**Objective I.1. To increase the number of faculty and research staff per year for each fiscal year until fiscal year 2031.**

**Strategies:**
1.) Complete full utilization of the existing facilities to provide more research space.
2.) Identify sources of funding for new faculty.
3.) Identify and recruit faculty and staff to carry out new and expanded research.

**Performance Indicators:**
- Input - current number of faculty and research staff
- Output - number of new faculty and research staff
- Outcome - percentage increase in faculty and research staff

- **Indicator Name – current number of faculty and research staff**
- LaPAS Code – NA
- Type and level – input, supporting
- Rationale – measures the currently number of faculty and research staff before the full utilization of the remaining unutilized research facilities
- Use – internally by management as a base of comparison
- Clarity – research staff includes all employees except faculty, administrative, and O&M staff
- Validity, Reliability, and Accuracy – not audited by the Office of the Legislative Auditor; reliable records ascertained through HRS system on LSU System of Record and PBRC personnel records
- Data Source, Collection, and Reporting – HRM department uses personnel database and HRS System on LSU System of Record to report numbers on a quarterly basis
- Calculation Methodology – personnel counts available from reports run from HRS System on LSU System of Record
- Scope – aggregate
- Caveats – NA
- Responsible Person – Amy Martinell, Director of HRM, 763-3024, Amy.Martinell@pbrc.edu.

- **Indicator Name – number of new faculty and research staff over the last fiscal year**
- LaPAS Code – NA
- Type and level – output, supporting
- Rationale – measures the number of new faculty and research staff employed as additional research space becomes available
- Use – used internally to compare to base to help determine growth of the research center
- Clarity – research staff includes all employees except faculty, administrative, and O&M staff
- Validity, Reliability, and Accuracy – not audited by the Office of the Legislative Auditor; reliable records ascertained through HRS system on LSU System of Record and PBRC personnel records
- Data Source, Collection, and Reporting – HRM department uses personnel database and LSU System of Record to report numbers on a quarterly basis
- Calculation Methodology – personnel counts available from reports run from HRS System on LSU System of Record
- Scope – disaggregate
- Caveats – NA
- Responsible Person – Amy Martinell, Director of HRM, 763-3024, Amy.Martinell@pbrc.edu.

- **Indicator Name – percentage increase in faculty and research staff**
- LaPAS Code – NA
- Type and level – outcome, supporting
- Rationale – measures the percentage change/increase in the number of new

faculty and research staff as the Center expands its research facilities
- Use – to show PBRC as an economic development force by creating new jobs
- Clarity – research staff includes all employees except faculty, administrative, and O&M staff
- Validity, Reliability, and Accuracy – not audited by the Office of the Legislative Auditor; reliable records ascertained through HRS system on LSU System of Record and PBRC personnel records
- Data Source, Collection, and Reporting – HRM department uses personnel database and HRS System on LSU System of Record to generate numbers; they compare these personnel counts to previous counts to determine percentage changes on a quarterly basis
- Calculation Methodology – personnel counts available from reports run from HRS System on LSU System of Record
- Scope – disaggregate
- Caveats – NA
- Responsible Person – Amy Martinell, Director of HRM, 763-3024, Amy.Martinell.edu.

**Goal II. Become a greater force for economic development in Louisiana.**

**Objective II.1: Increase sponsored research funding over the five- year period of FY 2026-2027 through 2030-2031.**

**Strategies:**
1. Increase the number of proposals submitted by faculty and postdoctoral employees.
2. Help young investigators attain initial independent funding.
3. Develop interactions within PBRC, and with LSU and A& M College, LSUHSC New Orleans, LSUHSC Shreveport, AgCenter, and other LSU campuses that will lead to additional grant funding.
4. Attract additional investigators.

**Performance Indicators:**
- Input - the number of proposals submitted
- Output - the number of funded proposals
- Outcome - the increase in non-state funding

- **Indicator Name – the number of proposals submitted**
- LaPAS Code – 13083
- Type and level – input, general performance information
- Rationale – measures the number of proposals submitted for review
- Use – demonstrates how PBRC is actively pursuing its goals of becoming a greater force for economic development
- Clarity – yes, indicator clearly identifies what is being measured

- Validity, Reliability, and Accuracy – yes, audited by the Office of the Legislative Auditor in 2003 in relation to the Exceptional Performance and Efficiency Incentive Program
- Data Source, Collection, and Reporting – information is entered in the sponsored projects database daily as proposals are submitted; information is summarized and reported quarterly and annually
- Calculation Methodology – numbers calculated from entries into sponsored projects database and checked against actual proposal files
- Scope – aggregate
- Caveats – because of multiple year grant awards, we could occasionally experience quarters in which the number of proposals in not increased, but the non-state funding is increased
- Responsible Person – Gabi Bonvillain, Director of Sponsored Projects, 763-2518, Grants@pbrc.edu.

- **Indicator Name – the number of funded proposals**
- LaPAS Code – 9929
- Type and level – output, key indicator
- Rationale – measures how many grants and contracts are awarded to fund researchers' work
- Use – demonstrates how PBRC is a force for economic development
- Clarity – yes, indicator clearly identifies what is being measured
- Validity, Reliability, and Accuracy – yes, audited by the Office of the Legislative Auditor in 2003 in relation to the Exceptional Performance and Efficiency Incentive Program
- Data Source, Collection, and Reporting – collect and enter information into sponsored projects database as grant awards are received; numbers are summarized and reported quarterly and annually
- Calculation Methodology – numbers are determined from the sponsored projects database and checked against proposal/grant award files
- Scope – disaggregate
- Caveats – it is possible that while the number of funded proposals could decrease, the monetary value of the funded proposals could increase
- Responsible Person – Gabi Bonvillain, Director of Sponsored Projects, 763-2518, Grants@pbrc.edu.

- **Indicator Name – increase in non-state funding**
- LaPAS Code – 7344
- Type and level – outcome, key indicator
- Rationale – measures the percentage increase in funding from non-state sources
- Use – demonstrates how PBRC is a driving force for economic development
- Clarity – yes, indicator clearly identifies what is being measured
- Validity, Reliability, and Accuracy – yes, audited by the Office of the Legislative Auditor in 2003 in relation to the Exceptional Performance and Efficiency Incentive Program

- Data Source, Collection, and Reporting – information collected from the sponsored projects database and the financial reports is summarized and reported quarterly and annually
- Calculation Methodology – numbers collected from sponsored projects database and financial reports to determine percentage increase
- Scope – disaggregate
- Caveats – NA
- Responsible Person – Monica.Mougeot, Director of Fiscal Operations, 763-0915, Monica.Mougeot@pbrc.edu.

**Objective II.2: Increase funding through contract research, technology transfer, and business development over the five-year period of FY 2026-27 through 2030-31.**

**Strategies:**

1. Increase the number of clinical trials for pharmaceutical companies.
2. Develop more contract research.
3. Increase the number of patent applications and awards, software, published works and other copyrights, and other intellectual property marks and rights (trademarks, trade names, know-how).
4. Become more involved in product development and high tech services.
5. Increase the number of SBIR/STTR grant proposals (Small business biotechnology research grants and technology transfer grants) and Material Transfer Agreements (MTAs).
6. Continue to leverage the Louisiana Clinical and Translational Science (LA CaTS) initiative in collaboration with the LSU Health Sciences Centers in New Orleans and Shreveport, Southern University, LSU A&M and with other Louisiana higher education institutions and private medical centers to develop the clinical and translational research capacity within Louisiana.

**Performance Indicators:**

- Input - number of clinical trial feasibility assessments submitted
- Output – number of clinical trial agreements funded
- Outcome – Increase in contract funding

  - **Indicator Name – number of clinical trial feasibility assessments submitted to sponsors**
  - LaPAS Code – 13084
  - Type and level – input, general performance information
  - Rationale – measures the number of attempts to increase contract funding
  - Use – demonstrates how PBRC is working to become a stronger force for economic development
  - Clarity – yes, indicator clearly identifies what is being measured
  - Validity, Reliability, and Accuracy – yes, has been audited by the Office of the Legislative Auditor in relation to the Exceptional Performance and Efficiency Incentive Program

- Data Source, Collection, and Reporting – information is entered into sponsored projects database as feasibility assessments are submitted and the data is reported quarterly and annually from the Director of Clinical Operations.
- Calculation Methodology – numbers collected from sponsored projects database and checked against actual proposal files from the Director of Clinical Operations.
- Calculation Methodology – numbers collected from sponsored projects
- Scope – aggregate
- Caveats – NA
- Responsible Person –Cody VanMeter, Director of Clinical Operations, 763-0948, Cody.VanMeter@pbrc.edu

- **Indicator Name – number of clinical trial agreements funded**
- LaPAS Code – 7346
- Type and level – output, key indicator
- Rationale – measures how many clinical trial agreements are actually funded
- Use – demonstrates how PBRC is a catalyst for economic development
- Clarity – yes, indicator clearly identifies what is being measured
- Validity, Reliability, and Accuracy – yes, audited by the Office of the Legislative Auditor in 2003 in relation to the Exceptional Performance and Efficiency Incentive Program
- Data Source, Collection, and Reporting – collect and enter information into sponsored projects database as contracts are received; numbers are summarized and reported quarterly and annually
- Calculation Methodology – numbers are determined from the sponsored projects database and checked against proposal/contract award files
- Scope – disaggregate
- Caveats – could be possible for the number of clinical trial awards to decrease, while the dollar value of the actual awards increases
- Responsible Person – Gabi Bonvillain, Director of Sponsored Projects, 763-2518, Grants@pbrc.edu.

- **Indicator Name – percentage increase in clinical trial agreements funding**
- LaPAS Code – NA
- Type and level – outcome, supporting
- Rationale – measures the percentage increase in contract funding
- Use – to demonstrate how PBRC is a catalyst for economic development
- Clarity – yes, indicator clearly identifies what is being measured
- Validity, Reliability, and Accuracy – yes, audited by the Office of the Legislative Auditor in 2003 in relation to the Exceptional Performance and Efficiency Incentive Program
- Data Source, Collection, and Reporting – sponsored projects staff gathers information from sponsored projects database on a quarterly and annual basis

- Calculation Methodology – numbers collected from Sponsored Projects database to determine percentage increases
- Scope – disaggregate
- Caveats – NA
- Responsible Person – Gabi Bonvillain, Director of Sponsored Projects, 763-2518, Grants@pbrc.edu.

**Goal III. To improve the education aspect of the Pennington Biomedical Research Center's mission.**

**Objective III. 1. Enhance and expand the Pennington Biomedical Research Center's post-doctoral training program to increase the number of post-doctoral researchers.**

**Strategies:**

1. Expand recruitment efforts to attract outstanding young investigators to serve as post-doctoral researchers.
2. Acquire additional post-doctoral training grants from the National Institutes of Health and other sources.
3. Enlist the Pennington Biomedical Research Foundation to establish an endowed post-doctoral fellowship fund.
4. Create additional joint appointments with LSU-BR campus and other LSU campuses to increase the number of shared post doctoral appointments.

**Performance Indicators:**

- Input-number of positions created
- Output-number of post-doctoral researchers hired
- Outcome-Increase in number of post-doctoral researchers on staff

- **Indicator Name – number of positions created**
- LaPAS Code – NA
- Type and level – input, supporting
- Rationale – measures the number of post-doctoral researcher positions created
- Use – demonstrates how PBRC is working to achieve the educational portion of it's mission
- Clarity – yes, indicator clearly identifies what is being measured

- Validity, Responsibility, and Accuracy – not audited by the Office of the Legislative Auditor; use HRM System on LSU System of Record
- Data Source, Collection, and Reporting – HRM collects information from the HRM System/database and reports quarterly
- Calculation Methodology – tally number of positions created and advertised
- Scope – aggregate
- Caveats – NA
- Responsible Person – Amy Martinell, Director of HRM, 763-3024, Amy.Martinell@pbrc.edu.

- **Indicator Name – number of post-doctoral researchers hired**
- LaPAS Code – NA
- Type and level – output, supporting
- Rationale – measures progress toward the goal by counting number of new post-doctoral researchers hired
- Use – demonstrates how PBRC is working to achieve the educational portion of it's mission
- Clarity – yes, indicator clearly identifies what is being measured
- Validity, Responsibility, and Accuracy – not audited by the Office of the Legislative Auditor; retrieve numbers from HRM System on LSU System of Record; compare numbers from System of Record to number of post-doctoral researchers maintained by PBRC education department
- Data Source, Collection, and Reporting – HRM office retrieves employee counts from HRM System on LSU System of Record and reports information on a quarterly basis
- Calculation Methodology – tally number of new post-doctoral hires
- Scope – disaggregate
- Caveats – NA
- Responsible Person – Amy Martinell, Director of HRM, 763-3024, Amy.Martinell@pbrc.edu.

- **Indicator Name – increase in number of post-doctoral researchers on staff**
- LaPAS Code – NA
- Type and level – outcome, supporting
- Rationale – measures the increase in post-doctoral researchers hired through various departments
- Use – demonstrates how PBRC is fulfilling the education portion of its mission
- Clarity – yes, indicator clearly identifies what is being measured
- Validity, Responsibility, and Accuracy – not audited by Office of the Legislative Auditor; numbers generated from HRM System on LSU System of Record; compare to number maintained by PBRC education department
- Data Source, Collection, and Reporting – HRM department retrieves employee counts from HRM System on LSU System of Record on a quarterly basis
- Calculation Methodology – compare post-doctoral researcher counts from quarter to quarter to determine increase
- Scope – disaggregate
- Caveats – NA
- Responsible Person – Amy Martinell, Director of HRM, 763-3024, Amy.Martinell@pbrc.edu.

**Objective III.2**: **Increase local and scientific community participation in programs offered through PBRC.**

**Strategies:**

1. Maintain and improve our comprehensive website at PBRC which would include links to other non-commercial sites for reliable nutrition and preventive medicine information, increase our visibility in the lay and research communities, provide a comprehensive listing of faculty/staff and ongoing research.
2. Continue offering conferences and workshops developed by PBRC staff, such as the Diabetes Lecture Series which is open to the general public, the Visiting Speaker's Program open the university/academic community, and the Pennington Symposium Series, which are by invitation only to the world's leading scientific leaders, and other community-based lay symposia.
3. Continue to participate in offsite community health programs and screenings.
4. Develop distance learning and other technology based professional and education programs such as PBRC and the LSU Ag Center's nutrition series to train cooperative extension agents and provide community education via the web.

**Performance Indicators:**

- Input - number of people who currently participate in programs
- Output - number of new participants
- Outcome - increased percentage in participation

    - **Indicator Name – number of people who currently participate in programs**
    - LaPAS Code – 7348
    - Type and level – input, key
    - Rationale – measures the number of people who participate in programs
    - Use – demonstrates how PBRC is achieving its goal of improving the education portion of its mission
    - Clarity – yes, indicator clearly identifies what is being measured
    - Validity, Responsibility, and Accuracy – yes, has been audited by Office of the Legislative Auditor in 2003 in relation to the Exceptional Performance and Efficiency Incentive Program
    - Data Source, Collection, and Reporting – numbers collected and reported quarterly from communications staff, education department, clinical trials/recruiting department, and conference center staff; these groups report number of attendees at lectures and programs
    - Calculation Methodology – head counts taken at various events
    - Scope – aggregate
    - Caveats – NA
    - Responsible Person – The Director of Institutional Research collects numbers from individual units and reports a collective number. Chris Keaton, 763-2822, Christopher.Keaton@pbrc.edu.
    -
    - **Indicator Name – number of new participants**
    - LaPAS Code – NA
    - Type and level – output, supporting

- Rationale – measures response to effort; i.e. how many new or additional people participated
- Use – demonstrates how PBRC is achieving the education portion of its mission
- Clarity – yes, indicator clearly identifies what is being measured
- Validity, Responsibility, and Accuracy – yes, audited by the Office of the Legislative Auditor in 2003 in relation to the Exceptional Performance and Efficiency Incentive Program
- Data Source, Collection, and Reporting – numbers collected and reported quarterly from communications staff, education department, clinical trials/recruiting department, and conference center staff; these groups report number of attendees at lectures and programs
- Calculation Methodology – head counts taken at various events
- Scope – disaggregate
- Caveats – NA
- Responsible Person – The Director of Institutional Research collects numbers from individual units and reports a collective number. Chris Keaton, 763-2822, Christopher.Keaton@pbrc.edu.

- **Indicator Name – increased percentage in participation**
- LaPAS Code – NA
- Type and level – outcome, supporting
- Rationale – measures results gained through community outreach
- Use – demonstrates how PBRC is achieving the education portion of its mission
- Clarity – yes, indicator clearly identifies what is being measured
- Validity, Responsibility, and Accuracy – yes, audited by the Office of the Legislative Auditor in 2003 in relation to the Exceptional Performance and Efficiency Incentive Program
- Data Source, Collection, and Reporting – numbers collected and reported quarterly from communications staff, education department, clinical trials/recruiting department, and conference center staff; these groups report number of attendees at lectures and programs
- Calculation Methodology – head counts taken at various events
- Scope – disaggregate
- Caveats – possible for quarterly percentage changes to be below targets while cumulatively they could be up
- Responsible Person – The Director of Institutional Research collects numbers from individual units and reports a collective number. Chris Keaton, 763-2822, Christopher.Keaton@pbrc.edu.

**LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER**
**NEW ORLEANS**

# FIVE YEAR
# STRATEGIC PLAN
# Pursuant to Act 1465 of 1997

FY 2026-2027 THROUGH FY 2030-2031

Revised June 2025

## VISION

Louisiana State University Health Sciences Center at New Orleans (LSUHSC-NO) will be a catalyst for a healthier Louisiana, recognized as an outstanding comprehensive public academic health sciences center that serves all citizens through education, research, and patient care, and community outreach.

## MISSION

We educate the future health professions workforce, lead advancement in research and scholarship, provide exceptional and equitable health care, and partner and advocate to build healthy communities.

## PHILOSOPHY

LSUHSC-NO pursues excellence in education, scientific discovery, healthcare delivery, and community engagement, while meeting the needs of the public with the highest standards of ethics, professionalism, compassion, and accountability.

This commitment is grounded in a core set of institutional values that define the university's organizational culture: striving for excellence to achieve the highest standards and exceptional outcomes; upholding integrity by acting honestly, ethically, and respectfully; demonstrating accountability by honoring commitments and serving our communities with consistency and diligence; fostering innovation through curiosity, ingenuity, and discovery; and promoting collaboration by creating and valuing inclusive teams.

These values shape every facet of our mission, driving purposeful action across the institution. We steward human, intellectual, and financial resources with intention and efficiency; apply evidence-based practices and emerging technologies to elevate teaching, research, and patient care; and prioritize proactive, informed decision-making. We are committed to expanding access to healthcare education, cultivating a learning environment that reflects the rich diversity of Louisiana, and fostering a culture of continuous growth and lifelong learning for all.

Comprising the Schools of Allied Health Professions, Dentistry, Graduate Studies, Medicine, Nursing, and Public Health, LSUHSC-NO prepares future healthcare professionals, educators, administrators, and scientists through rigorous educational programs. Our research efforts—both basic and clinical—advance knowledge, support innovation, contribute to economic development, and address the changing health needs of our state and nation. As an academic health sciences center, we provide vital public service through direct patient care, including the care of indigent and uninsured patients. Healthcare services are provided through LSUHSC-NO clinics in allied health, dentistry, medicine, nursing, and in numerous affiliated hospitals and clinics throughout Louisiana. We continue to elevate and enhance investment in educational and research endeavors, expand our influence on health outcomes and healthcare delivery to address health equity challenges in Louisiana, and advance meaningful partnerships across all missions. Through these efforts, we strive to maximize our collective impact and foster a healthier, more equitable future for all.

## GOALS

**I.** **Education:** LSUHSC-NO will design and deliver academic offerings for the next generation of learners and health professions workforce, enabled by contemporary teaching models, interprofessional approaches, and technology.

**II.** **Research:** LSUHSC-NO will be a local, national, and international leader advanced research and discovery on health issues prevalent in Louisiana through comprehensive, institution-wide and LSU-system wide initiatives.

**III.** **Patient Care:** LSUHSC-NO will provide quality health care, promote disease prevention, and raise health awareness for the citizens of Louisiana.

**GOAL I: (*Education*) LSUHSC-NO will design and deliver academic offerings for the next generation of learners and health professions workforce, enabled by contemporary teaching models, interprofessional approaches, and technology.**

**Objective I.1 Provide faculty members with support programs that enhance their skills in the areas of teaching, advising, mentoring, instructional design, curriculum development, interprofessional education, and assessment of learning.**

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| STRATEGY I.1.1 | Develop programs and resources to support faculty development and collaboration related to teaching and assessment. |
| STRATEGY I.1.2 | Provide opportunities for faculty members to focus on specific topics of interest and interact with teaching scholars and educators of national and international acclaim. |
| STRATEGY I.1.3 | Promote innovation and continuous improvement in the curriculum of each School and program. |

**Objective I.2 Attract, retain, and graduate students in high-demand healthcare workforce areas of need in Louisiana, expanding as resources and partnerships allow.**

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|---|---|
| STRATEGY I.2.1 | Improve recruitment efforts using channels of mass media and contacts with local high schools and regional colleges and universities. |
| STRATEGY I.2.2 | Maintain relevance of the curriculum and clinical experience using feedback from students and input from area health care professionals. |
| STRATEGY I.2.3 | Maintain institutional and programmatic accreditation, as applicable. |
| STRATEGY I.2.4 | Maintain the number of students earning degrees. |

PERFORMANCE INDICATORS FOR EDUCATION OBJECTIVES:

Outputs:
- Fall headcount enrollment
- Fall minority headcount enrollment
- Number of degrees conferred
- Number of programs accredited

Outcomes:
- Maintain fall headcount enrollment at Fall 2024baseline
- Maintain or increase minority fall headcount enrollment at Fall 2024 baseline
- Maintain number of degrees conferred at 2023-24 AY baseline
- Maintain 100% accreditation of programs as applicable

**GOAL II: (*Research*) LSUHSC-NO will be a local, national, and international leader in advanced research and discovery on health issues prevalent in Louisiana through comprehensive, institution-wide and LSU-system wide initiatives.**

**Objective II.1 Launch HSC-wide research initiatives with a deeper, integrated, and collaborative focus on health issues that impact Louisiana and expertise across the spectrum of basic, translational, population, and clinical research.**

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|---|---|
| STRATEGY II.1.1 | Provide comprehensive research support systems. |
| STRATEGY II.1.2 | Provide assistance and programs that will enhance faculty's awareness of and ability to compete for externally-sponsored research funding. |
| STRATEGY II.1.3 | Provide improved laboratory space and enhanced research facilities. |

**Objective II.2 Amplify centralized research support services (grant writing; statistics; protocol design; regulatory support; and grants contracting, budgeting, and management) and staff.**

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| STRATEGY II.2.1 | Identify and encourage research initiatives that may directly translate to patient care and education. |
| STRATEGY II.2.2 | Maintain competitive faculty salaries based on appropriate peers. |
| STRATEGY II.2.3 | Improve research coordination, collaboration, and efficiency through the Council of Research Deans. |

PERFORMANCE INDICATORS FOR RESEARCH OBJECTIVES:

Outputs:
- Number of grant applications
- Faculty recruited and retained
- Number of invention disclosures

Outcomes:
- Percentage change in grant applications
- Increased number of faculty recruited and retained
- Decreased faculty salary variance from Southern Regional average
- Maintain number of invention disclosures

**GOAL III: (*Patient Care*) LSUHSC-NO will provide quality health care, promote disease prevention, and raise health awareness for the citizens of Louisiana.**

**Objective III.1 Optimize the public-private partnership model in each market to align on innovative clinical program priorities, research emphases, and joint recruitments and to increase the promotion and awareness of LSU Health–NO's contributions to healthcare, its clinical partners, and the community and expand statewide access to health care through training and screenings.**

| | |
|---|---|
| STRATEGY lll.1.1 | Maintain Graduate Medical Education (GME) in conjunction with hospital partners as applicable. |
| STRATEGY lll.1.2 | Expand the Rural Scholars Tracks to all applicable Schools and develop appropriate recruitment strategies. |
| STRATEGY lll.1.4 | Host and promote healthcare screenings to advance public health and increase public awareness of the importance of early detection and treatment of various diseases, such as the Louisiana Education and Early Detection (LEED) program. |
| STRATEGY III.1.5 | Continue to develop and review shared practice management support operations to ensure efficiency through best practices. |
| STRATEGY III.1.6 | Increase coordination of physician workforce planning. |

PERFORMANCE INDICATORS FOR PATIENT CARE OBJECTIVES:

Outputs:

- Number of cancer screenings provided by programs supported by the Stanley S. Scott Cancer Center and the School of Public Health

Outcomes:

- Percent of patients screened for breast cancer with a diagnosis of cancer
- Percent of patients screened for cervical cancer with a diagnosis of cancer
- Percent of pap tests administered to rarely- or never-screened women

*In Compliance with Act 1465 of 1997, each strategic plan must include the following process:*

**I. A brief, general description of how the strategic planning process was implemented.**

The LSU Health Sciences Center at New Orleans Strategic Planning Committee, consisting of representatives from all areas of the campus, developed the Strategic Plan to provide direction and an integrative framework for planning and implementing the goals that support our mission, and to establish a foundation for accountability that is fundamental for continuous improvement within all programs and activities. The goals, objectives, and strategies are established in each of our core functional areas in a manner to ensure the ability to regularly monitor outcomes and incorporate that data into future decision making. The strategic plan is understood to be the basis of an ongoing process of assessment, analysis and planning; it represents an incremental approach that over time will redirect and acquire resources, both intellectual and financial, required for goal implementation, based upon regular measurement and feedback evaluation.

**II. A brief statement identifying the principal clients and users of each program and the specific service or benefit derived by such persons or organizations:**

As Louisiana's flagship academic health center, educating roughly 70% of Louisiana's health care professionals, the LSU Health Sciences Center at New Orleans maintains a statewide mission with a national and international responsibility to provide excellence in health professions education, healthcare, and community-oriented programs. It is a doctoral/professional research university, enrolling roughly 2,800 students annually, with degree offerings limited to biomedical fields and multiple health professions. LSUHSC-NO delivers vital public service through direct patient care, including care of indigent and uninsured patients. LSUHSC-NO provides referral services, continuing education, and information relevant to the public health of Louisiana's citizens. LSUHSC-NO faculty conduct basic and applied research in biosciences and explore improved approaches to health care, with a special focus in alcohol and drug abuse, cancer, cardiovascular disease, infectious disease, neurosciences, and oral health. LSUHSC-NO offers clinical services to patients through the education of healthcare professionals, public health programs, and graduate medical education.

**III. An identification of potential external factors that are beyond the control of the entity and that could significantly affect the achievement of its goals or objectives:**

A significant external factor beyond the control of LSUHSC-NO but directly impacting its ability to meet its goals and objectives is the level of state funding appropriated annually for both healthcare and higher-education functions. Other external factors that could significantly affect the attainment of goals and objectives are regulatory changes at either a federal or state level; changes in standards set out for accreditation by either regional or specialized accrediting agencies; changes in the rules and regulations of the LSU Board of Supervisors; and changes in varying levels of external economic factors that have an impact on the availability of federal or state funding streams.

**IV. The statutory requirement or other authority for each goal of the plan.**

- Master Plan for Public Postsecondary Education, Board of Regents, State of Louisiana, August 2019
- Louisiana Constitution of 1974, Article VIII, Section 7
- Louisiana Revised Statutes, 17:3351-3352
- Southern Association of Colleges and Schools, Commission on Colleges, Institutional Reaffirmation of Accreditation, 2025

**V. A description of any program evaluation used to develop objectives and strategies.**

LSUHSC-NO engages in ongoing, integrated, institution-wide research-based planning and evaluation. The university uses a framework for strategic planning and evaluation of institutional performance that insures congruence with the university's mission, goals, and outcomes. LSUHSC's review of its mission is guided by Permanent Memorandum PM-38 (Institutional Mission Statements) and procedures created to comply with PM-38. The university's overarching Strategic Plan provides direction and guidance for planning and evaluation of activities that impact institutional effectiveness. Outcomes are monitored to provide the feedback needed to insure continuous improvement. In addition to guidance provided by the LSUHSC-NO Strategic Plan, each professional school creates its own unique set of strategic goals and objectives that support the mission of the institution. Though the faculty governance structure differs from school to school, the administrative leaders, faculty councils, and faculty committees play key roles in strategic development for their respective schools. The planning process includes, but is not limited to, a due diligence review of current program goals and objectives and their achievement status as well as a review of recommendations from external bodies (e.g., governmental agencies, accreditors, and professional groups); external benchmarks and recommendations from peer groups and the community of interest; feedback from students, faculty, and faculty leaders; a review of budgetary issues; and personnel, technology, and material resources. Proposals are reviewed and revised based on feedback from faculty and faculty committees/councils, students, and community leaders. Final strategic plans are approved by a vote of the faculty. School-specific strategic plans are operationalized by faculty leaders and committees/councils.

**VI. An explanation of how duplication of effort will be avoided when the operations of more than one program are directed at achieving a single goal, objective, or strategy.**

For the purposes of Act 1465 of 1997, LSUHSC-NO is a single program and thus duplication of effort is not applicable.

**VII. Documentation as to the validity, reliability, and appropriateness of each performance indicator, as well as the method used to verify and validate the performance indicators as relevant measures of each program's performance.**

See Performance Indicator Documentation which follows.

**VIII. A description of how each performance indicator is used in management decision making and other agency processes.**

See Performance Indicator Documentation which follows.

**PERFORMANCE INDICATOR DOCUMENTATION #1**

**Program**: LSU Health Sciences Center at New Orleans (Agency ID 19A-604)

**KEY:** **Maintain total fall 14th day headcount enrollment at Fall 2024 baseline level**

**Indicator Name**: Fall headcount enrollment
**LaPAS PI Code**: 15253
**Type & Level**: Outcome, Key

**Indicator Name**: Change in Fall headcount enrollment over Fall 2024 baseline
**LaPAS PI Code**: 24945
**Type & Level**: Outcome, Supporting

**Indicator Name**: Percent change in Fall headcount enrollment over Fall 2024 baseline
**LaPAS PI Code**: 24946
**Type & Level**: Outcome, Key

**Other Links**: Workforce Development Commission, Board of Regents Master Plan for Postsecondary Education

**Rationale**: LSUHSC-NO is committed to providing high quality healthcare education, training and patient care to the citizens of Louisiana. Headcount enrollment refers to the actual number of students enrolled.

**Use**: Enrollment is a key factor when making academic, financial, hiring, and many other management decisions. Given budgetary constraints, every effort will be made to maintain current enrollment levels to continue to fill the high workforce demand for healthcare professionals.

**Data Source**: Data will be retrieved from the Board of Regents' Statewide Student Profile System (SSPS). This system has been in existence for over 25 years. SSPS data is gathered from the institutions twice annually, in the fall and spring. For this indicator, the fall data (national standard) will be used. The indicator will be reported at the end of the fourth quarter to allow time for collection, aggregation, and editing of data.

**PERFORMANCE INDICATOR DOCUMENTATION #2**

**Program**: LSU Health Sciences Center at New Orleans (Agency ID 19A-604)

**KEY:** **Maintain or increase total minority student fall 14th day headcount enrollment at Fall 2024 baseline level**

**Indicator Name**: Minority Fall headcount enrollment

**LaPAS PI Code**: 15256
**Type & Level**: Outcome, Key

**Indicator Name**: Percent change in minority student Fall headcount enrollment over Fall 2024 baseline

**LaPAS PI Code**: 15255
**Type & Level**: Outcome, Key

**Other Links**: Workforce Development Commission, Board of Regents Master Plan for Postsecondary Education

**Rationale**: LSUHSC-NO is committed to providing minority students with access to opportunities in healthcare education, training and patient care. Headcount enrollment refers to the actual number of students enrolled.

**Use**: Enrollment is a key factor when making academic, financial, hiring, and many other management decisions. Maintaining or increasing minority enrollment increases the diversity of experience in a multicultural environment. Given budgetary constraints, every effort will be made to maintain or increase current minority enrollment levels to continue to fill the high workforce demand for healthcare professionals across the state.

**Data Source**: Data will be retrieved from the Board of Regents' Statewide Student Profile System (SSPS). This system has been in existence for over 25 years. SSPS data is gathered from the institutions twice annually, in the fall and spring. For this indicator, the fall data (national standard) will be used. The indicator will be reported at the end of the fourth quarter to allow time for collection, aggregation and editing of data. Minority is defined as non-white and excludes non-resident aliens and those students who refuse to indicate. LSUHSC-NO actively seeks to increase minority enrollment and must respect various court decisions regarding enrollment quotas particularly for the professional schools.

**PERFORMANCE INDICATOR DOCUMENTATION #3**

**Program**: LSU Health Sciences Center at New Orleans (Agency ID 19A-604)

**KEY:** **Maintain 100% accreditation of programs**

**Indicator Name**: Percentage of mandatory programs accredited
**LaPAS PI Code**: 15261
**Type & Level**: Outcome, Key

**Indicator Name**: Number of mandatory programs accredited
**LaPAS PI Code**: 15262
**Type & Level**: Outcome, Supporting

**Other Links**: Workforce Development Commission and Board of Regents Master Plan for Postsecondary Education

**Rationale**: Maintenance of accreditation by both institutional and program-specific agencies provides independent confirmation of excellence and compliance with the highest standards of academic programs.

**Use**: Accreditation provides for eligibility for certain federal and financial aid programs as well as confirming programmatic quality and conformation with academic standards of quality.

**Explanatory note**: The count includes academic programs where accreditation is either optional or mandatory. There are a number of programs at LSUHSC-NO where accreditation is not available.

**PERFORMANCE INDICATOR DOCUMENTATION #4**

**Program**: LSU Health Sciences Center at New Orleans (Agency ID 19A-604)

**KEY:** **Maintain the number of students earning degrees of all types at Spring 2024 baseline level**

**Indicator Name**: Percent change in number of students earning degrees of all types over Spring 2024 baseline level
**LaPAS PI Code**: 15263
**Type & Level**: Outcome, Key

**Indicator Name**: Number of students earning degrees of all types
**LaPAS PI Code**: 15264
**Type & Level**: Outcome, Key

**Other Links**: Workforce Development Commission, Board of Regents Master Plan for Postsecondary Education

**Explanatory Note**: While the total number of students receiving degrees of all types may vary each year depending upon number admitted, number who withdraw for personal reasons, and number who repeat coursework due to academic difficulties, among other reasons, LSUHSC-NO is committed to maintaining a level of skilled graduates in healthcare professions necessary to help fill Louisiana's critical workforce needs.

**PERFORMANCE INDICATOR DOCUMENTATION #5**

**Program**: LSU Health Sciences Center at New Orleans (Agency ID 19A-604)

**KEY:** **Maintain the number of cancer screenings at the actual FY2024 level of 6,946 in programs supported by the Stanley S. Scott Cancer Center and the School of Public Health**

**Indicator Name**: Percent increase in screenings
**LaPAS PI Code**: 15265
**Type & Level**: Outcome, Key

**Indicator Name**: Number of screenings
**LaPAS PI Code**: 15266
**Type & Level**: Outcome, Supporting

**Indicator Name**: Percentage of patients screened for breast cancer with diagnosis of cancer
**LaPAS PI Code**: 23218
**Type & Level**: Outcome, Key

**Indicator Name**: Percentage of patients screened for cervical cancer with diagnosis of cancer
**LaPAS PI Code**: 23219
**Type & Level**: Outcome, Key

**Indicator Name**: Percentage of pap test administered to rarely or never screened women
**LaPAS PI Code**: 23220
**Type & Level**: Outcome, Supporting

**Other Links**: Board of Regents Master Plan for Postsecondary Education

# LOUISIANA STATE UNIVERSITY
# HEALTH SCIENCES CENTER
# AT SHREVEPORT

# STRATEGIC PLAN

# FY 2026-2027 – FY 2030-2031

## Revised
## JULY 1, 2025

**Vision Statement:**

Our Vision is to be a preeminent academic medical center that transforms health and health care for a diverse population through compassionate and patient-centered care, technologically advanced education, and trans- formative research.

**Mission Statement:**

The primary mission of Louisiana State University Health Shreveport is to TEACH, HEAL and DISCOVER, in order to advance the well-being of the State, region, and beyond. LSUHS encompasses the Schools of Medicine, Graduate Studies and Allied Health Professions in Shreveport.
To implement its mission, LSUHS is committed to:

- Prepare learners for careers in health care service, teaching and research using state-of-the-art curricula, methods, and facilities.
- Provide a growing, diverse regional patient population with state-of-the-art clinical care, including a range of tertiary special services.
- Achieve distinction and international recognition for basic science and clinical research programs that contribute to the body of knowledge and practice of science and medicine.
- Utilize research and knowledge to support economic growth and prosperity of the region and state by engaging in productive partnerships with the private sector.
- Foster an environment that values mutual respect and a broad range of backgrounds, experiences, and talents that promote mutual respect for all.

**Values**:

**COLLABORATION**: We work together to serve our institution, state, nation, and global community.
**COMPASSION**: We treat others in a caring, empathetic manner and aim to prevent and alleviate hu- man suffering.
**EXCELLENCE**: We foster a lasting spirit of inquiry and creativity, leading to outstanding evidence-based health care, impactful research and scholarship, and superb teaching.
**INNOVATION**: We cultivate an ongoing, cooperative process of discovery and translate knowledge for the benefit and service of humanity.
**PROFESSIONALISM**: We act in accordance with the highest standards of integrity, ethical behavior, and exemplary moral character.
**RESPECT**: We nurture free and open discourse, listen to new ideas, and value a broad range of backgrounds, experiences and talents.

**Philosophy Statement:**

LSUHSC-S aims to inspire and prepare healthcare professionals and biomedical scientists who provide exception clinical care for patients and communities, embrace scientific discovery, become exceptional teachers, contribute to new knowledge about health and disease, and participate in scholarly activities throughout their lives. Graduates will work with others to teach, heal, and discover how to improve health and health care in Louisiana and beyond.

The purpose of this strategic plan is to provide direction and an integrative framework for planning and action by our schools and affiliated hospitals in achieving the mission of LSUHSC-S, and to assure an appropriate framework for accountability that is fundamental for continuous improvement within all our constituent programs.

**Goals and Objectives:**

**Goal I:** **Increase Opportunities for Student Access and Success**

***Objective I-1:*** **Increase Fall 14th class day headcount enrollment to 1,100 by Fall 2028.**

Link to State Outcome Goals: Youth Education, Better Health, Diversified Economic Growth, and Transparent, Accountable and Effective Government

Strategy I.1.1: Employ effective policies to improve retention and graduation rates.
Strategy I.1.2: Design and implement distance (online) learning courses and programs.
Strategy I.1.3: Enhance effective transfers between and among campuses at all levels.
Strategy I.1.4: Expand undergraduate and graduate/professional degree programs.
Strategy I.1.5: Provide education programs to ensure well-trained workforce.

Strategy I.1.6: Develop partnerships with high schools to prepare students for post-secondary education.

Strategy I.1.7: Enhance student recruitment efforts.

**Performance Indicators:**

Output: Number of students enrolled in Fall (as of 14th day) at LSUHSC-S

Outcome: Percentage change in the number of students enrolled in Fall (as of 14th day) at LSUHSC-S

***Objective I-2: Maintain undergraduate, graduate, and professional graduation rates.***

Strategy I.2.1: Develop an early warning system to identify students at risk for failure or dropping.

Strategy I.2.2: Provide additional support to students at key junctures along the path to graduation.

**Performance Indicators:**

Outcome: 1st to 2nd year retention rate

Outcome: Same institution graduation rate

***Objective I-3:*** **Maintain the percentage of program completers at all levels each year.**

Strategy I.3.1: Maintain class sizes within financial and physical resource constraints and in compliance with accreditation requirements.

**Performance Indicators:**

Output: Number of program completers by award level

Outcome: Percentage change in completers by award level from baseline

***Objective I-4:*** **Maintain passage rates on licensure and certification exams and workforce foundational skills.**

Strategy I.4.1: Provide students with knowledge base and learning tools to enable them to assimilate and critically evaluate new information and technologies for the knowledgeable, ethical and compassionate care of their patients.

Strategy I.4.2: Expand clinical experience with patients into the preclinical years of medical school beginning early in the first year.

Strategy I.4.3: Incorporate clinically relevant material into the teaching of basic science principles through the use of small group teaching and computer-based simulation to enhance student understanding of the application of these concepts to the practice of medicine.

Strategy I.4.4: Use body-system based teaching modules in years 1 and 2 to better integrate students' clinical and basic science knowledge and enhance their preparation for third- and fourth-year clinical rotations.

Strategy I.4.5: Employ a method by which students at risk for first-time failure of USMLE Step 1 can be identified and directed to structured preparation for this examination.

Strategy I.4.6: Incorporate sequential examinations using USMLE format into pre-clinical curriculum to provide students with a tool for self-assessment of knowledge and give faculty a measure with which to appraise curriculum content.

Strategy I.4.7: Institute other methods to improve workforce foundational skills and passage rates on licensure and certification exams such as early identification of students needing remediation, individual student counseling, study groups, practice examinations, clinical practice skill development, and interactive teaching by faculty on clinical rotations.

**Performance Indicators:**

Outcome: First-time pass rates on licensure/certification exams

***Objective I-5:*** **Increase the quantity of our student applicant pool by 2027.**

Strategy I.5.1.1: Provide a centralized web-based admission system through GradCAS.

Strategy I.5.2.1: Provide an interdisciplinary program to allow first year students to matriculate into the school of Graduate Studies before choosing a department and major advisor.

**Performance Indicators:**

Output: Number of applicants

Outcome: Increase in the number of applicants

***Objective I-5.2:*** **Increase the quality of our student applicant pool by 2027.**

Strategy I.5.2.1: Provide a centralized web-based admission system though GradCAS.

Strategy I.5.2.2: P r o v i d e an interdisciplinary program to allow first year students to matriculate into the School of Graduate Studies before choosing a department and major advisor.

**Performance Indicators:**

Output: The aggregate GPA and GRE scores of our applicants

Outcome: Increase the aggregate GPA and GRE scores of our applicants from 2019 base year

***Objective I-5.3:*** **Increase the quality of students that matriculate into the School of Graduate Studies by 2027.**

Strategy I.5.3.1: Provide a centralized web-based admission system though GradCAS.

Strategy I.5.3.2: Provide an interdisciplinary program to allow first year students to matriculate into the School of Graduate Studies before choosing a department and major advisor.

**Performance Indicators:**

Output: The aggregate GPA and GRE scores of students that matriculate into the School of Graduate Studies

Outcome: An increase in the aggregate GPA and GRE scores of students that matriculate into the School of Graduate Studies

**Goal II:** **Promote disease prevention and health awareness for LSU Health Sciences Center Shreveport patients and the greater Louisiana community.**

***Objective II-1:*** **Maintain cancer screenings in programs supported by the Feist-Weiller Cancer Center through 2027.**

Strategy II.1.1: Support the cancer screenings through the program "Partners in Wellness" with emphasis on preventive care for patients.

**Performance Indicators:**

Input: Number of screenings requiring follow-up – baseline

Output: Number of screenings requiring follow-up

Outcome: Percent change in number of screenings requiring follow-up

**Goal III:** **Become a local, national and international leader in research at LSUHSC-S**

***Objective III-1:*** **Maintain the number of extramural grant applications through 2028.**

Strategy III.1.1: Encourage faculty to increase research by allowing the portion of their salary that is paid by grants to be re-invested in the department and/or institution.

Strategy III.1.2: Assemble faculty for research retreats.

Strategy III.1.3: Provide improved laboratory space and new research facilities.

Strategy III.1.4: Assist in grant and manuscript preparation and increase awareness of funding research opportunities.

**Performance Indicators:**

Input: Number of grant applications – baseline is 135 new extramural applications per year

Output: Number of grant applications

Outcome: Percentage change in the number of grant applications

***Objective III-2:*** **Maintain the number of invention disclosures through 2028.**

Strategy III.2.1: The Director of the Office for Sponsored Programs and Technology Transfer (OSPTT) in the Office of Research will systematically communicate with all research faculty and staff to educate the potential inventors of the importance of disclosing new research discoveries.

Strategy III.2.2: Consider incorporating technology disclosures and issued patents as part of the criteria for promotion/tenure.

Strategy III.2.3: Encourage entrepreneurship by showcasing high-profile LSUHSC inventors who receive large royalty payments throughout the campus community and challenge their peers to commercialize their inventions.

**Performance Indicators:**

Input: Number of invention disclosures – baseline – 9 disclosures per year

Output: Number of invention disclosures

Outcome: Percentage change in the number of invention disclosures

**Goal IV:** **Educate a student body that will provide excellent patient care and contribute meaningful research in the quest for a healthier Louisiana and world.**

***Objective IV-1:*** **To increase the enrollment of academically competitive applicants possessing the essential qualities and unique potentials defined in the School of Medicine policy.**

Strategy IV.1.1: To maintain the present level of enrollment of Louisiana residents from rural and medically underserved parishes.

Strategy IV.1.2: To establish Admissions criteria that better identify competitive applicants from socioeconomically or educationally disadvantaged backgrounds.

Strategy IV.1.3: To establish Admissions criteria that better delineate evidence of the attributes of leadership and teamwork as well as desirable life experiences in competitive applicants.

Strategy IV.1.4: To conduct an annual training session for all admissions committee members that delineates the features of the holistic review process and elucidates the essential qualities and unique potential sought in applicants as described in the School of Medicine policy.

Strategy IV.1.5 To enhance student recruitment strategies and identify funding opportunities to reduce student debt burden.

**Performance Indicators:**

Output: Number of entering medical students possessing the unique potential defined in the School of Medicine policy.

Outcome: Percentage change in first year enrollment of students possessing the unique potential defined in the School of Medicine policy.

***Objective IV-2:*** **To deliver education and training programs that meet the needs of underserved and diverse populations of Louisiana.**

Strategy IV.2.1: To seek opportunities to facilitate education and training programs in targeted communities that provide workforce pipelines to medically underserved areas.

Strategy IV.2.2: To provide well-trained physicians in areas of need, especially comprehensive primary care in rural communities.

Strategy IV.2.3: Expand rural training tracks and rural medicine electives.

**Performance Indicators:**

Outcome: Percentile rank: percent of graduates practicing in-state

Outcome: Percentile rank: percent of graduates practicing in rural areas

Outcome: Percentile rank: percent of graduates practicing in underserved areas

Outcome: Percentile rank: percent of graduates practicing in primary care medicine

**LOUISIANA STATE UNIVERSITY**
**HEALTH SCIENCES CENTER**
**AT SHREVEPORT**

# APPENDIX TO STRATEGIC PLAN

## Performance Indicator Documentation

**FY 2026-2027 – FY 2030-2031**

**Revised**
**July 1, 2025**

**Program: Louisiana State University Health Sciences Center Shreveport**

**Objective I-1: Increase Fall 14th day enrollment to 1,100 Fall 2028.**

**Indicators: Number of students enrolled in Fall (as of 14th day) at**

**LSUHSC-S LaPAS PI Code: 15214**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Output**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**The indicator provides valid and reliable measurement of the number of students enrolled at LSUHSC-S. The IT Group at LSUHSC assures that adequate procedures for the design, development, and testing of queries are followed.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**The indicator will be used in ongoing planning and systematic review of relevant institutional goals and objectives and demonstrate the effectiveness of related strategies.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes - The indicator clearly identifies what is being measured.**

**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data is the annual IPEDS Enrollment survey, which is derived from internal PeopleSoft reports.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, it is the method of calculation.consistent? If not, why not?

**The indicator is a headcount and requires no calculation.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregated - The indicator is an aggregated headcount of all schools/programs at LSUHSC- S.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**LSUHSC's IT Group assures that adequate procedures for the design, development, and testing of queries are followed. Data reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Review and analysis of data done by Executive Director of Institutional Planning, Effectiveness, and Accreditation Jeffrey D. Howells (phone 318-675-8152; email jeffrey.howells@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-1: Increase Fall 14th class day headcount enrollment to 1,100 by Fall 2028.**

**Indicators: Percent change in the number of students enrolled in Fall (as of the 14th day) at LSUHSC-S**

**LaPAS PI Code: 24948**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level:**
**Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**The indicator provides valid and reliable measurements of the number of students enrolled at LSUHSC-S and the percentage change from baseline. LSUHSC assures that adequate procedures for the design, development, and testing of queries are followed.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**The indicator will be used in ongoing planning and systematic review of relevant institutional goals and objectives and demonstrate the effectiveness of related strategies.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes - The indicator clearly identifies what is being measured.**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and

timing of collection and reporting consistent?)

**The source of data is the annual IPEDS Enrollment survey, which is derived from internal PeopleSoft reports.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is standard.

calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?



**Calculated percent change, subtract the baseline enrollment headcount from the current year enrollment headcount and divide by enrollment headcount in the baseline year.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregated --The indicator is an aggregated for all schools/programs at LSUHSC-S.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**LSUHSC's IT Group assures that adequate procedures for the design, development, and testing of queries are followed. Data reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Review and analysis of data done by Executive Director of Institutional Planning, Effectiveness, and Accreditation, Jeffrey D. Howells (phone 318-675-8152; email jeffrey.howells@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-2: Maintain undergraduate, graduate, and professional graduation rates.**

**Indicator: 1st to 2nd Year Retention Rate**

**LaPAS PI Code: 15244**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level:**
**Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**The indicator provides valid and reliable measurement of the retention of students from first to second year at LSUHSC-S. LSUHSC's IT Group assures that adequate procedures for the design, development, and testing of queries are followed.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**The indicator will be used in ongoing planning and systematic review of relevant institutional goals and objectives and demonstrate the effectiveness of related strategies.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes - The indicator clearly identifies what is being measured.**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How "old" is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data is an internal PeopleSoft report.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If
this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Number of first-time, full-time, degree-seeking students enrolled in the prior academic year that was retained (enrolled) at the same institution in the current academic year.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregate – The indicator is a disaggregated rate by school/program.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

NO.
**LSUHSC's IT Group assures that adequate procedures for the design, development, and testing of queries are followed. Data reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Review and analysis of data done by Executive Director of Institutional Planning, Effectiveness, and Accreditation, Jeffrey D. Howells (phone 318-675-8152; email jeffrey.howells@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-2: Maintain undergraduate, graduate, and professional graduation rates.**

**Indicator: Same Institution Graduation Rate**

**LaPAS PI Code: New**

**Data Source:**

**PeopleSoft**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**The indicator provides valid and reliable measurement of the retention of the same institution graduation rate at LSUHSC-S. The IT Group at LSUHSC-S assures that adequate procedures for the design, development, and testing of queries are followed.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**The indicator will be used in ongoing planning and systematic review of relevant institutional goals and objectives and demonstrate the effectiveness of related strategies.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes - The indicator clearly identifies what is being measured.**

**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal

year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data is an internal PeopleSoft report.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Number of entering first year, full-time students in the given cohort that complete program within normal length of program divided by total number of entering first year, full-time students in the given cohort.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregate – The indicator is a disaggregated rate by school/program.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**LSUHSC's IT Group assures that adequate procedures for the design, development, and testing of queries are followed. Data reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Review and analysis of data done by Executive Director of Institutional Planning, Effectiveness, and Accreditation, Jeffrey D. Howells (phone 318-675-8152; email jeffrey.howells@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-3: Maintain the percentage of program completers at all levels each**

**year. Indicator: Number of program completers by award level**

**LaPAS PI Code: New**

**Data Source: IPEDS Completions survey, which derived from internal PeopleSoft report.**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Output**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**The indicator provides valid and reliable measurements of the number of completers by award level at LSUHSC-S. LSUHSC's IT Group assures that adequate procedures for the design, development, and testing of queries are followed.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**The indicator will be used in ongoing planning and systematic review of relevant institutional goals and objectives and demonstrate the effectiveness of related strategies.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes - The indicator clearly identifies what is being measured.**

**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How "old" is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and

timing of collection and reporting consistent?)

**The source of data is the annual IPEDS Completions survey, which is derived from internal PeopleSoft reports.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Number of completers by award level.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregate – The indicator is a disaggregated rate by school and award level.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**LSUHSC's IT Group assures that adequate procedures for the design, development, and testing of queries are followed. Data reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Review and analysis of data done by Executive Director of Institutional Planning, Effectiveness, and Accreditation, Jeffrey D. Howells (phone 318-675-8152; email jeffrey.howells@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-3: Maintain the percentage of program completers at all levels each year.**

**Indicator: Percentage change in completers by award level from baseline**

**LaPAS PI Code: New**

**Data Source: IPEDS**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**The indicator provides valid and reliable measurement of the retention of students from first to second year at LSUHSC-S.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**The indicator will be used in ongoing planning and systematic review of relevant institutional goals and objectives and demonstrate the effectiveness of related strategies.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes - The indicator clearly identifies what is being measured.**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data is the annual IPEDS Completions survey, which is derived from internal PeopleSoft reports.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Calculated percent change, subtract the number of baseline completers from the number in the current year and divide by number in the baseline year, calculated for each award level.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregate – The indicator is a disaggregated rate by school and award level.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No .**
**LSUHSC's IT Group assures that adequate procedures for the design, development, and testing of queries are followed. Data reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Review and analysis of data done by Executive Director of Institutional Planning, Effectiveness, and Accreditation, Jeffrey D. Howells (phone 318-675-8152; email jeffrey.howells@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-4: Maintain passage rates on licensure and certification exams and workforce foundational skills.**

**Indicator: First-time pass rates on licensure/certification**

**exams LaPAS PI Code: New**

**Data Source: Medical Curriculum Council at LSUHSC-S**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**These standardized exams provide validated national benchmarks and are important tools used to evaluate the effectiveness of the curriculum.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**These indicators will be used in ongoing curriculum planning and review processes to bring about continuing improvement.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes.**
**USMLE= United States Medical Licensing Examination.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How "old" is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data for the indicator is the National Board of Medical Examiners (NBME). Data is reported annually when all yearly cohort scores are available and national pass rates have been calculated for that year by the NBME. For each**

**examination, the composite of results for a yearly cohort is reported to the School of Medicine by the NBME 6-8 weeks after the entire cohort has taken that examination.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Standard calculation: A/B ≥ (A'/B') - 3**
**Where,**
**A = total LSUHSC-S first-time test passers**
**B = total LSUHSC-S first-time test takers A' = total national first-time test passers B' = total national first-time test takers**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregated -- Indicator represents LSUHSC-S student cohorts and cannot be broken down further.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**The results are maintained and reviewed by the School of Medicine and its Medical Curriculum Council.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**USMLE data collection done by Jeffrey D. Howells, Executive Director of Institutional Planning, Effectiveness & Accreditation (phone 318-675-8152, e-mail jeffrey.howells@lsuhs.edu) and the Medical Curriculum Council (MCC). The information will be submitted to the LSUHSC-S Budget Office Assistant Director, Felicia Jacobs (phone 318-675-6804; fax 318-675-8412; email felicia.jacobs@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-5.1: Increase the quantity of student applicant pool by 2027.**

**Indicator: Number of applicants**

**LaPAS PI Code: New**

**Data Source: Database in Office of Graduate Studies**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Output**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**This indicator will measure the number of applicants. This measure is an indicator of interest in attending graduate school at LSUHSC-Shreveport.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Results will be used to assess interest in our graduate program.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes.**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How "old" is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**GradCAS database and internal database used to track the number of applicants. Numbers will be obtained once a year at the start of the academic year in August.**

6) How is the indicator calculated? Is this a standard calculation? (For example:

highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Count the total number of applicants. Values for each year are compared to values from previous years.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**No real weaknesses**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**The information is obtained through the GradCAS database and internal database. Reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**The Office of Graduate Studies will be responsible for data collection, analysis and quality. Contact information for the Office of Graduate Studies is Dean for School of Graduate Studies Jason Bodily, PhD, (phone 318-675-7572; fax 318-675-4523; email jason.bodily@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-5.1: Increase the quantity of our student applicant pool by 2027.**

**Indicator: Increase in the number of applicants**

**LaPAS PI Code: New**

**Data Source: Database in Office of Graduate Studies**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level:**
**Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**This indicator will measure the number of applicants. This measure is an indicator of interest in attending graduate school at LSUHSC-Shreveport.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Results will be used to assess interest in our graduate program.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes.**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How "old" is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**GradCAS database and internal database used to track the number of applicants. Numbers will be obtained once a year at the start of the academic year in August.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Count the total number of applicants. Values for each year are compared to values from previous years. The baseline will be the 2018-2019 academic year.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregated.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**No real weaknesses**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**The information is obtained through the GradCAS database and internal database. Reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**The Office of Graduate Studies will be responsible for data collection. Contact information for the Office of Graduate studies is Dean for School of Graduate Studies Jason Bodily, PhD, (phone 318-675-7572; fax 318-675-4523; email jason.bodily@lsuhs,edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-5.2: Increase the quality of student applicant pool by 2027.**

**Indicator: The aggregate GPA and GRE scores of LSUHSC-S**

**applicants.**

**LaPAS PI Code: New**

**Data Source: Database at GradCAS and in the Office of Graduate Studies.**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**This indicator will measure the quality of applicants.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Results will be used to track the quality of applicants.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How "old" is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**GradCAS database and internal database used to track the quality of applicants. Numbers will be obtained once a year at the start of the academic year in August.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Calculate the average GRE and GPA for all applicants. Values for each year are compared to values from previous years.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**No real weaknesses – These indicators are standard metrics used to measure the quality of applicants for graduate school.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**The information is obtained through the GradCAS database and internal database. Reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**The Office of Graduate Studies will be responsible for data collection, analysis and quality. Contact information for the Office of Graduate Studies is Dean for School of Graduate Studies Jason Bodily, PhD, (phone 318-675-7572; fax 318-675-4523; email jason.bodily@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-5.2: Increase the quality of our student applicant pool by**

**2027. Indicator:** Increase in the aggregate GPA and GRE scores of our

applicants **LaPAS PI Code: New**

**Data Source: Database at GradCAS and in the Office of Graduate Studies**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**This indicator will measure the quality of applicants.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Results will be used to track the quality of applicants.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes.**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**GradCAS database and internal database used to track the quality of applicants. Numbers will be obtained once a year at the start of the academic year in August.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Calculate the average GRE and GPA for all applicants. Values for each year are compared to values from previous years. The baseline is 2018-2019 academic year.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**No real weaknesses – These indicators are standard metrics used to measure the quality of applicants for graduate school.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**The information is obtained through the GradCAS database and internal database. Reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**The Office of Graduate Studies will be responsible for data collection, analysis and quality. Contact information for the Office of Graduate Studies is Dean for School of Graduate Studies Jason Bodily, PhD, (phone 318-675-7572; fax 318-675-4523; email jason.bodily@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-5.3: Increase the quality of students that matriculate into the School of Graduate Studies by 2027.**

**Indicator: The aggregate GPA and GRE scores of students that matriculate into the School of Graduate Studies**

**LaPAS PI Code: New**

**Data Source: Database in the Office of Graduate Studies.**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**This indicator will measure the quality of LSUHSC-S Graduate Studies matriculating class.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Results will be used to track the quality of LSUHSC-S Graduate Studies matriculating class.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**GradCAS database and internal database used to track the quality of students that matriculate into LSUHSC-S programs. Numbers will be obtained once a year at the start of the academic year in August.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Calculate the average GRE and GPA for all matriculating students. Values for each year are compared to values from previous years.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**No real weaknesses – These indicators are standard metrics used to measure the quality of applicants for graduate school.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**The information is obtained through the GradCAS database and internal database.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**The Office of Graduate Studies will be responsible for data collection, analysis and quality. Contact information for the Office of Graduate Studies is Dean for School of Graduate Studies Jason Bodily, PhD, (phone 318-675-7572; fax 318-675-4523; email jason.bodily@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective I-5.3: Increase the quality of students that matriculate into the School of Graduate Studies by 2027.**

**Indicator: An increase in the aggregate GPA and GRE scores of students that matriculate into the School of Graduate Studies**

**LaPAS PI Code: New**

**Data Source: Database in Office of Graduate Studies**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**This indicator will measure the quality of our matriculating class.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Results will be used to track the quality of our matriculating class.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes.**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How "old" is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**GradCAS database and internal database used to track the quality of students that matriculate into our programs. Numbers will be obtained once a year at the start of the academic year in August.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Calculate the average GRE and GPA for all matriculating students. Values for each year are compared to values from previous years. The baseline is 2018-2019 academic year.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**No real weaknesses – These indicators are standard metrics used to measure the quality of applicants for graduate school.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**The information is obtained through the GradCAS database and internal database. Reports are sufficiently reliable based on a combination of assessments information system controls.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**The Office of Graduate Studies will be responsible for data collection, analysis and quality. Contact information for the Office of Graduate studies is Associate Dean for School of Graduate Studies Jason Bodily, PhD, (phone 318-675-7572; fax 318-675-4523; email jason.bodily@lsuhs.edu).**

**Objective II-1: Maintain cancer screenings in programs supported by the Feist- Weiller Cancer Center through 2027.**

**Indicator: Number of Screenings requiring follow-up – baseline**

**LaPAS PI Code: 23222**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Input**
**Level:**
**Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**It is a measure of activity used to promote disease prevention and health awareness for LSUHSC patients and the greater Louisiana community.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**It is an activity used to pursue the mission of excellent patient care, patient education and research. The cancer screenings promote disease prevention care and assist the medical professionals in determining the path of treatment for the patients while making the most efficient use of the treatment resources**.

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source is an internal database on patient visits. This information is gathered monthly.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Daily screenings are performed and logged to produce monthly reports. The total number of screenings requiring follow-up is compared to the prior year to determine the percentage change.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**It is an aggregate of the patient visits for screenings requiring follow-up compared to the prior year.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**N/A**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**Yes.**
**The Office of the Legislative Auditor verified the accuracy and source of information reported for a particular year.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**LSUHSC-Shreveport Partners in the Wellness Office is responsible for collection, analysis and quality of data. The information will be submitted to the LSUHS Budget Office (phone 318-675-6804; fax 318-675-8412; email felicia.jacobs@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective II-1: Maintain cancer screenings in programs supported by the Feist- Weiller Cancer Center through 2027.**

**Indicator: Number of Screenings requiring followup**

**LaPAS PI Code: 23222**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Output**
**Level:**
**Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**It is a measure of activity used to promote disease prevention and health awareness for LSUHSC patients and the greater Louisiana community.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**It is an activity used to pursue the mission of excellent patient care, patient education and research. The cancer screenings promote disease prevention care and assist the medical professionals in determining the path of treatment for the patients while making the most efficient use of the treatment resources**.

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source is an internal database on patient visits. This information is gathered monthly.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Daily screenings are performed and logged to produce monthly reports. The total number of screenings requiring follow-up is compared to the prior year to determine the percentage change.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**It is an aggregate of the patient visits for screenings requiring follow-up compared to the prior year.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**N/A**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**Yes.**
**The Office of the Legislative Auditor verified the accuracy and source of information reported for a particular year.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**LSUHSC-Shreveport Partners in the Wellness Office is responsible for collection, analysis and quality of data. The information will be submitted to the LSUHSC-S Budget Office (phone 318-675-6804; fax 318-675-8412; email felicia.jacobs@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective II-1: Maintain cancer screenings in programs supported by the Feist- Weiller Cancer Center through 2027.**

**Indicator: Percent change in number of screenings requiring followup**

**LaPAS PI Code: New**

**Data Source: Internal Database in Partners in Wellness**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type:**
**Output**
**Level: Key**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**It is a measure of activity used to promote disease prevention and health awareness for LSUHSC patients and the greater Louisiana community.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**It is an activity used to pursue the mission of excellent patient care, patient education and research. The cancer screenings promote disease prevention care and assist the medical professionals in determining the path of treatment for the patients while making the most efficient use of the treatment resources.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source is an internal database on patient visits. This information is gathered monthly.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Daily screenings are performed and logged to produce monthly reports. The total number of screenings is compared to the prior year to determine the percentage change.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate? Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**N/A**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**Yes.**
**The Office of the Legislative Auditor verified the accuracy and source of information reported for a particular year.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**LSUHSC Shreveport Partners in the Wellness Office is responsible for collection, analysis and quality of data. The information will be submitted to the LSUHSC-S Budget Office (phone 318-675-6804; fax 318-675-8412; email felicia. jacobs@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective III-1: Maintain the number of extramural grant applications through 2028.**

**Indicator: Number of grant applications – baseline is 135 new extramural applications per year**

**LaPAS PI Code: New**

**Data Source: Internal Database Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Input**
**Level:**
**Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**It is a measure of productivity of faculty in seeking funding for sponsored research. This is a measure of research productivity in the Louisiana key economic growth area of Health Care. Comparable data from peer institutions is not available.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Management will be able to determine the current number and types of applications and concentrate on supporting efforts on various research areas where funding might be available.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The LSUHSC Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research maintains databases of grant applications. This information can be reported on a state fiscal year basis. Information is gathered continuously as grant application deadlines occur throughout the year. Information is up-to-the minute when an application is submitted and is added to the database.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Average number of invention disclosures (9) in the 3-year period including FY 2020-2021, FY2021-2022, and FY2023-2024 compared to average number of disclosures submitted in the next 3-year fiscal years 2024, 2025, and 2026.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**N/A**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**Institutional and Sponsor policies require that all grant applications are submitted through the LSUHSC Shreveport Office of Sponsored Programs and Technology Transfer (OSPTT). The OSPTT in the Office of Research maintains databases of grant applications. Thus, all applications can be entered into the database.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**LSUHSC-Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research is responsible for collection, analysis and quality of data.**

**Program: LSU Health Sciences Center – Shreveport**

**Objective III-1: Maintain the number of extramural grant applications through 2028.**

**Indicator: Number of grant applications**

**LaPAS PI Code: New**

**Data Source: Internal Database Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Output**
**Level:**
**Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**It is a measure of productivity of faculty in seeking funding for sponsored research.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Management will be able to determine the current number and types of applications and concentrate on supporting efforts on various research areas where funding might be available.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The LSUHSC Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research maintains databases of grant applications. This**

**information can be reported on a state fiscal year basis. Information is gathered continuously as grant application deadlines occur throughout the year. Information is up-to-the minute when an application is submitted and is added to the database.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Average number of invention disclosures (9) in the 3-year period including FY 2020-2021, FY2021-2022, and FY2022-2023 compared to average number of disclosures submitted in the next 3-year fiscal years 2024, 2025, and 2026.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**N/A**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**Institutional and Sponsor policies require that all grant applications are submitted through the LSUHSC Shreveport Office of Sponsored Programs and Technology Transfer (OSPTT). The OSPTT in the Office of Research maintains databases of grant applications. Thus, all applications can be entered into the database.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**LSUHSC-Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research is responsible for collection, analysis and quality of data.**

**Program: LSU Health Sciences Center – Shreveport**

**Objective III-1: Maintain the number of extramural grant applications through 2028.**

**Indicator: Percentage change in the number of grant applications**

**LaPAS PI Code: New**

**Data Source: Internal Database Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level:**
**Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**It is a measure of productivity of faculty in seeking funding for sponsored research. It is anticipated that increased quality applications for funding will lead to increased sponsored research funding.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Management will be able to determine the current number and types of applications and concentrate on supporting efforts on various research areas where funding might be available.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How "old" is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The LSUHSC Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research maintains databases of grant applications. This information can be reported on a state fiscal year basis. Information is gathered continuously as grant application deadlines occur throughout the year. Information is up-to-the minute when an application is submitted and is added to the database.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Average number of invention disclosures (9) in the 3-year period including FY 2020-2021, FY2021-2022, and FY2022-2023 compared to average number of disclosures submitted in the next 3-year fiscal years 2024, 2025, and 2026.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.
**N/A**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No.**
**Institutional and Sponsor policies require that all grant applications are submitted through the LSUHSC Shreveport Office of Sponsored Programs and Technology Transfer (OSPTT). The OSPTT in the Office of Research maintains databases of grant applications. Thus, all applications can be entered into the database.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**LSUHSC-Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research is responsible for collection, analysis and quality of data. The information will be submitted to the LSUHSC-S Budget Office Assistant Director, Felicia Jacobs (phone 318-675-6804; fax 318-675-8412; email felicia.jacobs@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective III-2: Maintain the number of invention disclosures through 2028.**

**Indicator: Number of invention disclosures – baseline – 9 disclosures per**

**year LaPAS PI Code: New**

**Data Source: Internal Database Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Input**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**It is a measure of the quality of novel discoveries resulting from research and productivity of faculty in developing invention disclosures. This is a measure of technology transfer activity and research productivity in the Louisiana key economic growth area of Health.**
**Care. Comparable data from peer institutions (as defined using federal research grants and contracts data) are found in the annual report from the Association of University Technology Managers (AUTM).**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Management will be able to focus resources on areas of research with greater potential for technology transfers.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The Office of Sponsored Programs and Technology Transfer maintains a database of invention disclosures for annual (fiscal year) reporting. Faculty who develops intellectual property contact the OSPTT and complete disclosure forms. There is no set deadline or time frame.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Average number of invention disclosures (9) in the 3-year period including FY 2020-2021, FY2021-2022, and FY2022-2023 compared to average number of disclosures submitted in the next 3-year fiscal years 2024, 2025, and 2026.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**N/A**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**Yes, by Internal Audits and LSU System Audits. There were no findings from this audit. The LSUHSC Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research maintains a database of invention disclosures.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**LSUHSC-Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research is responsible for collection, analysis and quality of data. The information will be submitted to the LSUHSC-S Budget Office Assistant Director, Felicia Jacobs (phone 318-675-6804; fax 318-675-8412; email felicia.jacobs@lsuhs.edu). The information will also be shared with the LSU System Office. Data is also maintained on the National Association of University Technology Managers (AUTM) database.**

**Program: LSU Health Sciences Center – Shreveport**

**Objective III-2: Maintain the number of invention disclosures by 2% through**

**2028. Indicator: Number of invention disclosures**

**LaPAS PI Code: New**

**Data Source: Internal Database Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Output**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**It is a measure of the quality of research and productivity of faculty in developing invention disclosures.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Management will be able to focus resources on areas of research with greater potential for technology transfers.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The Office of Sponsored Programs and Technology Transfer maintains a database**

**of invention disclosures for annual (fiscal year) reporting. Faculty who develops intellectual property contact the OSPTT and complete disclosure forms. There is no set deadline or time frame.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Average number of invention disclosures (9) in the 3-year period including FY 2020-2021, FY2021-2022, and FY2022-2023 compared to average number of disclosures submitted in the next 3-year fiscal years 2024, 2025, and 2026.**

7) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate? Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**N/A**

8) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**Yes, by Internal Audits and LSU System Audits. There were no findings from this audit. The LSUHSC Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research maintains a database of invention disclosures.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**LSUHSC-Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research is responsible for collection, analysis and quality of data. The information will be submitted to the LSUHSC-S Budget Office Assistant Director, Felicia Jacobs (phone 318-675-6804; fax 318-675-8412; email**

**felicia.jacobs@lsuhs.edu). The information will also be shared with the LSU System Office. Data is also maintained on the National Association of University Technology Managers (AUTM) database.**

**Program: LSU Health Sciences Center – Shreveport**

**Objective III-2: Maintain the number of invention disclosures by 2% through**

**2028. Indicator: Percent change in the number of invention disclosures**

**Data Source: Internal Database Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**It is a measure of the quality of research and productivity of faculty in developing invention disclosures.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Management will be able to focus resources on areas of research with greater potential for technology transfers.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The Office of Sponsored Programs and Technology Transfer maintains a database of invention disclosures for annual (fiscal year) reporting. Faculty who develops intellectual property contact the OSPTT and complete disclosure forms. There is no set deadline or time frame.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Average number of invention disclosures (9) in the 3-year period including FY 2020-2021, FY2021-2022, and FY2022-2023 compared to average number of disclosures submitted in the next 3-year fiscal years 2024, 2025, and 2026.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Aggregate.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**N/A**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**Yes, by Internal Audits and LSU System Audits. There were no findings from this audit. The LSUHSC Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research maintains a database of invention disclosures.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**LSUHSC-Shreveport Office of Sponsored Programs and Technology Transfer in the Office of Research is responsible for collection, analysis and quality of data. The information will be submitted to the LSUHSC-S Budget Office Assistant Director, Felicia Jacobs (phone 318-675-6804; fax 318-675-8412; email felicia.jacobs@lsuhs.edu). The information will also be shared with the LSU System Office. Data is also maintained on the National Association of University Technology Managers (AUTM) database.**

**Program: LSU Health Sciences Center – Shreveport**

**Objective IV-1: To increase the enrollment of academically competitive applicants possessing the essential qualities and unique potentials defined in the School of Medicine policy.**

**Indicator: Number of entering medical students possessing the unique potential defined in the School of Medicine policy.**

**LaPAS PI Code: New**

**Data Source: Integrated Postsecondary Education Data System (IPEDS)**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Output**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**Indicator provides valid enrollment figures.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Indicators will be used in ongoing planning and review of related strategies resulting in continuing improvement and achievement of objective and goal.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data for the indicator is annual IPEDS Enrollment survey, which is validated by internal PeopleSoft reports.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**The indicator requires no calculation, just a headcount.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregated -- Indicator represents LSUHSC-S student cohorts and cannot be broken down further.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate? Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No. The numbers are maintained and reviewed by the University and submitted to the Integrated Postsecondary Education Data System (IPEDS).**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Enrollment data is compiled and maintained by the Office of Institutional Planning Executive Director, Jeff Howells, (phone 318-675-8152, email jeffrey.howells@lsuhs.edu). Student review and analysis is completed by the Office of Student and Community Engagement (Assistant Vice Chancellor, Toni Thibeaux, Ph.D., phone 318- 675-5050; email toni.thibeaux@lsuhs.edu.**

**Program: LSU Health Sciences Center – Shreveport**

**Objective IV-1: To increase the enrollment of academically competitive applicants possessing the essential qualities and unique potentials defined in the School of Medicine policy.**

**Indicator: The percentage change in first year enrollment of students possessing the unique potential defined in the School of Medicine policy.**

**LaPAS PI Code: New**

**Data Source: Integrated Postsecondary Education Data System (IPEDS)**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**Indicator provides percentage change in first year enrollment of students possessing the unique potential defined in the School of Medicine policy based on valid and reported enrollment figures.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Indicators will be used in ongoing planning and review of related strategies resulting in continuing improvement and achievement of objective and goal.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data for the indicator is annual IPEDS Enrollment survey, which is validated by internal PeopleSoft reports.**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Standard calculation:**
**Percent change = (current enrollment – previous enrollment) / previous enrollment**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregated -- Indicator represents LSUHSC-S student cohorts and cannot be broken down further.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No. The numbers are maintained and reviewed by the University and submitted to the Integrated Postsecondary Education Data System (IPEDS).**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Enrollment data is compiled and maintained by the Office of Institutional Planning Executive Director, Jeff Howells, (phone 318-675-8152, email jeffrey.howells@lsuhs.edu). Student review and analysis is completed by the Office of Student and Community Engagement Assistant Vice Chancellor, Toni Thibeaux, Ph.D., phone 318- 675-5050; email toni.thibeaux@lsuhs.edu.**

**Program: LSU Health Sciences Center – Shreveport**

**Objective IV-2: To deliver education and training programs that meet the needs of underserved populations of Louisiana.**

**Indicator: Percentile Rank: percent of graduates practicing in-**

**state LaPAS PI Code: New**

**Data Source: Association of American Medical Colleges (AAMC)**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**Indicator provides percentile rank among all fully LCME accredited medical schools of graduates practicing in-state.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Indicators will be used in ongoing planning and review of related strategies resulting in continuing improvement and achievement of objective and goal.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How "old" is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data for the indicator is the annual Association of American Medical Colleges (AAMC) Missions Management Tool (MMT).**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Standard calculation:**
**The practice location for a given year is taken from the American Medical Association Physician Masterfile for physicians providing direct patient care who graduated approximately 9 to 13 years prior. The practice state is compared with the state in which the medical school of graduation is located. The MMT's customized benchmark tables arrays decile distributions and the medical school's values are displayed in highlighted boxes at their relative percentile ranking.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregated -- Indicator represents LSUHSC-S School of Medicine graduates for a specific timeframe and cannot be broken down further.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No. The MMT incorporates multiple sources of information, specifically the Physician Masterfile for this indicator. The Physician Masterfile includes education, training, and professional certification information. The Physician Masterfile includes current and historical data for more than 1.1 million physicians and residents in the United States. For example, fewer than 0.4 percent of the graduates from academic year 2000-2001 through 2004-2005 are not represented in the AMA Physician Masterfile.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Enrollment data is compiled and maintained by the Office of Institutional Planning**

**Executive Director, Jeff Howells, (phone 318-675-8152, email jeffrey.howells@lsuhs.edu). Student review and analysis is completed by the Office of Student and Community Engagement, Assistant Vice Chancellor, Toni Thibeaux, Ph.D., phone 318- 675-5050; email toni.thibeaux@lsuhs.edu.**

**Program: LSU Health Sciences Center – Shreveport**

**Objective IV-2: To deliver education and training programs that meet the needs of underserved populations of Louisiana.**

**Indicator: Percentile Rank: percent of graduates practicing in rural**

**areas LaPAS PI Code: New**

**Data Source: Integrated Postsecondary Education Data System (IPEDS)**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**Indicator provides percentile rank among all fully LCME accredited medical schools of graduates practicing in rural areas.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Indicators will be used in ongoing planning and review of related strategies resulting in continuing improvement and achievement of objective and goal.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data for the indicator is the annual Association of American Medical Colleges (AAMC) Missions Management Tool (MMT).**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Standard calculation:**
**The practice location for a given year is taken from the American Medical Association Physician Masterfile for physicians providing direct patient care who graduated approximately 9 to 13 years prior. The practice state is compared with the state in which the medical school of graduation is located. The MMT's customized benchmark tables arrays decile distributions and the medical school's values are displayed in highlighted boxes at their relative percentile ranking.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregated -- Indicator represents LSUHSC-S School of Medicine graduates for a specific timeframe and cannot be broken down further.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No. The MMT incorporates multiple sources of information, specifically the Physician Masterfile for this indicator. The Physician Masterfile includes education, training, and professional certification information. The Physician Masterfile includes current and historical data for more than 1.1 million physicians and residents in the United States. For example, fewer than 0.4 percent of the graduates from academic year 2000-2001 through 2004-2005 are not represented in the AMA Physician Masterfile.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Data collection and analysis is completed by the Office of Institutional Planning**

**(Executive Director: Jeff Howells, tel: 318-675-8152, email: jeffrey.howells@lsuhs.edu).**

**Program: LSU Health Sciences Center – Shreveport**

**Objective IV-2: To deliver education and training programs that meet the needs of underserved and populations of Louisiana.**

**Indicator: Percentile Rank: percentage of graduates practicing in underserved**

**areas LaPAS PI Code: New**

**Data Source: Integrated Postsecondary Education Data System (IPEDS)**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**Indicator provides percentile rank among all fully LCME accredited medical schools of graduates practicing in underserved areas.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Indicators will be used in ongoing planning and review of related strategies resulting in continuing improvement and achievement of objective and goal.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How “old” is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data for the indicator is the annual Association of American Medical Colleges (AAMC) Missions Management Tool (MMT).**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven. This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Standard calculation:**
**The practice location for a given year is taken from the American Medical Association Physician Masterfile for physicians providing direct patient care who graduated approximately 9 to 13 years prior. The practice state is compared with the state in which the medical school of graduation is located. The MMT's customized benchmark tables arrays decile distributions and the medical school's values are displayed in highlighted boxes at their relative percentile ranking.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregated -- Indicator represents LSUHSC-S School of Medicine graduates for a specific timeframe and cannot be broken down further.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No. The MMT incorporates multiple sources of information, specifically the Physician Masterfile for this indicator. The Physician Masterfile includes education, training, and professional certification information. The Physician Masterfile includes current and historical data for more than 1.1 million physicians and residents in the United States. For example, fewer than 0.4 percent of the graduates from academic year 2000-2001 through 2004-2005 are not represented in the AMA Physician Masterfile.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Enrollment data is compiled and maintained by the Office of Institutional Planning**

**Executive Director, Jeff Howells, (phone 318-675-8152, email jeffrey.howells@lsuhs.edu). Student review and analysis is completed by the Office of Student and Community Engagement Assistant Vice Chancellor, Toni Thibeaux, Ph.D., phone 318- 675-5050; email toni.thibeaux@lsuhs.edu.**

**Objective IV-2: To deliver education and training programs that meet the needs of underserved populations of Louisiana.**

**Indicator: Percentile Rank: percent of graduates practicing in primary care medicine Data Source: Integrated Postsecondary Education Data System (IPEDS)**

1) What is the type of indicator? (Input? Output? Outcome? Efficiency? Quality? More than one type?) What is the level at which the indicator will be reported? (Key? Supporting? General Performance Information?)

**Type: Outcome**
**Level: Supporting**

2) What is the rationale for the indicator? (Why was this indicator selected? Is it a valid measure of performance targeted in this objective? How does it help tell your performance story?)

**Indicator provides percentile rank among all fully LCME accredited medical schools of graduates practicing in primary care medicine.**

3) How will the indicator be used in management decision making and other agency processes? Will the indicator be used only for internal management purposes or will it also surface for performance-based budgeting purposes?

**Indicators will be used in ongoing planning and review of related strategies resulting in continuing improvement and achievement of objective and goal.**

4) Does the indicator name clearly identify what is being measured? Does the indicator name contain jargon, acronyms or initializations or unclear terms? If so, clarify or define them.

**Yes**
**No.**

5) What is the source of data for the indicator? (Examples: Internal log or database; external database or publication) What is the frequency and timing of collection and reporting? (For example: Is the information gathered on a monthly, quarterly, semi-annual, or annual basis? How "old" is it when reported? Is it reported on a state fiscal year, federal fiscal year, calendar year, school year, or other basis? Are frequency and timing of collection and reporting consistent?)

**The source of data for the indicator is the annual Association of American Medical Colleges (AAMC) Missions Management Tool (MMT).**

6) How is the indicator calculated? Is this a standard calculation? (For example: highway death rate is the number of highway fatalities per 100,000,000 miles driven.

This rate is a standard calculation used by the National Highway Traffic Safety Administration). Provide the formula or other method used to calculate the indicator. If a nonstandard method is used, explain why. If this indicator is used by more than one agency or program, is the method of calculation consistent? If not, why not?

**Standard calculation:**
**The practice location for a given year is taken from the American Medical Association Physician Masterfile for physicians providing direct patient care who graduated approximately 9 to 13 years prior. The practice state is compared with the state in which the medical school of graduation is located. The MMT's customized benchmark tables arrays decile distributions and the medical school's values are displayed in highlighted boxes at their relative percentile ranking.**

7) Is the indicator aggregated or disaggregated? (Is it a sum of smaller parts or is it a part of a larger whole? Examples: If the indicator is a statewide figure, can it be broken down into region or parish? If the indicator represents one client group served by a program, can it be combined with indicators for other client groups in order to measure the total client population?)

**Disaggregated -- Indicator represents LSUHSC-S School of Medicine graduates for a specific timeframe and cannot be broken down further.**

8) Does the indicator have limitations or weaknesses (e.g., limited geographical coverage, lack of precision or timeliness, or high cost to collect or analyze)? Is the indicator a proxy or surrogate?
Does the source of the data have a bias? Is there a caveat or qualifier about which data users and evaluators should be aware? If so, explain.

**The indicator has no weaknesses for stated objective.**

9) Has the indicator been audited by the Office of the Legislative Auditor? If so, what result? If not, how can you assure that the indicator is valid, reliable, and accurately reported?

**No. The MMT incorporates multiple sources of information, specifically the Physician Masterfile for this indicator. The Physician Masterfile includes education, training, and professional certification information. The Physician Masterfile includes current and historical data for more than 1.1 million physicians and residents in the United States. For example, fewer than 0.4 percent of the graduates from academic year 2000-2001 through 2004-2005 are not represented in the AMA Physician Masterfile.**

10) Who is responsible for data collection, analysis, and quality? How can that person or organization be contacted? Provide name, title, and all contact information (including telephone, fax, and email address).

**Enrollment data is compiled and maintained by the Office of Institutional Planning Executive Director, Jeff Howells, (phone 318-675-8152, email jeffrey.howells@lsuhs.edu). Student review and analysis is completed by the Office of Student and Community Engagement Vice Chancellor, Toni Thibeaux, Ph.D., phone 318- 675-5050; email toni.thibeaux@lsuhs.edu.**

**LOUISIANA STATE UNIVERSITY**
**HEALTH SCIENCES CENTER**
**AT SHREVEPORT**

# APPENDIX TO STRATEGIC PLAN

***Process Documentation***

**FY 2026-2027 – FY 2030-2031**

**Revised**
**July 1, 2025**

**1) Identification of Principal Clients and Users and the specific service or benefit derived by such persons or organizations:**

| Clients and Users | Service or Benefit |
|---|---|
| Students | Education and preparation for well-paying jobs |
| Postgraduate Trainees | Training and preparation for well-paying jobs |
| Health Care Practitioners | Continuing Education and Community Outreach |
| General Public | Outreach and General Health Education |
| | Benefits from discoveries derived from biomedical research. |
| Patients | Health care and well-being |

**2) Identification of potential external factors that are beyond the control of the entity and that could significantly affect the achievement of its goals or objectives:**

Funding constraints from local, state, and federal government and non-governmental entities impact education, research, patient care services and community outreach programs.

The level of preparation of students in elementary and secondary levels of education prior to enrollment at LSUHSC-S impacts their academic success and progress. This is mitigated by maintaining high standards for admission. The effectiveness of instruction is affected by the quality of our students.

The severity of illness and number of patients who present themselves at our facilities are impacted by lifestyles and living conditions that are beyond our control. Our ability to provide care is compromised by the number of patients that need to be treated.

**3) The statutory requirements or other authorities for each goal of the plan:**

All of the goals in the plan are related to our constitutional authority in Article 8, Section 7 and Louisiana Revised Statutes 17:1519, 17:3215 and 17:3351.

**4) The program evaluation used to develop objectives and strategies:**

Our primary source for objectives and strategies is a self-assessment process. Senior administrative staff and key faculty at each professional schoolwork to identify areas of significant accomplishment, areas of improvement, and areas of commitment to change within their programs. These findings were discussed and used to develop goals and objectives that the Institution as a whole can strive to achieve.

In addition to this self-assessment process, the preparation and self-study that the LSU Health Sciences Center undergoes to maintain Southern Association of Schools and Colleges (SACS) accreditation was used in planning. SACS requires formal planning and follow-up as integral portions of the accreditation process. Other sources include strategic planning and accreditation efforts at each professional school and the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) planning processes and site

visits that the hospital undergoes periodically.

**5) Identification of primary persons who will benefit from or be significantly affected by each objective within the plan:**

**Objective I-1:** Increase Fall 14th class day headcount enrollment to 1,100 by Fall 2028.

**Objective I-2:** Maintain undergraduate, graduate, and professional graduation rates.

**Objective I-3:** Maintain the percentage of program completers at all levels each year.

**Objective I-4:** Maintain passage rates on licensure and certification exams and workforce foundational skills.

**Objective I-5:** Increase the quantity of our student application pool by 2021.

**Objective I-5.2:** Increase the quality of our student applicant pool 2021.

**Objective I-5.3:** Increase the quantity of students that matriculate into the School of Graduate Studies.

This objective is intended to ensure that the patients receive the highest quality of service.

**Objective II-1:** Maintain cancer screenings in programs supported by the Feist-Weiller Cancer Center through 2027.

This objective is intended to benefit students, patients, health practitioners and the general public. The benefits include increased community health awareness, better understanding of health issues and economic development via technology transfers.

**Objective III-1:** Maintain the number of extramural grant applications through 2028.

**Objective III-2:** Maintain the number of invention disclosures through 2028.

Increasing research productivity benefits our students and faculty through scientific discoveries and resultant solutions to health problems as well as adding to our base of knowledge and understanding and health advancements for all Louisiana citizens. Our ability to grow and be competitive as an international research center - attracting the best research faculty, receiving our share of federal funding, and providing financial stability through patents and licenses - is dependent on meeting these objectives.

**Objective IV-1:** To increase the enrollment of academically competitive applicants possessing the essential qualities and unique potentials defined in the School of Medicine policy.

**Objective IV-2**: To deliver education and training programs that will meet the needs of underserved and diverse populations of Louisiana.

All clients and users – students, health care practitioners and patients - benefit from a diverse education and healthcare environment. The state economic health is strengthened by a balanced representation of local minorities in healthcare professions.

**6) How will duplication of effort be avoided when the operations of more than one program are directed at achieving a single goal, objective or strategy?**

LSUHSC-S is considered a single program.

**7) What is the validity, reliability, and appropriateness of *each* performance indicator and what methods are used to verify and validate the performance indicators as relevant measures of each program's performance?**

Please refer to the attached ***Performance Indicator Documentation Appendix***.

**8) Describe how each performance indicator will be used in management decision making and other agency processes:**

Please refer to the attached ***Performance Indicator Documentation Appendix***.

**9) Components of *Louisiana: Vision 2020*, the state's twenty-year master plan for economic development, must be incorporated, to the maximum extent practicable, into the strategic plan. A table cross-referencing component of plan with components of *Louisiana: Vision 2020* must be included.**

Not applicable [replaced with *Louisiana: State Outcome Goals*, see #10]

**10) Components of *Louisiana: State Outcome Goals*, the state's nine outcome goals that matter most to the citizens, should be incorporated, to the maximum extent practicable, into the strategic plan. Appendix referring components of strategic plans with components of *Louisiana: State Outcome Goals* is included.**

Please refer to the attached Louisiana: State Outcome Goals Appendix

**11) Strategies for development and implementation of human resource policies that benefit women and children must be included.**

***Family and Medical Leave Act of 1993 [Administrative Directive 2.8.8]***
According to the agency administrative directive 2.8.8, the purpose of the Family and Medical Leave Act of 1993 is intended to allow employees to balance their work and family life by taking reasonable unpaid leave for medical reasons, for the birth or adoption of a child, and for the care of a child, spouse, or parent who has a serious health condition. The Act is intended to balance the demands of the workplace with the needs of families, to promote the stability and economic security of families, and to promote national interest in preserving family integrity. It was intended that the Act accomplish these purposes in a manner consistent with the Equal Protection Clause of the Fourteenth Amendment in minimizing the potential for employment discrimination on the basis of sex, while promoting equal employment opportunity for men and women.

***Non-Discrimination Policy [Administrative Directive 6.2]***

According to the agency administrative directive 6.2, the purpose of the nondiscrimination policy is as follows: “The Louisiana State University System assures equal opportunity for all qualified persons without regard to race, color, religion, sex, national origin, age, handicap, marital status, or veteran’s status in the admission to, participation in, or employment in its programs and activities.”

**LOUISIANA STATE UNIVERSITY**
**HEALTH SCIENCES CENTER**
**AT SHREVEPORT**

# APPENDIX TO STRATEGIC PLAN

## LINKS TO THE *LOUISIANA CHILDREN'S CABINET*

**FY 2026-2027 – FY 2030-2031**

**Revised**
**July 1, 2025**

**Children's Cabinet Vision Statement:**

Louisiana will be a state where all children and youth can reach their full potential.

Children's Cabinet Mission Statement:

Leading the integration of services and effective utilization of resources to produce measurable outcomes in the physical, social, emotional and educational needs of all children in Louisiana

**Goal IV: To achieve a diverse and inclusive student body from an applicant pool of predominantly Louisiana residents.**

***Objective IV-1: To increase the enrollment of academically competitive applicants possessing the essential qualities and unique potential defined in the School of Medicine policy***

Links to Louisiana Children's Cabinet:

> **Goal 1**: To effectively and efficiently utilize monetary, human, and organizational resources.
>
> Objective 1.1: Accurately identify and maintain a catalog of existing programs and their resources.
>
> Strategy 1.1: Work with local planning boards to identify programs and resources provided at the community level.
>
> Strategy 1.2: Identify programs and initiatives that can be coordinated to maximize available resources.
>
> **Goal 2**: To achieve measurable improvements in the outcomes of all children in
>
> Louisiana Objective 2.1: Implement strategies to elevate the status of children
>
> through
> delivery of services with a particular emphasis on prevention efforts.
>
> Strategy 2.1: Promote the highest quality education at every state of Development.
>
> Strategy 2.2: Assist children to remain in their home and communities, increasing stability and safety.
>
> Strategy 2.3: Identify and utilize culturally sensitive best practices to reduce disparities among children and youth.