

Administrative Planning Committee Annual Program Plan/Review Assessment

Program Name: Planning, Research & Institutional Effectiveness	APC Member(s) Reviewers :Megan Rodriguez Antone
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The purpose of this form is to provide feedback on the quality of the program review to the Program Review author(s)

Administrative Program Review		Performance Level		
	Commendations	Recommendations	Comments	ACCJC Exemplary Check
Executive Summary				
Please summarize your program's strengths, opportunities/challenges, and action plans. This information will be presented to the Board of Trustees.	Provides: <input checked="" type="checkbox"/> Summary of strengths <input checked="" type="checkbox"/> Summary of challenges <input checked="" type="checkbox"/> Summary of action plans <input checked="" type="checkbox"/> Thorough summary	Information needed: <input type="checkbox"/> Summary of strengths <input type="checkbox"/> Summary of challenges <input type="checkbox"/> Summary of action plans <input type="checkbox"/> Thorough summary		<input type="checkbox"/>
Program Context				
1. Mission:				
2. Program Description	Provides: <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Analysis <input checked="" type="checkbox"/> Impact on students <input checked="" type="checkbox"/> Efforts to make changes	Information needed: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes		<input type="checkbox"/>
3. Community and Labor Needs: Describe how changes in community needs, employment needs, technology, licensing, or accreditation affect your program.	Provides: <input type="checkbox"/> Community needs <input type="checkbox"/> Employment needs <input type="checkbox"/> Technology needs <input type="checkbox"/> Licensing <input type="checkbox"/> Accreditation <input type="checkbox"/> Impact on program	Information needed: <input type="checkbox"/> Community needs <input type="checkbox"/> Employment needs <input type="checkbox"/> Technology needs <input type="checkbox"/> Licensing <input type="checkbox"/> Accreditation <input type="checkbox"/> Impact on program	<input checked="" type="checkbox"/> No recommendation or change needed <input type="checkbox"/> Not applicable	<input type="checkbox"/>
Looking Back				
4. Describe major accomplishments	Provides: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes	Information needed: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes		<input type="checkbox"/>
5. Impact of Resources Allocations: Describe the impact to date that each new resource (staff, non-instructional assignment, equipment, facilities, research, funding) has had on your program and measures of student success or client satisfaction.	Provides: <input checked="" type="checkbox"/> Thorough description of new resources' impact on program <input type="checkbox"/> Thorough description of impact on students <input checked="" type="checkbox"/> Efforts to make changes <input type="checkbox"/> Efforts to make changes	Information needed: <input type="checkbox"/> Further description of new resources' impact on program <input type="checkbox"/> Further description of impact on students <input type="checkbox"/> Efforts to make changes	<input type="checkbox"/> Not Applicable	<input type="checkbox"/>

Administrative Program Review		Performance Level		
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Current State of the Program				
6A. State of the Program—Observation: Describe the current state of the program (include strengths and challenges)	Provides: <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Analysis <input checked="" type="checkbox"/> Impact on students <input checked="" type="checkbox"/> Efforts to make changes	Information needed: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes	<input type="checkbox"/> No recommendation or change needed	<input type="checkbox"/>
6B. State of Program—Evaluation: What changes could be implemented to improve your program?	Provides: <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Analysis <input checked="" type="checkbox"/> Impact on students <input checked="" type="checkbox"/> Efforts to make changes	Information needed: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes	<input type="checkbox"/> No recommendation or change needed	<input type="checkbox"/>
7A. Service Area Outcomes (SAOs) Assessment Plan: Describe your program's SAO Assessment Plan.	Provides: <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Analysis <input checked="" type="checkbox"/> Impact on students <input checked="" type="checkbox"/> Efforts to make changes	Information needed: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes	<input type="checkbox"/> No recommendation or change needed	<input type="checkbox"/>
7B. SAO Assessment Results and Impact: Summarize the findings of your program's SAO Assessments. What are some improvements that have been, or can be, implemented as a result of SAO assessment?	Provides: <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Analysis <input checked="" type="checkbox"/> Impact on students <input checked="" type="checkbox"/> Efforts to make changes	Information needed: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes	<input type="checkbox"/> No recommendation or change needed	<input type="checkbox"/>
Looking Ahead (at SPOL Planning Module)				
8. Strategic Action Plans: Use this objective to describe the action plans that your program intends to implement. Describe your plan. Be sure to describe any research or training you will need to accomplish these plans. Then select PRIE and/or Professional Development in the "Units Impacted" section.	Provided: <input checked="" type="checkbox"/> Thorough description of action plans	Information needed: <input type="checkbox"/> Further description of action plans	<input type="checkbox"/> No recommendation or change needed	<input type="checkbox"/>
9. Personnel request: See SPOL for details	Not review by APC	Not review by APC	<input type="checkbox"/> No recommendation or change needed	<input type="checkbox"/>
10. Equipment, technology, and facilities requests: Use this objective to request supplies, equipment, technology or facilities improvements.	Provided: <input type="checkbox"/> Thorough description of action plans	Information needed: <input type="checkbox"/> Further description of action plans	<input checked="" type="checkbox"/> No recommendation or change needed	<input type="checkbox"/>

Overall Commendations:

Great job! I appreciate the thorough and concise program review. A lot of work has been accomplished over the last two years and, with the upcoming goals, PRIE is poised to lead the college into a successful accreditation and launch of Guided Pathways.

Overall Recommendations:

Overall Program Effectiveness:

- X Highly effective
- Effective
- Needs program improvement

Approval Process is embedded in SPOL (Approval from APC and president)

Administrative Planning Council Program Review Assessment

Program Name: Planning, Research and Institutional Effectiveness	APC Reviewer:
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	Commendations	Recommendations	Comments	ACCJC Exemplary
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Summary of program's strengths, opportunities/challenges, and action plans.	Provides: <input type="checkbox"/> Summary of strengths <input type="checkbox"/> Summary of challenges <input type="checkbox"/> Summary of action plans <input type="checkbox"/> Thorough summary	Information needed: <input type="checkbox"/> Summary of strengths <input type="checkbox"/> Summary of challenges <input type="checkbox"/> Summary of action plans <input type="checkbox"/> Thorough summary		<input type="checkbox"/>
<u>Program Context</u>				
1. Mission: (Provide comments if desired)				
2. Program Description	Provides: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes	Information needed: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes		<input type="checkbox"/>
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<u>Looking Back</u>				
4. Describe major accomplishments	Provides: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes	Information needed: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes		<input type="checkbox"/>
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	Commendations	Recommendations	Comments	ACCJC Exemplary
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6B. State of Program—Evaluation	Provides: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes	Information needed: <input type="checkbox"/> Evidence <input type="checkbox"/> Analysis <input type="checkbox"/> Impact on students <input type="checkbox"/> Efforts to make changes		<input type="checkbox"/>
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Looking Ahead (at SPOL Planning Module)				
8. Strategic Action Plans:	Provided: <input type="checkbox"/> Thorough description of action plans	Information needed: <input type="checkbox"/> Further description of action plans		<input type="checkbox"/>
9. Personnel request:	N/A	N/A	N/A	
10. Equipment, technology, and facilities requests	Provided: <input type="checkbox"/> Thorough description of action plans	Information needed: <input type="checkbox"/> Further description of action plans		<input type="checkbox"/>

Overall Commendations:

Overall Recommendations:

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- Highly effective
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Program Name: Planning, Research & Institutional Effectiveness	APC Member(s) Reviewers :Mary Chries Concha Thia
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Overall Commendations:

Great job! Great accomplishments and good objectives. I am sure we will have successful accreditation.

Overall Recommendations:

Should Item 5 under looking back be part of your next cycle of program review? “Facilitated the adoption on TracDat for data collection during the program review”

Overall Program Effectiveness:

- X Highly effective
- Effective
- Needs program improvement

Approval Process (Approval from APC and president)