



## Support Unit Review: Overview

Outlined below is a basic overview of the Support Unit Review Process at Stanislaus State. This overview includes: a chronology underlining important events and/or outcomes; highlights from the Support Unit Review Policy and Procedures (2008) document; and historical Support Unit Review documents that provide important background and context.

### Chronology

- The Support Unit Review (SUR) process was initially established in 2004/05.
- After completing a full cycle of review, the process underwent a preliminary evaluation in 2007/08. Revisions were made to the process and approved by the President.
- In the [2008/09 WASC Educational Effectiveness Review](#), the SUR process was addressed in Thematic Essay 2. The Self-Study Team (internal) recommended that further efforts be made to “close the loop” for both Academic Program Reviews (APRs) and SURs (see below).

33.	Commit to “closing the loops” through the Academic Program Review (APR) and Support Unit Review (SUR) processes that will lead to action and implementation of the key recommendations that emerge from these reviews. (EER Thematic Essay 2.c.)
34.	Continue to enhance university support for the key area of the environment for learning through the adoption of the recommendations in the Support Unit Reviews. (EER Thematic Essay 2.e.)

- An evaluation of the SUR process in 2008/09 revealed the need to streamline. In the evaluation document, it was noted that the President’s Executive Cabinet, Council of Deans, Academic Affairs Council, and the Assessment Leadership Team<sup>i</sup> would review and provide recommendations to the President.
- The formation of a SUR taskforce was discussed in 2011, but it did not move forward due to transitions in administration.
- Due to WASC’s focus on co-curricular assessment, the Office of Assessment has coordinated with non-academic units identified as “co-curricular” to resume completion of co-curricular assessment reports - [https://www.csustan.edu/sites/default/files/OAQA/documents/co-curricular\\_assessment\\_report\\_template.doc](https://www.csustan.edu/sites/default/files/OAQA/documents/co-curricular_assessment_report_template.doc)

### Highlights from the Support Unit Report Policy and Procedures (2008)

*All university units participate in support unit review, and are reviewed at least once every five years. Each vice president identifies which of his or her units and/or subunits is to conduct the support unit process within the division and ensures that all subunits either conduct the support-unit process or are a subunit of a larger collection of subunits that conduct the support unit process...*

*In addition to the periodic full review in the support unit review process, each unit submits an annual report of the following: (a) the unit's achievements in relation to the unit's and the university's strategic goals and priorities and (b) the unit's contributions in addressing each of the specific WASC concerns that were identified in the most-recent WASC evaluation report. This additional step provides a consistent record of evidence of measurement and progress...*

*The Provost and Vice President for Academic Affairs oversees the support unit review process. Data and survey needs of administrative and academic support units are supported by the Office of Institutional Research. The procedure for the review consists of three phases: (1) a self-study phase in which the unit prepares a report that contains detailed background data, administrative or academic support unit activities, strategic planning documents, future goals, assessment procedures, and other information as needed by the review team; (2) a review phase in which a review team examines the unit's self-study and makes recommendations for improvement; and (3) a strategic planning phase resulting in the development of a comprehensive strategic implementation plan based on the review results...*

*There are seven key dimensions that should be addressed during the unit review process: 1. Introduction and mission of the unit. 2. Role within the university and relationships to other units. 3. Plans and the planning processes of the unit. 4. Assessment processes and effectiveness of the unit, including measurement of outcomes. 5. Resource allocation and use. 6. Evaluation of the operation of the unit. 7. Special issues to be addressed.*

Archived documents, including the full SUR Policy and Procedures document, are available at <http://archive.csustan.edu/oaga/Documents-Forms/SUREvaluation2009.pdf>

The following Support Unit Review related documents have been attached here for immediate reference:

#### Campus Documents

- A. Support Unit Review Policy and Procedures
- B. Support Unit Review Evaluation 2008/09

#### External Models

- C. Arizona Western College
- D. CSU Monterey Bay

:ep1 011817

---

<sup>i</sup> Council of Deans and Assessment Leadership Team no longer exist as committees/councils. There is now a Provost's Advisory Council and a University-wide Assessment Advisory Council.

# California State University, Stanislaus

## SUPPORT UNIT

## REVIEW

## POLICY AND PROCEDURE



## California State University, Stanislaus

### Support Unit Review Policy and Procedure

#### I. Introduction

CSU Stanislaus is committed to a comprehensive periodic review of all support units that integrates rigorous assessment with ongoing strategic planning.

The primary goal of the review process is to provide a mechanism to ensure the improvement of support units on a continuous basis.

The assumption of the review process is that the responsibility for monitoring the status, effectiveness, and progress of units rests with the unit administrator and the vice president or president responsible for that unit. As a result, important functions of the process are to (1) meet the requirements of administrators for comprehensive information concerning the effectiveness of their units, (2) to determine if resources are being utilized as effectively and efficiently as possible, and (3) to determine if the unit is effectively supporting the mission of the university.

The review process helps to identify the future directions, needs, and priorities of support units. As such, support unit review is inextricably linked to strategic planning, resource allocation, and other decision-making at the unit and university levels. It is also an assumption that the review process is a participatory process that includes input from personnel in the unit as well as from units and individuals the unit is designed to serve.

This document sets forth the process for the review of support units. The vice presidents, or president may designate additional or more detailed procedures for the review of units within their administrative jurisdiction, as long as the common elements described in this document for all unit reviews are met. Because significant resources are invested in this process, it is essential that the review produce results that are useful to the unit and its leadership, to the unit's constituents, and to the university. Thereafter, the university's support unit review process is formally reviewed at least every five years to determine if it is functioning as intended and to incorporate appropriate changes into the process. The review process is initiated by the President's Cabinet or the Academic Senate.

#### II. Overview of the Review Process

All university units participate in support unit review, and are reviewed at least once every five years. Each vice president identifies which of his or her units and/or subunits is to conduct the support unit process within the division and ensures that all subunits either conduct the support-unit process or are a subunit of a larger collection of subunits that conduct the support unit process.

A specific list of support units are identified and placed on a five-year review schedule. The provost produces the five-year review schedule in consultation with the other vice presidents.

Each of the academic colleges participates in the support unit review process. Each college completes a single review of its support units, including the departmental administrative structure as part of that single review process. Academic programs are reviewed through the Academic Program Review process, which is described in a separate document.

In addition to the periodic full review in the support unit review process, each unit submits an annual report of the following: (a) the unit's achievements in relation to the unit's and the university's strategic goals and priorities and (b) the unit's contributions in addressing each of the specific WASC concerns that were identified in the most-recent WASC evaluation report. This additional step provides a consistent record of evidence of measurement and progress.

The support unit review process includes input from the broad university community, including faculty, staff, and students. The summary of results and recommendations of the support unit review are given to the broad university community, including the Academic Senate, for information and comments.

The Provost and Vice President for Academic Affairs oversees the support unit review process. Data and survey needs of administrative and academic support units are supported by the Office of Institutional Research.

The procedure for the review consists of three phases: (1) a *self-study phase* in which the unit prepares a report that contains detailed background data, administrative or academic support unit activities, strategic planning documents, future goals, assessment procedures, and other information as needed by the review team; (2) a *review phase* in which a review team examines the unit's self-study and makes recommendations for improvement; and (3) a strategic planning phase resulting in the development of a comprehensive *strategic implementation plan* based on the review results.

Each administrator is encouraged to adapt the review process to be consistent and compatible with existing assessment and evaluation frameworks that exist in the unit, including external accreditation and adherence to professional standards and practices. Throughout the review process, the structure and procedures used in the review process should be established in a manner that is consistent with the size, role, and organizational structure of the unit under review. The unit may also be asked to address relevant and timely issues and challenges facing the unit under review. The emphasis of the review is that each administrator may use this process as a tool that can be modified to meet the planning and management needs of the units within their areas of responsibility.

There are seven key dimensions that should be addressed during the unit review process:

1. Introduction and mission of the unit.
2. Role within the university and relationships to other units.
3. Plans and the planning processes of the unit.
4. Assessment processes and effectiveness of the unit, including measurement of outcomes.
5. Resource allocation and use.
6. Evaluation of the operation of the unit.
7. Special issues to be addressed.

The outcome of unit review should be a well-designed and agreed-upon strategic implementation plan for enhancement of the administrative or academic support unit. Plans should be explicit, realistic, viable, and should reflect the aspirations of each unit. The unit review process should focus on improvements that can be made using resources that currently are available to the unit.

### **III. The Self-Study Report – Phase 1**

The unit is responsible for preparing the self-study report in a format and timeline as outlined by the vice president or president. The following guidelines are recommended areas that should be addressed in the self-study report. The vice president or president is responsible for identifying a specific focus of the self-study report where desirable and appropriate.

The Office of Institutional Research provides the unit with relevant data or other available information and assistance in presenting, analyzing, and interpreting the data. This office should be used to ensure comparable definitions and interpretation where appropriate. The Office of Institutional Research serves as a resource in the development, administration, and analysis of questionnaires, surveys, or interviews used in self-study reports, in accordance with university policy for human subjects research.

### Self-Study Report Format Guidelines

**1. Introduction and mission of the unit:** Describe the roles and functions of this unit and the impact of this unit upon the institution by addressing the following elements:

- a. Mission and organization of the unit and sub-units.
- b. Brief description of the self-study process and participants.
- c. Services or functions provided:
  - Describe the work performed by the unit. Provide data that describes the amount of work or transactions handled by the unit.
  - Document recent trends and changes.

**2. Role within the university and relationship to other units:** Describe how this unit relates to other units on campus and how the current unit administrative structure serves the campus needs by addressing the following elements:

- a. Describe interrelationships of the unit with other units at the university, where applicable.
- b. Identify areas of possible function overlap or service duplication with other units offered at the university.

**3. Plans and the planning processes of the unit:** Describe the goals, strategic plan, and planning processes of the unit and how they contribute to the university's mission and strategic plan. Describe the consultative process used to establish these goals and explain how they are consistent with, and supportive of, the university's goals and plans, by addressing the following elements:

- a. List the unit goals and the strategies to achieve these goals:
  - Describe the planning process within the unit.
  - Provide implementation plans and timetables.
  - Include other materials used in the unit's planning process, if applicable.
- b. Discuss the centrality to the university mission:
  - Identify the relationship of the unit to the university's mission and strategic plan.
  - Describe its role and function support the university.

**4. Assessment processes and effectiveness of the unit including measurement of outcomes:** Describe how the unit is achieving goals set by the unit and its vice president or the university president and the effectiveness of service to its designated constituency, by addressing the following elements:

- a. Assessment of unit's quality:
  - Describe the assessment and evaluation processes of the unit and its functions (not the personnel employed in the unit).
  - Present evidence that this unit is achieving its goals.
  - Identify the kinds of data regularly collected to provide feedback to the unit on its achievement of objectives and the perceptions and attitudes of the users of the unit's services.
  - Identify specific outcome measures
  - Summarize the results or attach copies of summary reports to the review if constituent interviews or surveys have been conducted regarding the effectiveness of this unit in meeting needs.
  - Describe the methods and results of input sought from the broad university community.
- b. Implementation of assessment:
  - Describe how data are used to improve the unit and its services. Give specific examples to support the conclusion.

**5. Resource allocation and use:** Describe how the unit maximizes its effectiveness in terms of available resources and how priorities for allocation of resources are determined in the unit, by addressing the following elements:

- a. Resource allocation: Provide data that describe the resources allocated to the unit over the last five years:
  - Staffing figures by headcount, FTE, category of position, funding source, gender, and ethnicity for the last five years.
  - Budget by funding source; expenditures by expenditure classification and funding source; external funding and income received for the last five years.
  - Current physical space available to the unit and its function.
- b. Adequacy of resources: How adequate are the resources allocated to the unit to perform its mandated functions in each of the areas listed below? If any resource is judged inadequate, what solution does the unit recommend?
  - Administrative and support staff.
  - Facilities.
  - Equipment/instrumentation/laboratories.
  - Supplies and services.
  - Information resources and services (library, computing).

**6. Evaluation of the operations of the unit:** Describe how the operating procedures of the unit are compatible with the policies and regulations of the university, and where appropriate, with administrative regulations and faculty governance structures, by addressing the following elements:

- a. Evaluation of the management of the unit:
  - How is appropriate staff involved in the decision-making process of the unit?
  - What mechanisms exist for staff to provide feedback to the unit?
  - What mechanisms exist for other units on campus to provide feedback to the unit?
  - How are data used to determine future goals and evaluate current performance?
- b. Assessment of climate and management:
  - Are personnel within the unit familiar with unit objectives and the importance of their work in achieving unit and campus objectives?
  - Is there effective communication among staff?
- c. Efficiency analysis: What recommendations does the unit suggest to...
  - Improve decision-making?
  - Eliminate duplication or non-essential work?
  - Simplify reporting relationships and communications?
  - Use resources available to it effectively?
  - Reduce or contain costs?

**7. Special issues to be addressed:** Each vice president or the president, where applicable, is encouraged to develop a set of questions that is timely and unique for issues facing the unit under review. Units may discuss the status of support units relative to similar programs at appropriate peer universities or departments. Data that compares the structure, activities, procedures, and practices of the unit against standards of professional associations may be included where appropriate.

**8. Appendices:** Attach to the unit's self-study report, where applicable.

- b. Organizational chart.
- c. Flow chart of major operations or systems.
- d. Workload data, measurements, and performance indicators used for major activities.
- e. Roster of current staff.
- f. Copies of significant policies.
- g. Reports and other supporting documents.

#### IV. The Review – Phase 2

The review team provides a mechanism for the administrative or academic support unit to benefit from perceptions and assessment of faculty, staff, and students from outside the unit, and, where appropriate, from outside the university. The review team should be representative of those that the unit serves. The review team provides an evaluation of the quality and effectiveness of the unit and make recommendations for improvement.

**1. Selection of review team and schedule for the review:** The review team is comprised of people mainly from outside the unit being reviewed as well as those involved in preparation of the self-study report to ensure continuity and appropriate interpretation of the data. When the unit has university-wide responsibility, all sectors are represented on the review team. The vice president's or president's responsibility includes soliciting nominations for team members from the faculty through Committee on Committees and selecting the members and chair of the review team. When a review of a support unit contained within a specific college is planned, the dean's responsibility includes soliciting nominations for review team members from the college faculty via college governance structures established to make faculty committee appointments.

**2. Materials, information, and questions provided to the review team:** Upon appointment of the review team, the vice president or president provides, through the unit administrator, the following to each member of the review team.

- a. A copy of the university's support unit review process document.
- b. The unit's self-study report and all supporting documentation and attachments with the understanding that the review team may request additional information and interviews.
- c. An outline of specific questions the review team is asked to address. These questions are developed by the vice president, in consultation with the president, and after receiving suggestions from the unit administrator undergoing review, faculty governance, and others as deemed appropriate.
- d. A timetable for submission of the review team's preliminary and final reports.

**3. The review team's reports:** The review team presents its major findings and recommendations to the vice president or president, who, in turn, distributes the preliminary draft to the unit, so that the unit may correct any factual errors before the report is finalized. A final report is provided to the vice president or president by the review team within six weeks of the return to the review team of the preliminary draft. The vice president or president distributes copies of the final report to the unit administrator. The unit administrator distributes the final report to all members of the unit being reviewed. The executive summary, minus any references to individuals, is an open document and distributed to the campus community through the university web page and the Academic Senate.

**4. Unit response to the review team's report:** Following receipt of the final report of the review team, the unit being reviewed may provide the vice president or president with a written response to the review team's report findings and recommendations. The vice president or president distributes a copy of the unit's response to the review team, and president. In addition, the report and follow up documents will be distributed to the university community via the web.

#### V. Strategic Implementation Plan and Follow Up – Phase 3

As a result of this process, the vice president or president and the unit administrator jointly approves a strategic implementation plan for agreed-upon actions. This strategic implementation plan (1) identifies and prioritizes the goals of the unit over the next five years; (2) identifies the strategies which will be used to accomplish those goals, e.g., state what actions are to be taken by whom and include deadlines; and (3) identifies the expected outcome or results of the strategic implementation plan.

## California State University, Stanislaus

**Evaluation of the Support Unit Review Process**

This document is a three-year summary of the evaluation of the Support Unit Review (SUR) process that is required of all administrative support offices on campus. CSU Stanislaus is committed to excellence in its academic and administrative support units throughout the university and, therefore, conducts support unit reviews on a five-year cycle. The first reviews began in 2004/05 and a full cycle of all offices completed in 2008/09. The process results in an evidentiary-based self study with a focus on the effectiveness of the unit in support student learning and student success, along with operational and service efficiency and effectiveness. This self study is followed by an assessment of unit effectiveness by an external review team (external to the unit, including faculty, staff, and administrators) and an approved strategic implementation plan for the unit.

SUR Review 2007-2008

A preliminary evaluation of the Support Unit Review process prompted changes to clarify procedural elements and reporting expectations. Further emphasis was given to the ways in which administrative units contribute to student learning and success by expanding upon this element throughout the review process. As a result, the working manual provided by the Provost at the annual Support Unit Review workshops was revised to provide greater clarification and assistance in the completion of the Support Unit Review process. A summary of refinements is provided below.

**Phase 1: Self Study**

1. Expanded timeline for completion of a more comprehensive self study
2. Clarified responsibilities for participants through creation of a self-study checklist
3. Revised self-study instructions and provided sample possible questions for exploration in the self study

**Phase 2: External Review**

1. Clarified faculty selection of faculty representatives on external review teams (faculty governance committee selects faculty)
2. Revised timelines
3. Created external review checklist
4. Added external review instructions
5. Established external review team suggestions and approval process
6. Added possible template for external review

**Phase 3: Executive Summary**

1. Clarified the process of writing and approving the executive summary
2. Clarified development of strategic implementation plan
3. Created a template for electronic posting of executive summary

SUR Review 2008/09

An evaluation of the Support Unit Review process was conducted at the completion of the 2008/09 review cycle, with information derived from the Council of Deans, President's Administrative Group, SUR workshops, and individual comments included in the reports of external reviewers. A summary of overall findings follow:

1. Administrators rated the importance of SUR as very high, especially with regard to its focus on student learning/success.
2. Administrators from academic affairs and student affairs were more positive about the review criteria than those from business/finance and university advancement. This finding is predictable in that criteria focus on organizational structures and services directly related to student academic achievement and student success, areas of direct responsibility for academic and student affairs. While the other divisions are equally committed to this academic mission, their services are more indirect, thereby making it more difficult to address the criteria.
3. While the process is designed to be flexible and able to be tailored to the indicators of quality unique to each unit, some administrators reported that the self studies tended to be bureaucratic and did not capture the essential questions/issues for evaluating and improving their administrative support offices.
4. Administrators indicated that while SUR was important, time constraints and daily demands tended to interfere with giving SUR priority and delaying timely completion of the self study.
5. Staff members within the units participated in the review process primarily as either the authors of the draft self study or reviewers of the draft self study document, although some reported no participation at all.
6. A few administrators and staff who participated in lead roles for the SUR, as well as external review teams, reported difficulty in conducting the review without reference to personnel needs/budgetary needs. This is a particularly important element as the SUR is designed *not* to be a budget request, although budgetary implications of the SUR results certainly influence fiscal, organizational, and staffing decisions.
7. External review members cited the importance of SUR; a few of the teams commented that some self studies were mostly descriptive rather than evidentiary based, thus making it more difficult to give helpful evaluative feedback.

8. Faculty serving on external review teams reported several suggestions for improving the process and their effectiveness in providing feedback. Examples include the following:

*Surveys*

- a. Improve survey data presentation by providing raw numbers of survey respondents in addition to percentages and disaggregating data by responding departments so the external review team is able to assess representation of sample and extrapolate directly fairly
- b. Provide an executive summary of survey findings based on the perceptions of the unit
- c. Conduct surveys of students directly to get their impressions of experiences with departmental offices and faculty

*Format Coloration*

- d. Remove coloration (red font) and placing special issues related to student learning and success in bold (photocopies and printers do not display color)

*Process Simplification*

- e. Simplify the policy and procedures to increase understanding, ensure more complete results, and improve the efficiency in writing the document by the external review team

*Orientation Workshop*

- f. Include administrative assistants and external review team members in the annual orientation workshop that is conducted currently by the provost with the unit administrators

### Conclusions

Although the current Support Unit Review process was designed to focus on a common set of criteria, the policy and procedures document simultaneously encouraged administrators to exercise flexibility in tailoring the review methodology, criteria, and salient issues to those most meaningful to the unit. While several units employed a modified or alternative methodology and criteria, the pervasive view of others, as derived from this assessment, is that the current SUR process remains too restrictive.

### Recommendation

It is recommended that the Support Unit Review process be examined and perhaps revised, particularly resulting in a more streamlined approach. It is further recommended that methods/best practices used by other universities in their evaluation of unit effectiveness be undertaken to inform this review process.

### Next Steps

In 2009/10, the President's Executive Cabinet, Provost's Council of Deans, Academic Affairs Council, and Assessment Leadership Team will review this evaluative report and make its recommendations to the president. Any recommended revisions will be forwarded to the appropriate governance and administrative bodies.

# NON-ACADEMIC PROGRAM REVIEW GUIDELINES

## WHY PROGRAM REVIEW

Program review is a necessary process whereby departments within Arizona Western College periodically undergo a check on quality assurance which includes taking a critical eye to what a department is doing and how well it is meeting its objectives. Program review is the foundation upon which all departments assess, maintain, and enhance program quality and vitality. As such, program review gives us the opportunity to reflect on the performance of a department/program, document what is being done well, identify areas where things need improvement, and plan for the future.

The Higher Learning Commission of the North Central Association through its Criterion 4 spells out the need for an institution to maintain a practice of regular program review. Specifically, “the institution demonstrates responsibility for the quality of its educational programs, learning environments, and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement.” Hence, in addition to guiding departments toward continual improvement of what they do, program review is also a necessary component of institutional accreditation.

## WHAT CONSTITUTES A PROGRAM

Because the purpose of a program review is to promote educational excellence and better serve students, all functions of the college need to be involved in program review. Over time, institutions create programs to fulfill special needs of a particular time or for a special audience, allocate resources to the programs, and permit the programs to become considered a continuing part of the institution’s plans, budgets, and obligations. It is through a periodic review aimed at continual improvement of such programs that the institution assures quality in what it does.

A program can be defined in many ways depending on what activities within the institution are being reviewed. An operational definition of a program *is any activity or collection of activities of the institution that consumes resources (dollars, people, space, equipment, time)*. This can lead to several ways of defining programs; for example:

- Student support services that may enhance students’ academic achievement
- Departments such as Advisement & Career Services or the Child Development Learning Laboratory
- Administrative services defined by administrative reporting structures
- Student service pathways that end in a specific outcome
- Facilities

## UNDERLYING PRINCIPLES OF PROGRAM REVIEW

When undergoing program review we think of how best departments should function. To this end, some common-sense principles and practices that can help a department improve its processes are as follows:

**Define quality in terms of outcomes.** Exemplary departments determine their students’ needs and then work to meet them. Similarly, quality in terms of services provided by a department to clients should drive business practices. The service outcome needed by students, faculty, staff, and

community partners, etc. should define what the department is seeking to deliver and should inform practice so that such services are well done.

**Base decisions on facts.** Administrative departments should collect evidence to guide decisions on staffing related to the volume of work needing to be accomplished, how best to deploy new technological solutions, identifying where synergy resulting in efficiencies exist, etc.

**Focus on assessment.** Administrative departments should promote a ‘culture of inquiry’ to provide continual improvement in how services are provided. Assessment should form the backbone of continual improvement efforts so that change is well-informed change based on knowledge of how well a department is achieving its outcomes.

**Strive for coherence in educational activities.** Departments should view learning through the lens of the student's entire educational experience. Student support services should be aligned with the goal of helping students learn how to learn. Administrative efforts should be geared toward student success. Efforts of all departments should be woven together in a seamless support structure aimed at learning and student success.

**Work collaboratively to achieve mutual involvement and support.** Departments should encourage staff members to work together, hold one another accountable, and bring a broad array of talent to bear on difficult problems. Such teamwork can make the department a “learning organization” as well as a provider of services to its clients.

**Identify and learn from best practices.** Departments should seek out examples of good practice and adapt the best to their own circumstances. Departments should compare good versus average or poor-performing methods, assess the causes of the differences, and seek ways to minimize the variation. Continual benchmarking against peers helps keep activities current and relevant to students, staff, community partners, etc. being served.

**Make continuous improvement a priority.** Departments should strive to improve the quality of services on a regular basis and seek ways to provide optimal services. All departments should embrace a ‘culture of inquiry’.

## **ADDRESSING QUALITY PRINCIPLES IN PROGRAM REVIEW**

Program review should be a meaningful process that contributes to the overall quality of the department and the college without creating unsustainable workload or data requirements. To do so is a bit of a balancing act in regard to the level of detail needed versus the effort required.

Nevertheless, we should be curious about what we do and how well we do it by addressing questions such as: Do student services and administrative activities effectively sustain program goals and the college mission? Are student support services and administrative services adequately aligned to produce the appropriate student outcomes expected by employers and other external entities? Where will the program be two, five, or ten years into the future? Etc.

As part of program review, the department undergoing a self-reflection needs to consider the following:

**What are we trying to do?**

Traditional thinking equates quality to inputs like staff size and qualifications – for example, “Quality improvement requires more and better staff.” But inputs are means to an end and it’s the end that ultimately matters. In services, the end pertains to students’ knowledge and skills, values, and quality of life. This leads to the principle: *Define quality in terms of outcomes.*

**How are we doing it?**

Quality experts insist that all work is process. In short, to do something you must engage in some sort of process, even if it’s informal. It only makes sense that paying attention to processes can improve quality. This leads to the principle: *Focus on how things get done.*

**Who is responsible for doing it?**

Tasks can be assigned to teams or left to individual initiative. Teams usually outperform individuals when it comes to sustaining and improving quality. Hence the principle: *Work collaboratively.*

**How do we know we are succeeding?**

It’s hard to consistently produce quality without feedback on how well you are accomplishing your goal. The feedback should be based on evidence rather than on anecdotes whenever possible, and evidence is important in applying the other quality principles. Consequently the principle: *Base decisions on evidence.*

**How can we do even better?**

Although focusing on outcomes, processes, responsibilities, and evidence gets the improvement ball rolling, the principles which hold everything together: *Learn from best practice and make continuous improvement a priority.*

These questions and the underlying quality principles form the foundation for pieces contained in a self-analysis program review done by a department.

**FRAMEWORK FOR PROGRAM REVIEW REPORTS**

In what follows are suggested ideas for pieces of a Program Review self-reflection aimed at getting a department to do an analysis of what it is aiming to accomplish and how successful it is in doing so. This self-analysis is aimed at addressing the broad questions shown previously, but to provide some structure to how a department reports this information.

The following report framework supports all departments in efforts to gauge how well they are fulfilling their purpose and objectives.

- I. Overview**
- II. Mission / Program Purpose**
- III. Quality Assurance**
  - A. Focus on the Department Program(s)
  - B. Focus on Assessment
  - C. Focus on Students
  - D. Focus on Faculty and Staff

- E. Focus on Support
- F. Focus on Community
- IV. Summary of Significant Developments Since Last Program Review**
- V. Guide for the Future**
- VI. Action Plan**
- VII. Appendices with Supporting Data / Evidence**

Below are the pieces the program review self-analysis should address. *These are guidelines and as such are somewhat flexible but at the same time should provide a framework for what a department should be looking at in reviewing how well it is doing what it does.*

Program Review helps guide us in future directions – sustaining programs of excellence, improving those in need of improvement, or “sunsetting” those whose lifecycle has reached an end. It is through a critical reflection, unearthed by responding to the issues presented in the framework below, that a department will plot the best course for its programs.

### ***I. Overview***

The purpose of the overview is to *briefly* describe the program to individuals, such as members of a review committee or others who may be unfamiliar with the program. This section may also serve to describe the process used to conduct the review and the internal and external context within which the program operates. This section should be brief, since more detail is found in subsequent sections.

### ***II. Mission / Program Purpose***

To help frame the discussion on what the department does, the mission or purpose of the program(s) offered by the department should be indicated. The relationship of the department purpose to overall college mission and goals or any principles of the profession or business practice should be indicated. This brief section should provide an understanding of why the department exists and what it is trying to accomplish.

### ***III. Quality Assurance***

Addressing the quality principles can be done in a variety of ways. To help the department undergoing program review address the key questions

- What are we trying to do?
- How are we doing it?
- Who is responsible for doing it?
- How do we know we are succeeding?
- How can we do even better?

It is helpful to use a lens that focuses on various areas pertaining to how the department knows whether or not what it is doing is working well; i.e., whether it is succeeding in meeting its objectives. To guide this discussion, specific focal areas need to be addressed.

In the material that follows there are suggested topics to address in each focal area department. The framework provided should guide departments in the self-reflection exercise looking at what the department is doing, how well it is doing it, and how it can plan for the future.

**A. Focus on the Department Program(s)**

In this section the department should reflect on the various activities that it provides.

Services*Service Department Outcomes*

In non-academic areas, the objectives or outcomes of what the department is trying to accomplish drive what the department does. *Service department outcomes* arise from answering questions such as: What staff, students, community partners, etc. will have access to, be served with, be provided, be able to do, etc. ...; or, what they will understand, experience, or obtain as a result of a specific service.

*Trends in service provided*

As part of the need to benchmark against others to ensure optimal service is provided, there is a need to monitor how business functionality has evolved, how changes due to technology have led to improvements, how changing student demographics necessitate changed business practices, etc.

*Use of assessment information*

In reviewing how well service department outcomes are being achieved, the department needs to indicate how assessment information has been used in making changes for improvement in services provided to clients.

Finances*Revenues and expenditures*

An indication of whether the costs of the program are aligned with the budgeted resources and, if appropriate, what revenues are generated through program activities. If comparative data are available, benchmarking against others to indicate whether resources seem appropriate given the program size and duties. Trends in budgeted resources and the impact on the department should be addressed.

**B. Focus On Assessment**

In this section the department or program should reflect on how well it has ascertained whether it is accomplishing its mission and achieving its goals and objectives.

*Approach to assessment*

Documented outcomes, results of assessments, what has been learned from assessments, what has changed as a result of assessments, what plans are there for changes in the future, whether appropriate feedback loops to improve student services exist, etc. should be discussed.

*Administrative assessment*

The objectives of the department and how success in achieving them is measured should be indicated. Whether assessment information has provided evidence for you to conclude that you see needs and demands for services that your department cannot currently meet should be discussed. Whether technology is being used appropriately or whether

improvement can be pursued should be addressed. Whether opportunities exist for greater collaboration and team approaches in the delivery of services, whether personnel levels adequately support the services being provided, and how the department compares with similar departments at other institutions should be covered.

*Culture of Inquiry*

While use of assessment information is addressed within each of the focal areas, an overall discussion of how a culture of inquiry aimed at evidence-based decision making is working within the department should be presented.

**C. Focus On Students**

In this section, departments should reflect on how well the program is meeting student needs.

*Demographics*

Analysis or examination of the demographics of the students served, special populations being served or not being served, trends and patterns of students served, comparisons to other Arizona colleges or national trends, etc. should be discussed.

*Student satisfaction*

Surveys of students receiving services should be carried out and discussed. Results of qualitative measures aimed at looking at how best the department is providing services for students or supporting students should be presented. Use of focus groups or interviews should be considered.

*Use of assessment information*

How the department has used assessment information in making changes for improved student services should be addressed.

**D. Focus On Staff**

In this section, programs should reflect on the staff in the program and the degree to which their needs are met, in order for them to in turn be successful in providing student services.

*Organizational chart*

An indication of the responsibilities of personnel in key functional areas and how the structure of the department has changed over time should be indicated. How the staffing, as reflected in the organizational structure, meets the department needs should be indicated.

*Demographics*

Information on full- and part-time staff including coordinators, secretarial/clerical support, technicians, other support positions, etc. and how the personnel within the department have changed over time.

*Staff development*

How the department goes about hiring, coordinating duties, providing support leading to effective services, communicating on department issues, etc. should be addressed. Efforts to improve personnel skills and abilities aimed at enhanced performance or services should be described.

*Professional activities*

Information on staff who have pursued special projects, had reassigned time, are active in professional organizations, sought grants, collaborated with others in partnerships, have publications, have made presentations, or other contributions.

*Use of assessment information*

How assessment information, such as staff appraisals, employee evaluations, opinion surveys, etc. have been used in making changes for improvement.

## **E. Focus On Support**

In this section, programs should reflect on the support issues related to this department – to what degree are they met, where are there kudos to be given, changes that have taken place, improvements to be made, etc. Support is a two-way street: the department may be providing support to others and may receive support from others in accomplishing its mission.

*Technology*

Hardware and software, technical issues and/or support, instructional issues and/or support, training for staff, etc. can be addressed.

*Facilities and equipment*

Cycles for replacement or refurbishment of equipment, furniture, or other infrastructure components should be indicated. Any connection to technology or facility planning should be discussed.

*Learning resources*

Collection of books, databases, journals, videos and whether they are adequate to provide proper support should be indicated. Learning assistance or tutoring connected to the program educational outcomes could be discussed. How resources are made available across campus locations should be considered.

*Marketing and public relations*

Brochures, print materials, website, special events, recruitment efforts, etc. aimed at helping the department provide its services, attract clients, etc. and whether such efforts are successful can be addressed.

*Support services*

Advisement, assessment, testing, job placement, etc. – whether part of what the department does or whether something provided externally to the department but is aimed at the success of the department in meeting its objectives – should be discussed. How services are delivered across campuses and how departments rely on such distributed services should be addressed.

*Resources*

How resources – staffing, operating and capital budgets, grants, etc. – allow the department to meet its objectives or whether there is a lack of suitable resources to meet the aspirations of the department should be addressed.

*Use of assessment information*

How assessment information is used in making changes for improved use of technology, facilities, etc. should be discussed.

## **F. Focus On Community**

In this section, programs should reflect on the degree to which regular input from outside of the college—the community—is sought and how this information is used to help guide the department.

*Community groups*

High school connections, community agency connections, and other forms of community involvement which pertain to the mission of the department should be indicated.

*External requirements or considerations*

Information on certifications, accreditations, licensures, professional organization status or involvement which impact what the department does should be addressed.

*Community issues*

How well the department is meeting its community-based objectives can be discussed.

*Use of assessment information*

How assessment information has been used in making changes to allow the department to meet the changing needs of the community should be indicated.

**IV. Summary of significant developments since the last program review**

During the time since the last time a department went through the program review process, things can change. While some change may be addressed in the Quality Assurance section, it is important to discuss how the department has evolved over time. This portion of the self-analysis should provide a summary of significant developments since the last program review, with particular emphasis on challenges identified during the previous review, accomplishments relating to the action plans, any work yet to be done.

Information on how the department pursued action plan items in the previous program review and how successful the department was in carrying out the action plan should be discussed. Ongoing assessment of how well a department is providing services, should be summarized in this section to help explain how the department has evolved since the last program review took place.

**V. Guide for the future**

The purpose of this section is to describe what is planned as a result of what was learned during this program review. Recommendations for specific actions to improve or sustain quality and to address weaknesses should be clearly stated and focus on what the program itself can do, not on what others might do for the program. At the same time, there should be a discussion on any areas where departments outside the one being reviewed can be better utilized to help the program sustain quality.

Challenges confronting the program at the present time should be discussed in context with where the program would like to be in the future. Community and compliance influences by external factors (e.g., state laws, external accreditation requirements, and changing community demographics) which will impact the department's ability to achieve future goals should be discussed.

This is a section of the program review which provides a guide for the future. Projecting where the program will be in five years should be the focus of this section. For those programs whose lifecycle has reached its end, a plan for how best to “sunset” the activity should be indicated. Aspirations – where the department would like its evolutionary path to take – should be considered in light of the realities it faces. A guide for the future arising from program review should be a realistic plan forward.

**VI. Action Plan**

Culminating the program review effort should be a plan of action aimed at accomplishing the objectives that have been identified as part of the look forward to the future. The action plan can be specific; e.g.,

- Goal
- Objective
- Timeframe
- Responsible Party(ies)
- Resource Implications

when such issues are easily identified. The action plan can also be less specific since many issues may require the program to do some analysis to determine what needs to be accomplished.

A yearly monitoring of progress on the Action Plan – as shown by evidence – should happen so that progress on items identified by the Program Review do not sit on the shelf until the next five-year review is held.

## **VII. Appendices**

Information that helps explain the discussion in the self-analysis report, such as data from Institutional Research, student survey data, suggestions from the community etc., should be provided in appendices so that it may be referenced as needed.

### **A. Program Data/Supporting Evidence**

The specific data that a program needs to help it in doing a self-analysis will vary depending on which particular department is undergoing program review. Nevertheless, the data supporting the analysis should be meaningful and useful rather than data that is voluminous but tells little that would allow a program to learn about itself to the point of making informed decisions for improvement.

Assessment of administrative department outcomes may rely upon a variety of measurement methods. Some may be tracked by a department; e.g., # of transactions processed, # of reports completed, or # of clients served. For many service departments, however, assessment efforts may provide some of the supporting evidence.

Suggested items to look at include the following:

#### **STAFF**

Over a five -year period, by year/term

- Number of staff within the department

#### **FINANCIAL**

Over a five year period,

- Expenditures by type

#### **PERFORMANCE INDICATORS**

- Student satisfaction surveys
- Focus groups
- Facilities Improvement Plans
- Technology Improvement Plans

- Number and type of complaints
- Comparison to peer institutions
- Alignment with professional organization best practices
- Tracking the use of a survey
- Tracking complaints and how they are resolved
- Benchmarks set by national, state, or peer organizations

ACADEMIC AND ADMINISTRATIVE  
SERVICES REVIEW

*Administrative Practice Guide*

California State University, Monterey Bay

Fall 2010

## **Table of Contents**

<b>Academic and Administrative Services Review Purpose</b>	<b>Pg 3</b>
<b>Academic and Administrative Services Review Schedule</b>	<b>Pg 4</b>
<b>Academic and Administrative Services Review Process</b>	<b>Pg 5</b>
<b>Appendix A: Services Review Committee Protocol</b>	<b>Pg 10</b>

## **Academic and Administrative Services Review Purpose**

Beyond its cyclic review of academic degree programs, CSU Monterey Bay conducts cyclic reviews of a diverse array of programs and services that perform functions that are critical to the success of students and the University. This document describes the model that will be followed to review the operations and the effectiveness of these programs and services.

### **Purposes for Service Review**

The purposes and goals for reviewing services and programs are essentially the same as those that guide:

- **Quality Assurance:** services review is a way of fulfilling our responsibility to assure our students and parents, the public, the Board of Trustees, WASC, and ourselves that we provide quality that supports the University's mission and student learning.
- **Program Improvement:** services review provides salient information and analysis that assists us in our responsibility to continuously improve the programs and services that CSUMB offers.
- **Program and Resource Alignment:** services review provides an occasion to examine the resources dedicated to programs and services. The university is committed to providing programs and services efficiently and effectively.

The procedure that follows is focused on thoughtful, constructive, data-informed review of academic and administrative services.

While services review takes a broad look at a program or service, it can never be exhaustive. The choices made as to where energy and attention will be focused should be driven by a consensus within the service area about what the most pressing questions are.

Where programs or services deal with different populations, the review should address each population (e.g., undergraduate and graduate; on-campus and off-campus).

## Academic and Administrative Services Review Schedule

Services and programs will be reviewed on a seven-year cycle. New programs will have their first review five years after initial implementation and will then be placed on a seven-year cycle for subsequent reviews. Dates for the initial set of reviews of existing programs or services are provided below.

<b>Program</b>	<b>Reports To</b>	<b>Program Review Begins</b>
Academic & Centralized Scheduling	Enrollment Management	Fall 2013
Academic Skills Achievement Program	Academic Affairs	Fall 2011
Admissions & Recruitment	Enrollment Management	Fall 2012
Athletics, Intramurals & Recreational Sports	Student Affairs	Fall 2014
Campus Health Center	Student Affairs	Fall 2010
Campus Service Center	Enrollment Management	Fall 2014
Career Development	Enrollment Management	Fall 2010
Early Outreach and Support	Enrollment Management	Fall 2014
Extended Education	Academic Affairs	Fall 2013
Facility Management & Planning	Administration & Finance	Fall 2009
Financial Aid	Enrollment Management	Fall 2015
First Year Seminar	Academic Affairs	Fall 2015
Financial Services	Administration & Finance	Fall 2011
Grants & Contracts	Academic Affairs	Fall 2013
Human Resources	Administration & Finance	Fall 2010
Information Technology	Academic Affairs	Fall 2011
International Programs	Academic Affairs	Fall 2014
Institutional Assessment & Research	Academic Affairs	Fall 2012
Judicial Affairs	Student Affairs	Fall 2012
Library	Academic Affairs	Fall 2014
Personal Growth and Counseling Center	Student Affairs	Fall 2012
Records & Registration	Enrollment Management	Fall 2011
Service Learning Institute	Academic Affairs	Fall 2010
Student Activities and Leadership	Student Affairs	Fall 2009
Student Disability Resources	Student Affairs	Fall 2013
Student Housing & Residential Life	Student Affairs	Fall 2009
Teaching, Learning and Assessment	Academic Affairs	Fall 2010
Undergraduate Advising Center	Enrollment Management	Fall 2010
University Policy Department	Administration & Finance	Fall 2012
University Writing Program	Academic Affairs	Fall 2012

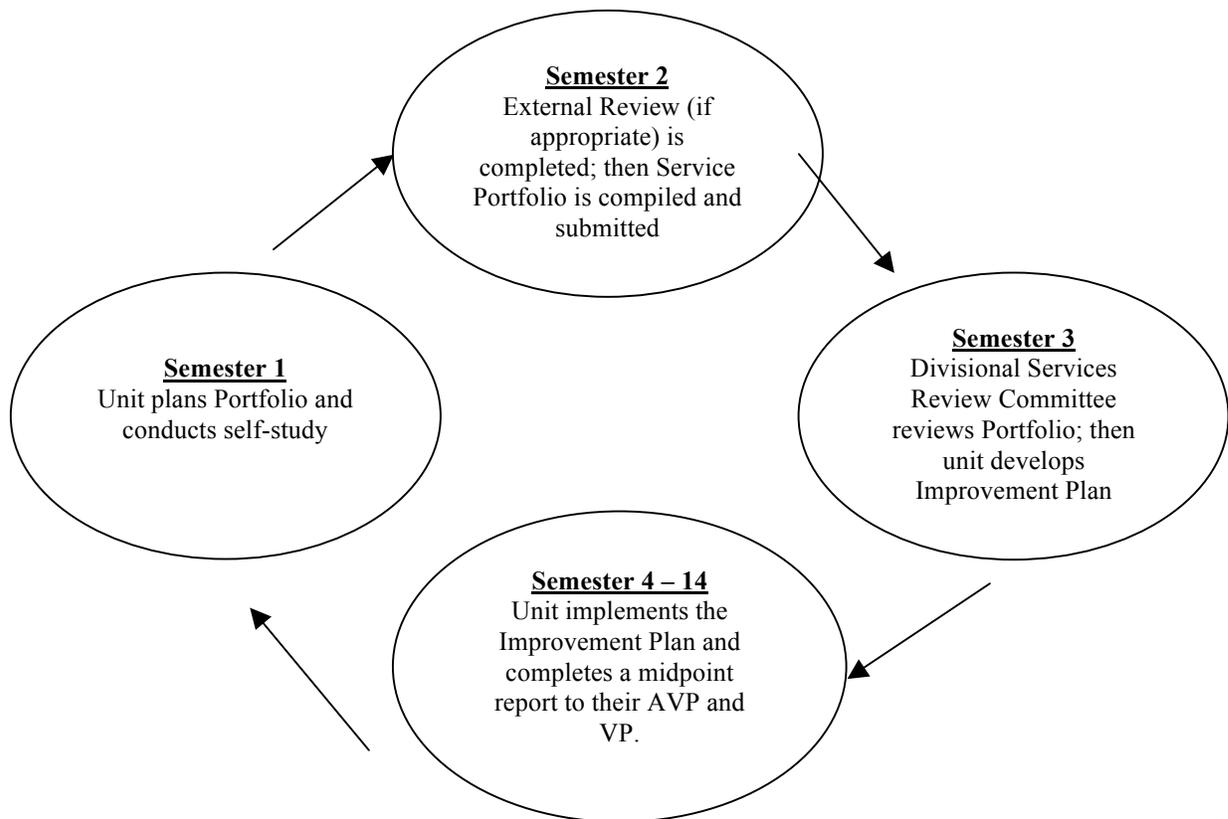
## Academic and Administrative Services Review Process

Academic and Administrative Services Review is a cyclical process divided into four main parts: **1) detailed services review planning, 2) the assembly and submission of a Services Review Portfolio (includes both the self-study and external review, if appropriate), 3) review by a committee that provides feedback and informs the development of an improvement plan and 4) an Improvement Plan.**

The bulk of this work occurs during the first three semesters of the seven year review cycle. At the end of the first three semesters the Improvement Plan and the feedback report from the Divisional Services Review Committee shall be attached to the front of the Services Review Portfolio. The complete set of review documents shall be retained in the office of the respective Vice President: Academic Affairs, Student Affairs, or Administration and Finance, and within the department following its review.

Three years after the Improvement Plan is adopted, the unit will provide an update to their AVP and Vice President.

**Diagram 1: Program Review Process**



## I. Services Review Planning

The planning of a service review will include:

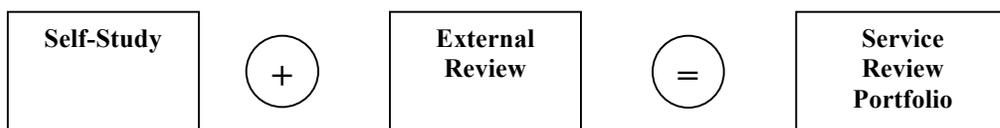
- A. Designating a service review coordinator who is responsible for the oversight of the review processes** (self-study, external review, development and implementation of improvement plan); this person could be, but is not limited to, the Program Coordinator, Associate Director, or Director.
- B. Establishing a timeline for completing tasks**
- C. Requesting relevant institutional data from IAR**
- D. Identifying external reviewers, if appropriate**
- E. Establishing a detailed outline for the Services Review Portfolio**

## II. Services Review Portfolio

Developing the Services Review Portfolio is the largest portion of work in a review. The Portfolio consists of a self-study that addresses the guiding questions laid out below. It may also include an external review, if one is deemed appropriate.

Once the Services Review Portfolio is compiled, the unit shall submit the completed portfolio to the division head or Vice President. The Vice President, or designee, is responsible for forwarding the document on to the Services Review Committee for review and feedback.

**Diagram 2: Composition of Service Review Portfolio**



## III. Services Review Committee

The Provost, the Vice President for Student Affairs, and the Vice President for Administration and Finance will each convene a Divisional Program and Services Review Committee. The Committee may include faculty, staff, administrators, students, and/or community members.

The Committee shall review the portfolios in accordance with the protocol found in Appendix A of this document, and may engage program personnel in discussions about the program or service area as appropriate.

The Committee shall prepare a written report of its observations and feedback, and will include specific recommendations to the program/department that are meant to inform a detailed improvement plan to be implemented in the years leading up to the next review cycle.

#### **IV. Improvement Plan**

The Improvement Plan is perhaps the most valuable section of the entire services review process. This plan is developed after the Services Review Committee completes its evaluative review of the Portfolio and makes recommendations to the unit that are meant to inform a detailed improvement plan to be implemented over the next review cycle. This Improvement Plan is developed by the program personnel and upon completion, is vetted, approved, and signed by the Vice President of the unit that houses the program.

The Improvement Plan identifies and prioritizes strategic actions with specific and expected outcomes for improved services. The plan shall include indicators for successfully attaining expected outcomes and/or learning outcomes along with a timeline for manifested success. It is important that the Improvement Plan be thoughtful and realistic.

#### **V. Midpoint Progress Report**

In the third year of the program review cycle, each unit shall submit a midpoint report detailing the progress made in the implementation of the Improvement Plan to the AVP in the division for review by the Vice President.

Specifically, the report should include:

- 1) A review of the environmental context (see A-D of the *Guiding Questions and Organization of the Portfolio* below). Is this information still accurate? If not, what has changed and why?
- 2) A summary of the progress made in achieving the goals and initiatives stated in the Improvement Plan. Please reference the indicators and data utilized by the unit to measure desired improvements.
- 3) If applicable, describe any revisions or updates to the Improvement Plan (since its original submission).

## **Guiding Questions and Organization of Portfolio For the Review of Academic and Administrative Services<sup>1</sup>**

The following represents the organization of the review portfolio and offers questions and suggestions to guide the process. While services review takes a broad look at a program or a service, it cannot be exhaustive. The guiding questions offered below are intended to help focus and generate additional questions that each unit will pursue. Services review teams should use them but not be constrained by them. Include in each section rationales for current choices, targets, etc., as appropriate, that address the specific needs and constraints of the program or service. Where services deal with different populations, the review should address each population (e.g., undergraduate and graduate; on-campus and off-campus).

**A. Mission Statement:** How does the unit's mission align with those of the University and the division? This statement should include approximately 3-5 sentences that identify the name of the department, its primary functions, modes of delivery and target audiences.

**B. Planning Goals:** What are the goals of the service or program? Planning goals are broad statements that describe the overarching, long-range intentions of an administrative unit. Goals are used primarily for general planning, as the starting point for the development and refinement of objectives and/or student learning outcomes.

**C. Objectives and/or Learning Outcomes:** What are the unit's objectives and outcomes? Objectives are related to service improvement around issues like timeliness, efficiency, and participant satisfaction. Learning outcomes address what a person learns or better understands or how a person changes by participating in the program or utilizing the service. Both objectives and learning outcomes are measurable statements that provide evidence as to how well you are reaching your goals.

**D. Program Staff and Resources:** How well does the current level and configuration of the staff provide the knowledge, expertise, and experience required to meet the objectives and outcomes? How well do the current funding and facilities provide for the resources required to meet the objectives and outcomes?

**E. Measures:** What measures, methodologies and timeframe will be used for data collection? Measures also should identify the population being surveyed and/or tested. Provide materials such as survey instruments, check lists, focus group protocols, etc., in an appendix.

---

<sup>1</sup> We are indebted to the work of Sacramento State's Division of Student Affairs from which we've borrowed extensively in this section.

**F. Results:** What are the results of data analysis? Include a brief narrative of findings and/or essential tables or graphs. The results should indicate the extent to which the objectives and/or student learning outcomes were met.

**G. Conclusions:** How will we use the results to “close the loop?” That is, the conclusion should summarize briefly key findings and identify what decisions and/or modifications will be made on the basis of these analyses.

**H. External Review:** Programs and service areas are encouraged to consider the usefulness of external reviews when they are planning their review. External reviews are of particular value when units identify challenges for which they would benefit from outside consultation or when they wish to see their practices and outcomes in comparative perspective. Units wishing an external review should consult their Vice President.

External reviewers will provide a report containing observations and feedback on program or service quality based on:

- a) A review of the Services Review Portfolio
- d) On-site interviews with students
- e) On-site discussions with faculty and/or staff, as appropriate.

Reports of external reviewers will be included in the service review documents provided to the Divisional Services Review Committee.

## Appendix A:

### CSU Monterey Bay Program and Services Review Committee Protocol

The Vice Presidents for Academic Affairs, Student Affairs, and Administration and Finance will each convene a Divisional Program and Services Review Committee. The Committee may include faculty, staff, administrators, students, and/or community members.

The Committee shall review the portfolios in accordance with guiding questions found below, and may engage personnel in discussions about the program or service as appropriate.

The Committee shall prepare a written report of its observations and feedback, and will include specific recommendations to the program/department that are meant to inform a detailed improvement plan to be implemented in the years leading up to the next review cycle. This report shall be submitted to the personnel who prepared the service review, their supervisor, and the Vice President of the department.

The deliberation of each Service Review Portfolio by the Services Review Committee shall be guided by the following:

#### **Areas for Focused Analysis**

The following represents the organization of the review portfolio and offers questions and suggestions to guide the evaluation process. While program review takes a broad look at a program or a service, it cannot be exhaustive. The guiding questions offered below are intended to help focus and generate additional questions that each unit will pursue. The Services Review Committee should use them but not be constrained by them.

**A. Mission Statement:** Does the unit's mission align with those of the University and the division?

**B. Planning Goals:** Does the service review clearly articulate the goals of the service or program? Is there a direct relationship between the stated planning goals and the University Strategic Plan? To what extent do the identified planning goals support the major goals of the University Strategic Plan? [Planning goals are broad statements that describe the overarching, long-range intentions of an administrative unit. Goals are used primarily for general planning, as the starting point for the development and refinement of program objectives and/or student learning outcomes.]

**C. Objectives and/or Learning Outcomes:** Does the service review clearly articulate the unit's objectives and outcomes? To what extent do the objectives and/or outcomes

support the identified planning goals of the program/service? [Program objectives are related to service improvement around issues like timeliness, efficiency, and participant satisfaction. Learning outcomes address what a person learns or better understands or how a person changes by participating in the program or utilizing the service. Both program objectives and learning outcomes are measurable statements that provide evidence as to how well you are reaching your goals.]

**D. Program Staff and Resources:** How well does the current level and configuration of the staff provide the knowledge, expertise, and experience required to meet the objectives and outcomes? How well do the current funding and facilities provide for the resources required to meet the objectives and outcomes?

**E. Measures:** What measures, methodologies and timeframe used for data collection are identified in the review? Are measures and benchmarks specified? Do they identify the population being surveyed and/or tested?

**F. Results:** Do the results of the data analysis indicate the extent to which the objective and/or learning outcome was met? How is data used to inform and/or refine planning goals, program objectives, and/or learning outcomes?

**G. Conclusions:** Does the conclusion summarize key findings and identify what decisions and/or program modifications will be made on the basis of these analyses? Does the Services Review Committee concur with this summary? Are there additional and/or substantially different approaches recommended by the Review Committee and/or external reviewer?

### **Summative Reflection**

- Programs and services are developed and enhanced over time. What development and/or changes in standard operating procedures/business practice, resource allocation, and/or professional learning were demonstrated in the portfolio?
- What areas of program strength and potential improvement emerged in the internal review and the external review?
- Having read the portfolio, what stands out to you about the program/service and this review? What overarching, constructive feedback can you provide to the program faculty that might assist them as they develop the Improvement Plan?