

Appendix G Administrative Unit Program Review for IEQA

AU Full Official Name			
Campus	National	AU Review Submission Date	19 SEP 2015
Completed by	VPIEQA	AU Review Cycle	2012-2015
Supervisor	President, CEO	Date submitted to Supervisor	19 SEP 2015
Mission and Goals			
The Institutional Mission, Vision, Core Values, and Goals drive all college's activities. Describe how your unit support each of these			
<p>Institutional Mission The College of Micronesia-FSM is a learner-centered institution of higher education that is committed to the success of the Federated States of Micronesia by providing academic, career and technical educational programs characterized by continuous improvement and best practices.</p>	<p>How the unit support's the college's mission: IEQA's Department mission statement effectively articulates how the department support's the college mission:</p> <p><i>Institutional Effectiveness & Quality Assurance</i> assesses and supports the capacity and extent to which the college fulfills and maintains its mission; while fostering and embedding a college culture of sustainable continuous quality improvement and collaboration at all institutional levels. At the core of effectiveness and ongoing quality improvement is a focus on student learning and student success. Leadership and guidance are provided to the college community to ensure accountability as accreditation and regulatory standards are understood and met, and/or exceeded at all times.</p> <p>The VPIEQA also serves as the college's accreditation liaison officer (ALO) to the Accrediting Commission of Community and Junior Colleges (ACCJC), Western Association of Schools and Colleges (WASC). A specific role of the ALO as per the ACCJC <i>Policy on the Role of Accreditation Liaison Officers</i> is to stay knowledgeable about accreditation, including the Eligibility Requirements, Accreditation Standards, and Commission policies; promote an understanding of accreditation requirements, quality assurance, and institutional effectiveness among the constituencies at the college; and communicate information about accreditation and institutional quality that is available from the ACCJC, including letters sent to the institution and materials posted to the ACCJC's website.</p>		
<p>Institutional Vision College of Micronesia-FSM will provide educational opportunities of the highest quality and will embrace the life-long pursuit of knowledge and the enrichment of the diverse Micronesian communities we serve.</p>	<p>How the unit support's the college's vision: VPIEQA's major functional responsibilities includes providing leadership in accordance with the mission, vision, and core values established by the college, furthering goals and strategic initiatives.</p>		
<p>Institutional Core Values</p> <ul style="list-style-type: none"> • Students • Communication • Participatory Governance • Empowerment • Innovation 	<p>How the unit support's college values: VPIEQA's major functional responsibilities include: promotes the college values; participates in standing committees and working groups as assigned; ensures that personnel under the department actively participate in standing committees and working groups when assigned; and promotes the values of the college in personal and professional life. VPIEQA also serves as the secretariat to college-wide standing committees. VPIEQA oversees ITO which has a major role in the communications of the college, and VPIEQA has been working to ensure the college delivers on its <i>Communication Policy (BP 2100)</i> by meeting the explicit <i>Communication Policy Administrative Procedures</i> implementation and evaluation goals (AP 2100). Additionally, VPIEQA uses the Strengthening Purposeful Dialogue manual for trainings, committees, working groups, and department work, as often as possible, to improve upon communication efforts and strategies, and to gain greater college awareness and use of the publication.</p>		
<p>Institutional Strategic Directions</p> <ol style="list-style-type: none"> 1. Focus on student success 2. Emphasize academic offering in service to national needs 3. Be financially sound, fiscally responsible, and build resources in anticipation of future needs 4. Invest in and build a strong capacity in human capital 5. Become a learning organization through development of a learning culture guided by learning leaders 6. Evoke an image of quality 	<p>How the unit support's the college's strategic directions: VPIEQA is responsible for providing leadership and coordination for accreditation, strategic planning, institutional research, institutional effectiveness and evaluation, and quality assurance. In addition to strategic planning itself, the position of VPIEQA is especially responsible for Strategic Direction 6: The College of Micronesia-FSM will be viewed as a model institution for best practices exhibited through quality, excellence, and integrity of both employees and graduates. The college will maintain regional accreditation without sanction for the maximum six-year cycle allowed by the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges. Strategic Plan Goal 6.1: Achieve recognition as a best practices institution by:</p> <ul style="list-style-type: none"> • Exhibiting quality, excellence, and integrity through employees, students, and graduates; • Meeting and/or exceeding accreditation standards at all times; and • Exploring additional models of quality assurance. 		
AU Mission, Goals, and Objectives)			

COM-FSM Program Assessment and Program Review Procedures Manual

<p>Mission Statement <i>Institutional Effectiveness & Quality Assurance</i> assesses and supports the capacity and extent to which the college fulfills and maintains its mission; while fostering and embedding a college culture of sustainable continuous quality improvement and collaboration at all institutional levels. At the core of effectiveness and ongoing quality improvement is a focus on student learning and student success. Leadership and guidance are provided to the college community to ensure accountability as accreditation and regulatory standards are understood and met, and/or exceeded at all times.</p>	<p>Goals</p> <ul style="list-style-type: none"> • Lead, monitor, evaluate, and implement all college planning processes with broad-based participation and robust, self-reflective constituent dialogue leading to a learning-centered community college. • Lead, coordinate, and document systematic, ongoing assessment of all programs and student learning outcomes to inform changes necessary towards improving student learning. • Generate comprehensive reports and communicate results of ongoing institutional assessments to inspire self-reflective constituent dialogue and ongoing quality improvement across the college. • Develop and promote frameworks for research at all levels of the college. • Communicate documented assessment results with quality assurance issues to relevant constituents to assure quality is maintained. • Support institutional decision-making by providing timely quantitative and qualitative data to inform planning processes. • Promote development of an evidence-based decision making culture for the college. • Promote and enhance a college culture of collaboration. • Ensure, through planning processes, institutional resources are allocated to support student learning. • Lead and guide the college community to ensure accreditation eligibility requirements and standards are met and/or exceeded. • Support student learning by providing quality IT services to students and the college community. • Support institutional data through development and maintenance of a secure Student Information System (SIS) and integration of institutional support software. • Establish and maintain effective communication and partnerships with community organizations, government agencies, state departments of education, and other entities involved with COM-FSM programs and services, as it relates to accreditation and quality assurance. • Promote an informed community. 	<p>Objectives See attached assessment reports for 2014 and 2015.</p> <ul style="list-style-type: none"> • FY2013_QANCVP_W2 • FY2014_QANCVP_TracDat • FY 2015_QANCVP_TracDat
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AU Description, Data and Trends Analysis

Describe the purpose, components, and staffing of the AU				
Current Staffing. Complete the table below				
List each position by classification	Percent of Employment	Months per Year of Employment	Source of Funding	FTE
Vice president for institutional effectiveness and Quality Assurance (VPIEQA), Accreditation Liaison Officer (ALO)	100%	12	Annual Budget	1
Assessment Coordinator and Assistant ALO	100%	12	Annual Budget	1

Other Resources. Complete the table below				
List each position by classification	Services Provided	Number of Hours	Overall Cost	Source of Funding
Not applicable	Not applicable	Not applicable	Not applicable	Not applicable
Utilize the data provided in the above table in a discussion of the appropriateness of the staffing levels of the AU				
<p>The position of the Assessment Coordinator and Assistant ALO (ACAALO) has not been as effective as intended regarding assessment coordination. The ACAALO had to coordinate every effort with the vice president for instructional affairs (VPJA), the dean of academic programs (DAP), as well as the VPIEQA. Additionally, the ACAALO had no authority over faculty or staff making accountability for the quality of assessments and timeliness of assessment products by deadlines difficult to ensure. Though there was a strong need for an assistant ALO, especially as the college is completing its accreditation self evaluation process, the imperative concern for quality academic assessment was considered equally as important. With the resignation of the ACAALO, the VPIEQA took advantage of that timing and worked with VPJA to instead develop the position of Dean of Academic Assessment. The position would have both authority and accountability for the quality and timeliness of academic assessment of SLOs at the course, program, and institutional level. With this level of authority and responsibility, the college could also offer a more reasonable salary that would attract qualified, talented candidates who are passionate about and experienced with assessment of student learning. The position is currently being advertised.</p> <p>There is a need for an assistant ALO or a fully dedicated ALO. An assistant ALO ensures training and knowledge continuity in addition to assistance to the VPIEQA. VPIEQA is the only vice presidential position that does not have an associated administrative assistant, making this assistant ALO support essential to overall effectiveness. This assistant ALO might be an existing position expansion of scope and responsibilities, or an additional, separate position. Alternatively, could be a fully dedicated college ALO. At this time, and with the complexity of the institution, the duties of the ALO are a full-time position. Coupling the ALO with the VPIEQA position at this time, and without support makes VPIEQA less efficient in managing a department. Currently, the VPIEQA spends a great deal of time working after hours, and still the department is not strategically operating as effectively as it could. The work is too much for one human, even one fine with evening and weekend work.</p>				
How does this AU serve the population of the College?				
<p>IEQA service to the college is collectively summarized in the IEQA mission:</p> <p><i>Institutional Effectiveness & Quality Assurance</i> assesses and supports the capacity and extent to which the college fulfills and maintains its mission; while fostering and embedding a college culture of sustainable continuous quality improvement and collaboration at all institutional levels. At the core of effectiveness and ongoing quality improvement is a focus on student learning and student success. Leadership and guidance are provided to the college community to ensure accountability as accreditation and regulatory standards are understood and met, and/or exceeded at all times.</p>				

Since the previous AU program review, what significant changes have occurred that impact the services of the AU?		
<p>This department was newly created in June 2012, therefore, this is the first AU program review for IEQA. Two major changes have occurred since the inception of the AU:</p> <ul style="list-style-type: none"> • The creation of the ACAALO position • The elimination of the ACAALO position <p>The impact was described above.</p>		
What methods are used to evaluate AU's effectiveness to the population that interacts with it?	What do the results of the above methods of evaluation indicate about the effectiveness of the AU?	How have the results of this analysis been used to make improvements to services provided by the AU?
<p>This entire section is addressed in assessment reports:</p> <ul style="list-style-type: none"> • FY2013_QANCVP_W2 • FY2014_QANCVP_TracDat • FY 2015_QANCVP_TracDat 	<ul style="list-style-type: none"> • FY2013_QANCVP_W2 • FY2014_QANCVP_TracDat • FY 2015_QANCVP_TracDat <p>Quality and timeliness of academic program assessments and program reviews needed improvement. Focus needed to shift from reporting compliance to purposeful dialogue towards implementing improvements and following up on the success of those improvements. The ACAALO position was not as effective as desired towards those ends.</p>	<ul style="list-style-type: none"> • FY2013_QANCVP_W2 • FY2014_QANCVP_TracDat • FY 2015_QANCVP_TracDat <p>The ACAALO position was transferred to IA and reworked as a Dean of Academic Assessment. The position is currently being advertised.</p>

<p>College reports to PPEC and ACCJC, and ACCJC <i>Action Letters</i> are also reflective of the effectiveness of IEQA since its inception (June, 2012).</p> <p>Accreditation Reports Archive</p>	<p>The college has been too much at risk with only a few individuals having knowledge on accreditation and experience with accreditation standard compliance analysis and report writing.</p> <p>Though the college is more knowledgeable about accreditation, there needs to be more training on USDE regulations to ensure broader understanding.</p> <p>Since the implementation of TracDat and initial college training, some units are requesting additional training and guidance for use.</p>	<p>VPIEQA serves the entire college in the role as ALO. The VPIEQA, ALO has spent the last three years ensuring ongoing accreditation training for every employee to increase institutional knowledge of accreditation ERs, standards, policies, and processes. Increased broad participation in a gap analysis and self evaluation report over the last two-years has been another important improvement. The more collective knowledge is coupled with capacity building and adds to the strength of each individual employee in their college role and ensures institutional resiliency and continuity for all areas. The VPIEQA, ALO has tried to model the practice of sharing what you learn and know through college-wide trainings (hoping more begin to do this now). Overcoming a practice of guarding information and skills that makes one essential to the institution. This is especially important, as the college cannot send many off island for access to training. The most important role of the VPIEQA/ALO has been to eliminate dependence on this position for QA and reporting. Every office and unit of the college is now knowledgeable on accreditation and experienced in accreditation report writing. The ALO is now moving more towards the intended role as per ACCJC's <i>Policy on the Role of Accreditation Liaison Officers</i>--the ALO is now merely a facilitator as intended.</p> <p>The vice president for academic affairs from Guam Community College will be conducting a training session on 02OCT2015 with the following learning outcomes; At the end of the training participants will be able to:</p> <ul style="list-style-type: none"> • Establish links between course student learning outcomes, program student learning outcomes and institutional student learning outcomes. • Input recommendations for improvement and establish the link to the learning outcome assessment result. • Establish links from improvement plan to next assessment cycle (changing outcomes from active to inactive and inputting correct dates) • Run various assessment reports with differing criteria to extract assessment results to inform improvement plans. • Manage input from different course sections and across campuses.
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	<p>The ACAALO participated in and graduated from the WASC Assessment Leadership Academy. The ACAALO also completed two AIR courses. The trained individual used the training to obtain employment elsewhere.</p> <p>The unit is doing a reasonable job of communicating results of reports, data, and achievement of plans to stakeholders, but this needs to be improved. Though IRPO holds primary responsibility for this, VPIEQA has committed to communicating more frequently.</p>	<p>Prior to investing so much money in a college employee for professional development, in the future, IEQA will ask for a signed contract for a commitment to repay the college in time serving in the role for which the employee is being trained, or necessity to reimburse the college for the expense if the employee chooses not to complete their existing college contract. This will ensure funding to train a replacement if contractual obligations are not met. This will be done in coordination with Director of HRO and compliance with HR professional development policy and procedures. Professional development is an important commitment IEQA should make to employees, but there should also be a reciprocal commitment to the college for a reasonable return on that investment.</p> <p>VPIEQA has begun giving more presentations to the BOR when meetings are held off Pohnpei, especially in relation to BOR responsibility as per Standard IV.C.8. The college newsfeed is being used as a vehicle to release small amounts of data each week in <i>Did you know...</i> and <i>Did you also know...</i> factoids.</p>
Provide any other relevant data that are relevant to this AU program review		
Strengths, Weaknesses, Opportunities, Challenges (SWOC)		

<p>Based on analysis in the preceding sections, what are the AU's strengths?</p>	<p>IEQA conducts regular college-wide training for capacity building and activities for planning.</p> <ol style="list-style-type: none"> 1. IEQA has been effective in college-wide accreditation related training/capacity building. 2. IEQA has been successful in leading a truly broad-based self evaluation process and report. 3. IEQA ensures the college and BOR has maintained a 100% completion rate for the online ACCJC Accreditation Basics course. 4. More college personnel are volunteering to serve on accreditation visiting teams. 5. IEQA led a visioning process through a college-wide Visioning Summit 2012 that resulted in mission review, a revised vision, a new strategic plan and college values. 6. IEQA lead a college-wide Fiscal & Accreditation Summit in 2014 with case studies (1 and 2) to educate and engage employees in fiscal challenges and to kick off the Accreditation Self-Evaluation Report writing process. <p>IEQA has helped raise stakeholder confidence in college quality and compliance with Accreditation Standards.</p> <p>IEQA has been effective at collaborating with all offices and units of the college to meet accreditation standards and adhere to timely submission of reports to the ACCJC.</p>
<p>Based on analysis in the preceding sections, what are the AU's weaknesses?</p>	<ol style="list-style-type: none"> 1. Budget reductions. 2. Speculating on best AUOs for FY budgets two years in advance of the need. 3. This unit is technically now only one position with no direct support staff. 4. More time is needed for strategic management planning. 5. VPIEQA spends much time collaborating with and assisting other areas of the college for accreditation compliance, and overseeing the college-wide standing committees. As a result, and due to no direct support staff, VPIEQA has less time for IEQA work than is ideal.
<p>Based on analysis in the preceding sections, what opportunities existing for the AU?</p>	<ol style="list-style-type: none"> 1. As a result of college-wide accreditation training, and all units being heavily involved in the current self evaluation process, VPIEQA will be needed much less for future collaborations towards compliance and improvement implementation. This will allow more time for strategic focus on IEQA and commitments made in the Quality Focus Essay. 2. For the Visioning Summit August 2017, VPIEQA will work to ensure the college focuses on no more than three strategic directions/priorities to increase manageability and success of Strategic Plan 2018-2021.
<p>Based on analysis in the preceding sections, what challenges exist for the AU?</p>	<ol style="list-style-type: none"> 1. Technological restrictions for state campuses makes use of TracDat cumbersome for those constituents. 2. Technological restrictions for state campuses makes use of more effective meeting technologies impossible at this time. 3. More frequent and effective communications with other campuses beyond email. 4. Simple direct support to state campus constituents from afar. 5. Expenses associated with regular travel to all college sites. 6. Unreliability of air travel, which makes planning functions with certainty difficult, and adds to total cost when booking days in advance of events to ensure timely arrival.

Evaluation of Processes used by AU

Describe any on-going systematic method used to evaluate the efficacy of processes used by the AU.

IEQA was established in June 2012. Annual assessments have been conducted and this is the first program review. Program Reviews are scheduled biennially as articulated in the [Program Assessment and Program Review Procedures Manual](#) (2013). However, IEQA is a new unit, and has already experienced changes in personnel, so this first program review has included three years of results. Also, since the inception of this manual, the college adopted use of TracDat for annual assessments. To take advantage of efficiency achieved by implementing TracDat, and to avoid redundancy of efforts, links to TracDat annual assessments have been included in this report.

Provide example (s) of how this AU program review has led to continuous quality improvement

As articulated, IEQA was formed June 2012, and this is the first program review. The impact of program review on continuous quality improvement cannot be evidenced until the second program review.

Service Area Outcomes Assessment					
List AU's Service Area Outcomes by completing the expandable table below					
Service Area Outcomes	Date Assessment Completed	Date(s) Data Analyzed	Date(s) Data Used for Improvement	Number of Cycle Completed	
<ul style="list-style-type: none"> FY2013_QANCVP_W2 FY2014_QANCVP_TracDat FY 2015_QANCVP_TracDat 					
AU Assessment. Complete the expandable table below					
Outcome Numbers	Intended Outcomes	Means of Assessment	Criteria for Success	Summary of Data Collected	Use of Results
	<ul style="list-style-type: none"> FY2013_QANCVP_W2 FY2014_QANCVP_TracDat FY 2015_QANCVP_TracDat 				
How has AU's assessment of Service Area Outcomes led to improvements in services provided to patrons					
<ul style="list-style-type: none"> FY2013_QANCVP_W2 FY2014_QANCVP_TracDat FY 2015_QANCVP_TracDat 					
What challenges remain to make the AU more effective?					
This was already discussed in the <i>weaknesses and challenges</i> section above.					
Describe how the AU's Service Area Outcomes are linked to the Institutional Strategic Goals					
Institutional Strategic Goals	AU Service Area Outcomes	Linkages			
<ul style="list-style-type: none"> FY2013_QANCVP_W2 FY2014_QANCVP_TracDat FY 2015_QANCVP_TracDat 					
Evaluation of Progress toward previous Goals					

List the goals from AU's previous program review		
This is the first AU program review.		
Describe the level of success achieved in goals listed above		
Goals from previous AU Program Review	Level of Success Achieved	
In cases where resources were allocated toward goals, evaluate the efficacy of that spending		
Goals from previous AU Program Review	Resources Allocated	Efficacy of Spending
Short-Term and Long-Term Goals		
Using the table below, list the short and long term goals (a minimum of two for each) for the AU. These goals should follow logically from the information provided in the program review. Use a separate table for each additional goal		
Short-Term Goals 1 (Two-Year Cycle)		
Identify Goal	Develop a strategic plan in 2017 for implementation in 2018.	
Describe the plan to achieve the goal (i.e., action plan)	Lead a successful college wide visioning summit and Strategic Planning Working Group (SPWG) in 2017.	
What measurable outcome is anticipated for this goal?	An endorsed three/five year strategic plan, with no more than three strategic directions, with clearly articulated strategic plan goals, whose success is defined by articulated <i>measures of success</i> .	
What specific aspects of this goal can be accomplished without additional financial resources?	The human resources in the SPWG will add no additional expense.	
Short-Term Goals 2 (Two-Year Cycle)		
Identify Goal	The Accreditation Liaison Officer will promote an understanding of accreditation requirements, quality assurance, and institutional effectiveness among constituencies at the college during FY2017.	
Describe the plan to achieve the goal (i.e., action plan)	ALO designs and provides training sessions with outcomes on the COM-FSM <i>Quality Focus Essay</i> and new <i>Midterm Report</i> format and requirements, to all campuses, by the end of FY2017.	
What measurable outcome is anticipated for this goal?	Participants, through a participant survey, will evaluate training sessions, and successful delivery of outcomes. Target: 90% of participants will indicate the outcomes were met. 90% of the participants will indicate the information provided in the training was useful. ALO encourages all new college employees with English proficiency to take the ACCJC <i>Online Accreditation Basics Course</i> , successfully complete the course, and present the ALO with a certificate of completion as issued by ACCJC. Target: 100% of English proficient college-wide employees are issued a course completion certificate.	
What specific aspects of this goal can be accomplished without additional financial resources?	The human resources will add no additional cost. Development of the training presentation and materials will add no additional cost. The time invested in capacity building will add no additional cost.	
Long-Term Goals 1 (Five-Year Cycle)		
Identify Goal	On-going compliance with the 2014 Accreditation Standards. Lead and guide the college community to ensure accreditation eligibility requirements and standards are met and/or exceeded.	

COM-FSM Program Assessment and Program Review Procedures Manual

Describe the plan to achieve the goal (i.e., action plan)	The ALO will facilitate timely submission of required reports to the Commission, including the Annual Reports, Annual Fiscal Reports, the fourth year Midterm Report, and any Follow-Up and Special Reports the Commission might require.	
What measurable outcome is anticipated for this goal?	Timely submission of reports that evidence compliance with standards as affirmed in ACCJC <i>Action Letters</i> . No sanctions. Reaffirmed.	
What specific aspects of this goal can be accomplished without additional financial resources?	The human resources will add no additional cost.	
Long-Term Goals 2 (Five-Year Cycle)		
Identify Goal	Promote and enhance a college culture of collaboration.	
Describe the plan to achieve the goal (i.e., action plan)	Collaborate with IA and EMSS goals and priorities to support student success.	
What measurable outcome is anticipated for this goal?	Student success will be defined (the Student Success Committee is currently leading this effort in collaboration with EMSS, IA, & IEQA). Specific <i>measures of success</i> will be used to assess institutional effectiveness against institution-set standards and short and long term stretch targets/goals for increasing student learning and achievement.	
What specific aspects of this goal can be accomplished without additional financial resources?	The human resources will add no additional costs. Reporting will add no additional cost. Communicating performance against measures of success will add no additional cost.	
Requests for Resources		
Complete a new table for each short-term and long-term goals listed in the immediately preceding section that would require additional financial resources. These requests for resources must follow logically from the information provided in this AU program review.		
o Short-Term Goal o Long-Term Goal		
Goal Number and Goal Description	Short-Term Goal 1	
Type of Resources	Requested Dollar Amount	Potential Funding Source
Site travel for VPIEQA to deliver “mini summits” in other three states	\$4000	Annual budget
Travel for participants to NC visioning summit	\$30000	Annual budget –President’s budget
Supplies for summit	\$1000	Annual budget

o Short-Term Goal o Long-Term Goal		
Goal Number and Goal Description	Short-Term Goal 2	
Type of Resources	Requested Dollar Amount	Potential Funding Source
Site travel for VPIEQA to deliver college-wide training	\$4000	Annual budget, COM-LG funding
Supplies for training	\$1000	Annual budget, COM-LG funding

o Short-Term Goal o Long-Term Goal		
Goal Number and Goal Description	Long-Term Goal 1	
Type of Resources	Requested Dollar Amount	Potential Funding Source
TBD. Cannot predict team recommendations, Commission sanctions, and costs to improve/meet the standards.		Annual budget, COM-LG funding
Substantive change reports are probable and the current fee is \$750 each.	\$1500	Annual budget

o Short-Term Goal o Long-Term Goal		
Goal Number and Goal Description	Long-Term Goal 2	
Type of Resources	Requested Dollar Amount	Potential Funding Source
No Cost		

AU Program Review Summary

This section provides the reader with an overview of the highlights, themes, and key segments of the AU program review. It should include new information that is not mentioned in the preceding sections of this document.

Response Page

AU Vice President or appropriate immediate Management Supervisor

- I concur with the findings contained in this AU program review.
- I concur with the findings contained in this AU program review with following exceptions (include a narrative explaining the basis for each exception):

I do not concur with the findings contained in this AU program review (include a narrative exception):

Administrative Unit Program Review Check List

Administrative unit		Date of Review	
Assessment/Review Cycle		Reviewers	
Please mark your responses to the following statements			
Statement	Yes	Needs Improvement	No
Administrative Unit. The administrative unit is identified.			
Assessment Cycle. The assessment cycle is identified.			
Submitted by and Date: The person directly responsible for completing the assessment plan submits the assessment plan to the committee. Generally, this is the office or program head.			
Supervisor and Date submitted. Date submitted to supervisor.			
College's Mission Statement. The approved college mission is included, and a description in terms of how the AU supports this.			
College's Mission Vision. The approved college vision is included, and a description in terms of how the AU supports this.			
College's Mission Core Values. The approved college core values are included, and a description in terms of how the AU supports them			
College's Strategic Goals. The approved college strategic goals <i>directly relevant to the</i> department and the AU are included, and a description in terms of how the AU supports them.			
AU Mission Statement, Goals, and Objectives. AU's mission, goals, and objectives are included.			
AU Description, Data and Trends Analysis. Data on current staffing and other resources; descriptions of their appropriateness are included, and how do they serve the population of the college; some significant changes that occurred and may have impacted the AU's services; methods used for evaluation and the results; and how results were used to make improvements to services; and other relevant data to AU's program review.			
SWOC Analysis. An analysis of Strengths, Weaknesses, Opportunities, and Challenges is included.			
Evaluation of Process. A description of the <i>on-going</i> systematic method used to assess AU's effectiveness, and some examples in terms of how program review lead to continuous quality improvement.			
Service Area Outcome Assessments. This section includes list of AU's service area outcomes, dates of assessment, the assessment methodologies used including established criteria for success, summary of data and how results are used to inform improvements, the section also provides a description of the identified <i>challenges</i> that are yet to be addressed by AU, and how these outcomes are linked to the college's strategic goals.			
Evaluation of Progress toward previous Goals. This section provides descriptions of (a) goals from previous review, (b) levels of success achieved, and (c) resources allocated including efficacy of spending.			
Short-term and Long-Term Goals. This section provides descriptions of the AU's short-term and long-term goals including action plans, measurable outcomes anticipated for these goals, and others.			
Requests for Resources. This section provides the AU's (a) short- and long-term goals, (b) the type of resources need as presented in dollar amount, and (c) potential source of funding.			
AU Program Review Summary. This section provides the reader with an overview of the highlights, themes, and key segments of the AU's program review. This section should include only new information that is not mentioned in the preceding sections of the AU program review report.			