

# 2019-20 President Annual ATI Report Summary

## Contents

2019-20 President Annual ATI Report Summary Instructions: ..... 2

    This guide provides a template (see Appendix A) outlining what to include in each section of the Progress and Remaining Effort Report. The 2019-2020 President Summary includes the web performance report. Please include the requested additional information about web performance in the Web section of the Progress and Remaining Effort template..... 2

    Due Date: November 16, 2020 ..... 2

    Submission: Email the report to the campus President and copy [ati@calstate.edu](mailto:ati@calstate.edu) ..... 2

ATI President Annual ATI Report Summary ..... 2

    Background ..... 2

    Progress and Remaining Effort in each ATI Priority area ..... 3

Appendix A: President Annual ATI Report Summary Template..... 4

    Progress and Remaining Effort in each ATI Priority area ..... 4

        Web ..... **Error! Bookmark not defined.**

        IM ..... 7

        Procurement ..... 10

    Appendix B: Status Leves with Evidence Checklist ..... **Error! Bookmark not defined.**

## **2019-20 President Annual ATI Report Summary Instructions:**

This guide provides a template (see Appendix A) outlining what to include in each section of the Progress and Remaining Effort Report. The 2019-2020 President Summary includes the web performance report. Please include the requested additional information about web performance in the Web section of the Progress and Remaining Effort template.

**Due Date: November 16, 2020**

**Submission: Email the report to the campus President and copy [ati@calstate.edu](mailto:ati@calstate.edu)**

## **ATI President Annual ATI Report Summary**

### **Background**

Coded Memo AA-2015-22 issued December 2, 2015 included requirements to address the systemwide audit findings from the audit completed in 2014 (Audit Report 14 -28). The Audit finding recommended that each campus submit a summary of accomplishments and remaining effort to inform the campus President as to the annual status of the Accessibility Technology Initiative effort on the campus. This Audit recommendation was incorporated into Coded Memo AA-2015-22. The purpose of the President Annual Summary Report is to build and/or maintain executive support on the campus. This is in addition to the ATI Annual Reports.

Each campus formulates a yearly plan based on impact and campus capacity that includes the Success Indicators that will be addressed throughout the year. A yearly ATI Annual Report is submitted for each of the three Priority Areas Web, Procurement and Instructional Materials which reports the detail on progress and evidence of that progress.

The Presidents Annual Report Summary provides executive highlights of the information on the ATI Annual Reports. The report includes a summary of accomplishments and areas that need improvement which informs the President as to the state of Accessible Technology Initiative on the campus.

Please use the template provided in Appendix A for the President Annual ATI Summary Report.

## **Progress and Remaining Effort in each ATI Priority area**

The report is a summary of the milestones that have been met according to the yearly campus plan and implementation process in each ATI priority area. A comparison to the systemwide median status level is optional. The systemwide ATI Aggregate Report was distributed to Executive Sponsor Steering Committee members on 6/04/2020. The report summarizes each priority area based on the ATI Annual Report for all three sections of Web, Procurement and IM.

The report should address the bulleted points below.

- Provide an overview of Progress for each ATI Priority Area; Web, Procurement, IM.
- Provide an overview of Remaining Effort for each ATI Priority Area; Web, Procurement, IM. Review the Goals and Success Indicators in each area, summarize the Remaining Effort in needed to reach the status level of Established.
  - Address the areas where processes, procedures and resources have yet to be put in place to integrate accessibility into the campus business processes in each priority area.
  - A priority area which has not met an overall level of Established would reflect the need for improvement or focus and should be addressed in the Remaining Effort.

The goal of providing this information is to present an opportunity to share challenges (e.g. budget and staffing needs) with campus leadership.

## Appendix A: President Annual ATI Report Summary Template

Name of Campus: California State University, Sacramento

Reporting Year: 2019-20

Submitted by: Mark Hendricks, Interim Vice President & Chief Information Officer

### Progress and Remaining Effort in each ATI Priority area

Sac State has worked diligently this past year to continue improvement toward advancing ATI priority areas of Web, Instructional Materials and Procurement. During this reporting period the Information Resources and Technology (IRT) Division experienced a significant change in leadership with changes in four key roles including CIO, Associate Vice President of Academic Technology, Director of Academic Technology and Universal Design for Learning Lead. The onset of the COVID-19 in early Spring of 2020, the pandemic escalated the reliance upon accessible technology for students, faculty and staff. The pivot to remote instruction by the University, shifted the work on the ATI priority areas of focus to address immediate needs for remote instruction accessibility. These needs included additional accessibility training for the Summer Camp for Instructors, additional live captioning tools to provide equity to instruction, and in partnership with the Division of Inclusive Excellence an instructional materials remediation program based on Universal Design for Learning principles. Sac State has successfully moved all goals for Web from Below Baseline and continues to make progress on the remaining Below Baseline goals for Instructional Materials and Procurement.

ATI Priority Area	Below Baseline	At Minimal Baseline	Above Baseline
Website	0	69	10
Instructional Materials	2	39	8
Procurement	5	14	21

### Web

Summarize milestones met based on yearly plan:

With the Web Stewardship new site launch in July 2019, the CSUS website and processes supporting it are managed more strategically and effectively. The creation of new pages is centrally managed with all new page requests fulfilled by the IRT Web & Mobile Services team. This change allows the publisher to inherit an accessible template work within. Although problematic content can still be created, the frequency and severity has been significantly reduced compared to years prior.

A new, required annual certification course was implemented in December of 2019. The course effectively educates web publishers in best practices and specific techniques to keep campus content accessible. As a result of Web Stewardship, csus.edu successfully closed an Office of Civil Rights

(OCR) investigation in 2020. The majority of issues identified in the OCR were managed by vendor systems for the campus catalog and athletics website.

A Web Content Advisory Group has been established. The membership of the leadership level group is broad and accessibility support is included in the charge. The groups charge is listed here: <https://mysacstate.sharepoint.com/:f:/s/WebContentAdvisoryGroup/EjI1hgZNdpdHI0KhFzFdprgBkVcyTHeap5u5J9i6voy1gA?e=y7DOef>

<b>Web</b>	<b>Indicator</b>	<b>Status</b>	<b>Immediate Action(s) to Meet Baseline</b>
1.18	Established a procedure to distribute evaluation results to vendors responsible for website maintenance.	Established	The procedure to evaluate vendors upon contract renewal has been implemented at the procurement level. Multiple IRT Web & Mobile team staff members vet design comps and/or sandbox or production applications to ensure compliance.
4.4	Accessible alternate format is in place for all website and web applications exemptions.	Established	The current process involves a 5-day notice to remediate or remove for web page content and a 2-week notice to remediate or remove dynamic applications. The Web & Mobile team works with functional content owners to ensure that alternative formats are provided for non-compliant web applications or third-party websites.
4.5	Established a follow-up procedure to remediate non-compliant websites, and web applications.	Managed	The website remediation process has been established and ongoing since February 2020 to identify accessibility compliance violations with an automated scanning tool. Results are reviewed, sorted by severity and communicated to content owners by email. Compliance violation records are kept and made available to campus content owners through the campus content repository.

## Web Performance Reporting

- Automated Scans
  - Summarize continuing progress on implementing the campus web scanning process and remediating errors found during 2019/2020.

We conduct monthly automated scans using SiteImprove. A Web & Mobile services team staff member then reviews the reports for severity, false positives and any issues that many need to be resolved at the template level. When issues are identified as being the responsibility of the content owner, content owners are contacted by email and are given 5 days to correct a WCAG accessibility issue. If they don't remediate content in this time frame, a WMS team member may remediate the content or remove the page(s). SiteImprove also helps with usability by identifying misspellings, broken links, etc. This year, 637 compliance issues were identified, reported and remediated through this process.

- Summarize how the campus plans to address the remaining effort to implement the web accessibility scanning and remediation process.

Accessibility awareness and training is part of mandatory training for content publishers/editors. The content is delivered via a new Canvas course that emphasizes accessibility problem identification and best practices.

- Please list the staff and position title(s) dedicated to web accessibility and the related percent effort associated with their positions.

The positions listed below have some website accessibility-related responsibilities; the links to the position descriptions include percentages allocated to essential functions.

- [Accessible Technology Consultant](#), Katie Beekman
- [Accessible and Instructional Technology Consultant](#), Corinne Rowland
- [Accessible Technology Consultant](#), Cryssel Vera
- [Portal and LMS Coordinator](#), Yuan Liu
- [Visual Experience Designer](#), Aaron Winters
- [Web Developer](#), Mark Konrad
- [Web Accessibility Specialist](#), Nick McAfee
- [Web and Mobile Services Director](#), Jeff Dillon

Manual Evaluation Worksheet, will be provided on CSYou along with instructions to be completed for the following home pages. These pages were chosen in order to compare last year's manual evaluation to this year's evaluation. Manual scans are located here:

<https://mysacstate.sharepoint.com/:f:/s/ATICAARPreports/EohEnS-ADqplgoWPdrCJPVcB6naxrIQBGMpJNZZbq09OOg?e=trHePF>

- Campus Homepage
  - 2020 course catalogue
  - Financial Aid
  - Careers services
  - Housing
  - 1-2 Colleges
  - Events
  - Disability Services
  - Admissions
- Summarize the remaining effort to implement an accessibility manual evaluation process in place across the campus.

To continue our effort to implement and an accessibility evaluation process in place across the campus, the WMS Accessibility team members will create a plan to work directly with content owners to monitor and review all known Sac State web assets annually. This process will include manually testing web sites such as Athletics, auxiliaries, the catalog and official Sac State digital content hosted outside of the central campus web content management system.

IM:

- Summarize milestones met based on yearly plan:

Sac State provides access to technology to support faculty creation of accessible instructional materials. In addition to foundational accessibility tools on-campus, such as Microsoft's built-in accessibility options and captioning, we have advanced two additional milestones in the implementation of campus-wide accessibility.

- Ally's Instructor Facing Course Report provides a comprehensive course review for accessibility in course materials in Canvas. Ally is available to all faculty via Canvas, our Learning Management System. Each faculty has access to this tool as of July 2020.

- The creation of the Universal Design for Learning Instructional Materials Remediation group. Student workers were approved for hire to join the UDL program for full remediation services.

Both of these initiatives aim to increase the accessibility of digital instructional materials via awareness, remediation, and accessibility-by-design. Other milestones in this area include updates to processes and documentation.

In response to the Covid-19 CSU Sacramento move to remote instruction, the Academic Technology Center provided the following support: Otter A.I. for live transcription on Zoom, multiple Webinar sessions in Spring and Fall 2020, partnered with the CTL for the TeachOnline Summer Camp, hired and trained 8 students for work toward the remediation of instructional materials, and developed the Online Teaching Resources OTR pages.

Areas that have progressed from Established to Managed:

<b>Instructional Materials</b>	<b>Indicator</b>	<b>Status</b>	<b>Immediate Action(s) to Meet Baseline</b>
3.3	Campus has implemented a system that allows alternate media requests to be submitted without appearing in-person during regular business hours (e.g., web-based forms, integration with student registration portal).	Managed	In response the Covid-19 and the move to remote support services and courses, SSWD staff currently process the delivery of alternative media. SSWD is currently in the process of assessing a case management system. The addition of this system may change the electronic process for alternative media requests.
4.3	Campus has established specific guidelines and procedures for submitting course and curricular materials hosted in campus LMS (or other central, electronic product).	Managed	The ATC developed and curated technology resources in <u>the Online Teaching Resources (OTR)</u> Canvas pages including links to accessibility policy, procedures, and campus support.



Remaining Effort: Areas that are below Established (Not Started, Initiated, Defined):

Instructional Materials	Indicator	Status	Immediate Action(s) to Meet Baseline
7.10	Campus has established a process to provide digital copies of library electronic reserves to alternate media production staff upon request.	Defined	We are working with SSWD and the Library to review current processes. *SSWD is currently in the process of assessing a case management system. The addition of this system may change the electronic process for alternative media requests.
9.1	Campus IMAP committee membership consists of stakeholders from all key units (Student Affairs, Academic Senate, Curriculum Committee, Academic Technology, Library) as well as faculty, staff and students	Defined	We reconvened the ATI Steering Committee in November 2019, and they reviewed the annual reports. We have drafted the UDL subcommittee charge and are planning to form a subcommittee that will focus on IM, UDL, and other academic technologies.

Optional ATI Aggregate comparison: Not Applicable

Procurement:

Summarize milestones met based on yearly plan:

We reconvened the ATI Steering Committee that is now meeting on a regular basis. SSWD initiated an Accessible Technology working group comprising members from SSWD, IRT, HR, and CTL that focuses on both technology procurement and ensuring that campus members receive the accessible technology they need with the transition to fully online learning.

With input from various campus stakeholders, we established a Qualtrics survey that provides feedback on campus ICT requesters' understanding of and satisfaction with the ICT Procurement Process. The survey was sent to the 222 current campus ICT requesters, and 89 people completed the survey. Their feedback will help determine where to focus our

efforts to help improve the procurement process, documentation, and training. Out of the 89 survey respondents, 43 responded that they would be interested in receiving further information on the process. A process has been defined to administer this survey annually and metrics reviewed for progress toward process improvement and increased understanding by the requesters.

We have enhanced the accessibility review process for Canvas LTI integration requests, and are continuing to meet to refine the process, and consider how to fully incorporate requests for LTI integrations into the standard ICT request process regardless of whether there is a cost involved.

Total number of ICT requests in 19-20: 1,552.

Number of ICT requests reviewed by Accessible Technology Consultant in 19-20: 419.

Areas that have progressed from Defined to Established:

<b>Procurement</b>	<b>Indicator</b>	<b>Status</b>	<b>Immediate Action(s) to Meet Baseline</b>
2.1	Established a group that meets on a regular basis to discuss accessible procurement topics	Established	Regular ATI Steering Committee Meetings have been re-established, and a newly formed IT Procurement group has convened with meetings held on a regular basis.
7.5	Established metrics to evaluate the effectiveness of the Equally Effective Alternative Access Process.	Established	At the time of a procurement renewal, or other predetermined time, the Accessible Technology Consultant coordinates with department that has an existing EEAAP on file to determine if the alternative plan continues to be needed. If a department used an EEAAP, then an evaluation is conducted to assess the effectiveness of the plan for the individual requiring alternative access.

Remaining Effort: Areas that are below Established (Not Started, Initiated, Defined):

Procurement	Indicator	Status	Immediate Action(s) to Meet Baseline
5.7	Collected feedback from training (effectiveness, knowledge retention, etc.).	Defined	A Qualtrics survey was distributed to the campus ICT requesters to solicit feedback. We plan to make a survey part of our annual process to collect feedback. We will keep this status indicator as Defined for 2019/20, and move to Established when we've obtained this feedback from campus requesters on a more consistent basis.
7.0	Campus has established a continual evaluation process with standard forms and procedures. Feedback from the process along with direction is provided to training, outreach, and other groups involved in ICT (Information and Communication Technology) procurements.	Defined	We will reach Established status upon completion of the action items listed below: 7.4, 7.6, and 7.7.
7.4	Established metrics to evaluate the effectiveness of the ATI procurement process and procedures process.	Defined	<p>After a request is complete, a survey is sent out from ServiceNow asking for feedback. The survey questions are saved in ServiceNow and may be retrieved from that system.</p> <p>With guidance and input from ATI Steering Committee members and other campus stakeholders, we developed a Qualtrics survey to measure effectiveness.</p> <p>Procurement provides documentation annually on the number of cancelled requisitions due to departments not following the standard ICT process. There were less than a dozen cancelled requisitions in 2019/20 due to the ICT Process not being followed.</p>

Procurement	Indicator	Status	Immediate Action(s) to Meet Baseline
7.6	Established metrics to evaluate the effectiveness of campus training process.	Defined	Our survey found that the majority of the respondents felt they had sufficient knowledge/training on the ICT Procurement Process before completing a request. We will continue to gather this feedback on an annual basis. Procurement tracks attendance at their monthly Procurement trainings, and 100 employees attended training in 2019/20.
7.7	Establish metrics to evaluate the effectiveness of campus outreach process.	Defined	We distributed a survey to the campus ICT requesters to solicit feedback. We plan to make a survey part of our annual process to evaluate effectiveness of campus outreach efforts.

Optional ATI Aggregate comparison: Not Applicable

## Appendix B: Status Levels with Evidence checklist

The table below is intended to provide guidance regarding the selection of an appropriate Status Level. For each Status Level, a description is provided that indicates how that Status Level would be manifested for different Success Indicator types. If the campus has undertaken several actions related to a Success Indicator, select a Status Level that best reflects overall progress. You may use this table as a reference while completing the report. For a non-table format of this data please refer to the end of this document under header Non-Table Status Levels list.

Status Level	Description for Procedures	Description for Documentation	Description for Resources
<b>Optimizing</b>	The campus has a mature practice. Additional procedures are in place to conduct regular administrative reviews of success indicators to gauge effectiveness and	Documentation is continually revised to reflect the managed practice. Periodic administrative review of documentation is conducted. ✓ Documented administrative review ✓ Documented milestones and measures of success.	Resources have been both identified and allocated. Periodic administrative review of resource allocations is conducted. ✓ Review process and success criteria – review for process improvement

Status Level	Description for Procedures	Description for Documentation	Description for Resources
	implement improvements.	<ul style="list-style-type: none"> <li>✓ Process documentation is stored in a campus electronic location and process has been communicated to the campus.</li> </ul> <p><b>ATI Annual Report Evidence Column</b></p> <ul style="list-style-type: none"> <li>✓ Include link to administrative review documentation</li> <li>✓ Include link to milestones and measures documentation or location of process document on internal drive</li> <li>✓ Include link to documentation or location of process document on internal drive</li> </ul>	<ul style="list-style-type: none"> <li>✓ Identified measures of success and collected success data</li> <li>✓ ATI tasks have been added to campus job descriptions</li> <li>✓ New positions have been created as needed.</li> <li>✓ Budget allocated for ATI processes</li> </ul> <p><b>ATI Annual Report Evidence Column</b></p> <ul style="list-style-type: none"> <li>✓ Include job titles associated with the indicator</li> <li>✓ Include budget allocations or other resources associated with the indicator</li> </ul>
<b>Managed</b>	Campus has a mature practice. Additional procedures are in place to track and capture success indicators (milestones and measures of success).	<p>Documentation is complete and fully reflects the standard practice.</p> <ul style="list-style-type: none"> <li>✓ Documented milestones and measures of success.</li> <li>✓ Process documentation is stored in a campus electronic location and process has been communicated to the campus.</li> </ul> <p><b>ATI Annual Report Evidence Column</b></p> <ul style="list-style-type: none"> <li>✓ Include link to milestones and measures documentation or location of process document on internal drive</li> <li>✓ Include link to documentation or location of process document on internal drive</li> </ul>	<p>Resources have been both identified and allocated.</p> <ul style="list-style-type: none"> <li>✓ Identified measures of success and collected success data</li> <li>✓ ATI tasks have been added to campus job descriptions</li> <li>✓ New positions have been created as needed.</li> <li>✓ Budget allocated for ATI processes</li> </ul> <p><b>ATI Annual Report Evidence Column</b></p> <ul style="list-style-type: none"> <li>✓ Include job titles associated with the indicator</li> <li>✓ Include budget allocations or other resources associated with the indicator</li> </ul>
<b>Established</b>	Campus has a standard practice. Procedures are consistent and formal.	<p>Documentation is complete and fully reflects the standard practice.</p> <ul style="list-style-type: none"> <li>✓ Process documentation is stored in a campus electronic location and process has been communicated to the campus.</li> </ul>	<p>Resources have been both identified and allocated.</p> <ul style="list-style-type: none"> <li>✓ ATI tasks have been added to campus job descriptions.</li> <li>✓ New positions have been created as needed.</li> <li>✓ Budget allocated for ATI processes</li> </ul>

Status Level	Description for Procedures	Description for Documentation	Description for Resources
		<b>ATI Annual Report Evidence Column</b> <ul style="list-style-type: none"> <li>✓ Include link to documentation or location of process document on internal drive</li> </ul>	<b>ATI Annual Report Evidence Column</b> <ul style="list-style-type: none"> <li>✓ Include job titles associated with the indicator</li> <li>✓ Include budget allocations or other resources associated with the indicator</li> </ul>
<b>Defined</b>	Campus has a common practice. Any procedures in place are consistent but informal.	Documentation, if present, is in working draft form. <ul style="list-style-type: none"> <li>✓ Draft documentation is stored in a campus electronic location</li> </ul> <b>ATI Annual Report Evidence Column</b> <ul style="list-style-type: none"> <li>✓ Include link to documentation or location of process document on internal drive</li> <li>✓ If no documentation has been written then briefly describe the process.</li> </ul>	Resources have been firmly identified but not yet allocated. <ul style="list-style-type: none"> <li>✓ Job descriptions/new positions that need ATI tasks added should be identified in campus plan</li> <li>✓ Budget allocations should be identified in campus plan</li> </ul> <b>ATI Annual Report Evidence Column</b> <ul style="list-style-type: none"> <li>✓ Include identified job titles associated with the indicator</li> <li>✓ Include other identified resources associated with the indicator</li> </ul>
<b>Initiated</b>	Campus has an ad hoc or developing practice. Any procedures in place are generally ad hoc.	Documentation is generally absent. <ul style="list-style-type: none"> <li>✓ Success Indicator should be identified in campus ATI Plan with proposed implementation plan</li> </ul> <b>ATI Annual Report Evidence Column</b> <ul style="list-style-type: none"> <li>✓ Brief description of proposed implementation plan</li> </ul>	Resources have been tentatively identified but not yet allocated. <ul style="list-style-type: none"> <li>✓ Identified resources should be included in the campus plan</li> </ul>
<b>Not Started</b>	No action has yet been taken.	No documentation has yet been generated. <ul style="list-style-type: none"> <li>• Success indicator should be identified in ATI campus Plan with reason stating why it is not started.</li> </ul>	No resources have yet been allocated.