Imperial Valley College

2016-17 Comprehensive Academic Program Review

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| **ACADEMIC YEAR** | **2016-2017**  (year info entered into SPOL) |
| **PROGRAM** | Verify the name of your program in SPOL |
| **DESCRIPTION or PURPOSE of PROGRAM** | Verify the descriptor in SPOL is accurate |
| **DIVISION** | Make sure SPOL has your program in the correct division |
| **DEPARTMENT** |  |
| **SUBMITTED BY:** |  |

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| **INSTITUTIONAL GOAL 1** | **INSTITUTIONAL GOAL 2** | **INSTITUTIONAL GOAL 3** | **INSTITUTIONAL GOAL 4** |
| **INSTITUTIONAL MISSION AND EFFECTIVENESS**:  The College will maintain programs and services that focus on the mission of the College supported by data-driven assessments to measure student learning and student success. | **STUDENT LEARNING PROGRAMS AND SERVICES**:  The College will maintain instructional programs and services which support student success and the attainment of student educational goals. | **RESOURCES**:  The College will develop and manage human, technological, physical, and financial resources to effectively support the College mission and the campus learning environment. | **LEADERSHIP AND GOVERNANCE**:  The Board of Trustees and the Superintendent/President will establish policies that assure the quality, integrity, and effectiveness of student learning programs and services, and the financial stability of the institution. |
| **1.1** Develop systems and procedures that establish the mission of the college as the central mechanism for planning and decision making.  **1.2** Develop an institutional score card to assess student learning that drives integrated planning and resource allocation.  **1.3** Develop systems and procedures to ensure that the college maintains a collegial and self-reflective dialogue that improves effectiveness.  **1.4** Develop systems that are inclusive, cyclical, and understood by all stakeholders. | **2.1** Ensure that all instructional programs, regardless of location or means of delivery, address and meet the current and future needs of students.  **2.2** Review program learning outcomes annually (or biennially) to assure currency, improve teaching and learning strategies, and raise student success rates.  **2.3** Ensure that all Student Services programs, regardless of location or means of delivery, address and meet the current and future needs of students.  **2.4** Ensure that all Student Services programs engage in a process of sustainable continuous quality improvement by annual review of Service Area Outcomes, and annual Program Review.  **2.5** Ensure that the Library meets as closely as possible that “Standards of Practice for Calif CC Library Faculty and Programs” of the Academic Senate for Calif CC.  **2.6** Ensure that instructional labs continue to collaborate in sharing financial and human resources, thus maintaining continuous quality improvement. | **3.1** Develop and implement a resource allocation plan that leads to fiscal stability.  **3.2** Implement a robust technological infrastructure and the enterprise software to support the college process.  **3.3** Build new facilities and modernize existing ones as prioritized in the facility master plan.  **3.4** Design and commit to a long-term professional development plan.  3.5 Raise the health awareness of faculty, staff, and students. | **4.1** Review all Board policies annually to ensure that they are consistent with the College mission statement, that they address the quality, integrity, and effectiveness of student learning programs and services, and that they guard the financial stability of the institution.  **4.2** Maintain a clearly defined Code of Ethics that includes appropriate responses to unprofessional behavior.  **4.3** Ensure that the Board of Trustees is informed and involved in the accreditation process.  **4.4** Ensure that processes for the evaluation of the Board of Trustees and the Superintendent/President are clearly defined, implemented, and publicized.  **4.5** Establish a governance structure, processes, and practices that guarantee that the governing board, administration, faculty, staff, and students will be involved in the decision making process. |

1. **INSTITUTIONAL GOALS**
2. **PROGRAM OBJECTIVES**
3. **PAST – EVALUATION OF OBJECTIVES FROM PREVIOUS PROGRAM REVIEW CYCLE**

* **SPOL Planning Module:** 
  + Provide an assessment (status update) of each objective and task in year 2015-2016.
  + Ensure each objective is labeled as “completed,” “closed,” or “partially completed-will complete next year,” for the 2015-16 year’.
  + Assessment should address any impact on student achievement or program improvement
* **Additional information:**
  + Objective/task steps to status update provided at the end of this document
  + You may prefer to do data analysis in Sec. II.B (next page) first as it must be entered in a different module - Accreditation Module.

1. **PRESENT – DATA ANALYSIS and PROGRAM HEALTH.**

In the **SPOL Accreditation Module, provide a narrative s**ummarizing your analysis of all disaggregated data - **time** (day/eve/night), **gender, age, ethnicity, and distance education**. At the bottom of the narrative all graphs and/or trend data should be linked and/or uploaded as a file into SPOL.

1. **Enrollment and Fill Rates** (Discuss the trends in the rates for each program by time, gender, age, ethnicity, DE/face-2-face)

* **Enrollment**:
* **Fill Rates**:
* **Overall:**

1. **Productivity** (What are the trends in productivity? [[1]](#footnote-1)

* **Productivity**:
* **Overall**:

1. **Success and Retention: (**Discuss rates for each program by time, gender, age, DE/face-2-face) and identify gaps)

* **Success**:
* **Retention**:
* **Overall**:

1. **Success and Retention by Ethnicity**

* **Success**:
* **Retention**:
* **Overall**:

1. **Degrees and Certificates: (**Discuss the trends in the number of degrees and/or certificates awarded.)
2. **Program Changes**

* **Summarize changes:** Provide summary of anyrevisions, additions, deletions, or alternate delivery methods to courses/programs based on the last program review and include an analysis of the effect on student success in this program.
* **Evaluate Viability Overall**:

Discuss this program’s viability based on:

* + # Program Completions or other measure of Student Success Rates
  + # FTES
  + Labor Market Information or employability
  + Quality of Outcomes based on community need, industry need, college need, etc
  + Contributions to Other Programs; e.g. Math 91, HIST 121, etc.
* Final statement should consider the above to identify if this program is projected to be:
  + strong or growing,
  + stable with little change,
  + declining or fluctuating trends, or
  + At-risk or mitigation plan needed.

Next, in the **SPOL Planning Module, update the 2016-2017 Objectives** if applicable. For many of the 2016-17 objectives it is too soon to have accomplished the goal, but for some, e.g. new hires, the task may be completed already.

**This section, II. B., should be used as a guide to develop FUTURE objectives and ‘Enhanced Requests’ for budgeted funds.**

1. **FUTURE Program Objectives**

**Please make sure you have “SMART” PROGRAM OBJECTIVES (Specific, Measurable, Attainable, Relevant, Time-Limited)**

In the **SPOL Planning Module, provide one goal for the each planning year.**

* Future objectives should be related to program improvement, growth, unmet needs or other issues from Section II. B.
* Each goal must address at least one of the institutional goals.
* Make sure your objective is not dependent on a budget enhancement request.
* Any supportive documentation or URL links can be uploaded in SPOL.

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| **2017-18 PROGRAM OBJECTIVE(S)** | | | **INSTITUTIONAL GOAL(S)**  **(Select 1 primary goal)** |
| **Identify 2017-18 Objective:** | | | **1 Mission & Effectiveness** (primary?)  1.1  1.3  1.2  1.4  **2 Student Learning Outcomes** (primary?)  2.1  2.4  2.2  2.5  2.3  2.6  **3 Resources** (primary?)  3.1  3.4  3.2  3.5  3.3  **4 Leadership & Governance** (primary?)  4.1  4.4  4.2  4.5  4.3 |
| **Objective Description:** | | |
| **Task(s)** one or more tasks to complete this objective/goal | | |
|  | | |
| **Timeline/Target Date for Completion:** | | |
| **B.** | | |
| **Timeline/Target Date for Completion:** | | |
| **C.** | | |
| **Timeline/Target Date for Completion:** | | |
| **How will this objective be measured?** | | |
| **How will the completion of tasks identified improve student/program success?** | | |
| **Who are the responsible parties and assigned user(s)?** | | |
| **Please fill the section below only if your tasks require a budget enhancement request – if you have more than one task requiring a resource request, please copy and paste the sections below.** | | |
| **Identify Task:** | | |
| Facilities  Marketing  Technology  Professional Development  Staffing  Administrative | | |
| One-Time  Recurring | General District  Categorical (Specify) | $ |
| **Timeline/Target Date for Completion:** | | |
| **Expense Type (mark all that apply)** | **Funding Type** | **Budget Request** |
| One-Time  Recurring  Legally Mandated | General District  Categorical (Specify) | **$** |
| **If you have more objectives, please replicate the sections above and number your objectives.** | | | |

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| **2018-19 PROGRAM OBJECTIVE(S)** | | | **INSTITUTIONAL GOAL(S)**  **(Select 1 primary goal)** |
| **Identify 2018-19 Objective(s):** | | | **1 Mission & Effectiveness** (primary?)  1.1  1.3  1.2  1.4  **2 Student Learning Outcomes** (primary?)  2.1  2.4  2.2  2.5  2.3  2.6  **3 Resources** (primary?)  3.1  3.4  3.2  3.5  3.3  **4 Leadership & Governance** (primary?)  4.1  4.4  4.2  4.5  4.3 |
| **Objective Description:** | | |
| **Task(s)** one or more tasks to complete this objective/goal | | |
|  | | |
| **Timeline/Target Date for Completion:** | | |
| **B.** | | |
| **Timeline/Target Date for Completion:** | | |
| **C.** | | |
| **Timeline/Target Date for Completion:** | | |
| **How will this objective be measured?** | | |
| **How will the completion of tasks identified improve student/program success?** | | |
| **Who are the responsible parties and assigned user(s)?** | | |
| **Please fill the section below only if your tasks require a budget enhancement request – if you have more than one task requiring a resource request, please copy and paste the sections below.** | | |
| **Identify Task:** | | |
| Facilities  Marketing  Technology  Professional Development  Staffing  Administrative | | |
| One-Time  Recurring | General District  Categorical (Specify) | $ |
| **Timeline/Target Date for Completion:** | | |
| **Expense Type (mark all that apply)** | **Funding Type** | **Budget Request** |
| One-Time  Recurring  Legally Mandated | General District  Categorical (Specify) | **$** |
| **If you have more objectives, please replicate the sections above and number your objectives.** | | | |

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| **2019-20 PROGRAM OBJECTIVE(S)** | | | **INSTITUTIONAL GOAL(S)**  **(Select 1 primary goal)** |
| **Identify 2019-20 Objective(s):** | | | **1 Mission & Effectiveness** (primary?)  1.1  1.3  1.2  1.4  **2 Student Learning Outcomes** (primary?)  2.1  2.4  2.2  2.5  2.3  2.6  **3 Resources** (primary?)  3.1  3.4  3.2  3.5  3.3  **4 Leadership & Governance** (primary?)  4.1  4.4  4.2  4.5  4.3 |
| **Objective Description:** | | |
| **Task(s)** one or more tasks to complete this objective/goal | | |
|  | | |
| **Timeline/Target Date for Completion:** | | |
| **B.** | | |
| **Timeline/Target Date for Completion:** | | |
| **C.** | | |
| **Timeline/Target Date for Completion:** | | |
| **How will this objective be measured?** | | |
| **How will the completion of tasks identified improve student/program success?** | | |
| **Who are the responsible parties and assigned user(s)?** | | |
| **Please fill the section below only if your tasks require a budget enhancement request – if you have more than one task requiring a resource request, please copy and paste the sections below.** | | |
| **Identify Task:** | | |
| Facilities  Marketing  Technology  Professional Development  Staffing  Administrative | | |
| One-Time  Recurring | General District  Categorical (Specify) | $ |
| **Timeline/Target Date for Completion:** | | |
| **Expense Type (mark all that apply)** | **Funding Type** | **Budget Request** |
| One-Time  Recurring  Legally Mandated | General District  Categorical (Specify) | **$** |
| **If you have more objectives, please replicate the sections above and number your objectives.** | | | |

1. (WSCH/FTEF) The goal is 525 as per state guidelines. A low number means that we are below target levels for productivity. For example, in a small class that has a mandated cap of 15 students, the fill rate may be 100% but the productivity number (WSCH/FTEF) will be very low. A class with a cap of 40 students with a 100% fill rate will have a productivity number close to or above 525. [↑](#footnote-ref-1)