

Program Review Part 1B & Part II 2019-2020

Instructions: Please submit your completed Program Review forms by:
Friday, May 22nd

If you need technical assistance, please contact Minerva Flores at
mflores@mendocino.edu or x3011. For further questions, please contact Debra Polak at
dpolak@mendocino.edu or x3068.

PROGRAM TITLE:

PROGRAM CONTACT:

*COMPLETING PART II OF PROGRAM REVIEW:

SUPERVISOR/DEAN:

VICE-PRESIDENT:

DATE OF REPORT:

Instructions for Program Review 2019-2020

- ❖ All programs and departments are required to complete **Part IB**.
- ❖ Financial Aid, Vice-President of Student Services, Library, Information Technology and ALL Student Serving Departments complete Part II

Part II for Academic Departments

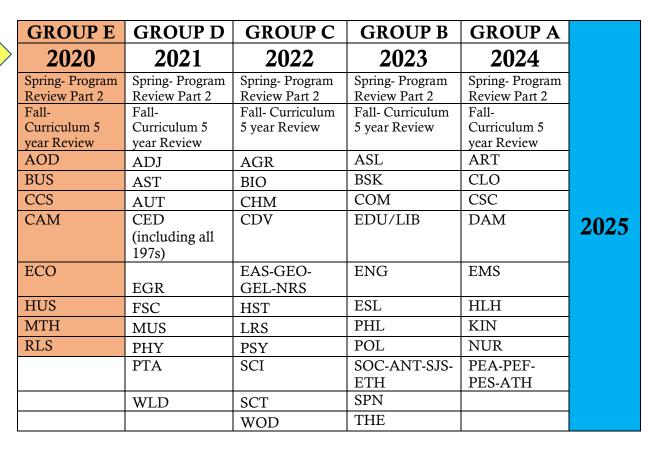
- 1. The Program Review/Curriculum Review/SLO Assessment combined cycle is a six-year cycle.
- 2. Annually: Faculty are responsible for <u>Program Review Part IB and SLO assessment</u> (discipline areas complete 25% of their course SLO assessments).
- 3. Year 5: Faculty in assigned **Group E**, are responsible for **Program Review Part II in the Spring** and the **5-year Curriculum Review in the Fall.** (ex. RLS completes Program Review Part 2 in Spring 2020 and 5-year Curriculum Review in Fall 2020)
- 4. Year 6: No departments will complete Program Review Part Two nor Curriculum Review.



Six-Year Review Cycle for Academic Departments

The Program Review/Curriculum Review/SLO Assessment combined cycle is a six-year cycle.

- ❖ Annually: Faculty are responsible for Program Review Part One and SLO assessment (discipline areas complete 25% of their course SLO assessments).
- ❖ Year 5: Faculty in the assigned Group below are responsible for Program Review Part Two in the Spring and the 5-year Curriculum Review in the Fall. (ex. RLS completes Program Review Part 2 in Spring 2020 and 5-year Curriculum Review in Fall 2020)
- ❖ Year 6: No departments will complete Program Review Part Two nor Curriculum Review.



- ❖ For Program Review questions, please contact your Dean.
- ❖ For 5 Year Review of Curriculum questions, please contact the Curriculum Committee Chair.
- ❖ For SLO assessment questions, please contact the SLO Committee Chair.

Part 1B. A. <u>5-Year Equipment Cycle Requests</u>

What qualifies as Equipment?



- 1. Lasts more than 1 year
- 2. Needs to be repaired
- 3. Is an independent unit
- 4. Overall cost is over \$500.00

NO - If you have answered <u>NO</u>, your item is a SUPPLY and you <u>do not need</u> to fill out this form. Please refer to the 4's and 5's request and forward to your supervisor.

YES - If you answered <u>YES</u>, your item is <u>EQUIPMENT</u> and you will need to <u>fill out the following grid</u>. Please refer to the following spreadsheet <u>https://www.mendocino.edu/college/institutional-research/additional-resources</u> (click on <u>5 Year Equipment Plan Worksheet</u>).

Please Note: Since this is a rolling plan, last year's "Year Two" requests should now become "Year One." You may also add new requests which were not included in last year's Program Review.

Requests that are intended for employee use (non-instructional), please use the Information Technology Request form

Please provide cost information, even if they are estimates. Equipment requests without cost information will not be considered.

	5 – Year Equipment Cycle Requests Year 1						
Equipment Category	Rationale/Objective	Life Span	Cost Including Tax S/H	Installation Cost	Annual Maintenance Cost	Total	Instructional or Non-Instructional

5 – Year Equipment Cycle Requests Year 2							
Equipment Category	Rationale/Objective	Life Span	Cost Including Tax S/H	Installation Cost	Annual Maintenance Cost	Total	Instructional or Non-Instructional

5 – Year Equipment Cycle Requests Year 3							
Equipment Category	Rationale/Objective	Life Span	Cost Including Tax S/H	Installation Cost	Annual Maintenance Cost	Total	Instructional or Non-Instructional

5 – Year Equipment Cycle Requests Year 4							
Equipment Category	Rationale/Objective	Life Span	Cost Including Tax S/H	Installation Cost	Annual Maintenance Cost	Total	Instructional or Non-Instructional

5 – Year Equipment Cycle Requests Year 5							
Equipment Category	Rationale/Objective	Life Span	Cost Including Tax S/H	Installation Cost	Annual Maintenance Cost	Total	Instructional or Non-Instructional



Part IB B. Information Technology Requests					
If no requests are to be		Program/			
made, click here	D	Department:			
	Request #1:				
Is this New or a Replacement?					
What is your IT request?					
Is this request critical to your area or department?					
How does this request relate to the Mendocino College Mission? How does this request relate					
to the Mendocino College Vision?					
How does this request relate to Mendocino College's Strategic Goals?					
How does this request support your department/area SLO/SAO's?					
Does this request support a state and/or federal Mandate?					
Additional Comments					
	Request #2:				
Is this New or a Replacement?	•				
is this ive w of a replacement.					
What is your IT request?					
Is this request critical to your area or department?					
How does this request relate to the Mendocino College Mission?					
How does this request relate to the Mendocino College Vision?					
How does this request relate to Mendocino College's Strategic Goals?					
How does this request support your department/area SLO/SAO's?					
Does this request support a state and/or federal Mandate?					
Additional Comments					



Request #3:					
Is this New or a Replacement?					
What is your IT request?					
Is this request critical to your area or department?					
How does this request relate to the Mendocino College Mission?					
How does this request relate to the Mendocino College Vision?					
How does this request relate to Mendocino College's Strategic Goals?					
How does this request support your department/area SLO/SAO's?					
Does this request support a state and/or federal Mandate?					
Additional Comments					
	Request #4:				
Is this New or a Replacement?					
What is your IT request?					
Is this request critical to your area or department?					
How does this request relate to the Mendocino College Mission?					
How does this request relate to the Mendocino College Vision?					
How does this request relate to Mendocino College's Strategic Goals?					
How does this request support your department/area					
Does this request support a state and/or federal Mandate?					
Additional Comments					



Part IB C. Facility Requests				
If no requests are to be made, click here		Program or Department:		
muut, eiren nere	Request#1:	Department.		
What are your Facility Needs? Please Describe				
Do you have any safety needs with this request? Please Describe				
Does this request involve serving more students? Please Describe				
Are you experiencing, or expecting, growth in your area or department? Please Describe				
Is this request essential to your department or program operations? Please Describe				
How does this request relate to Mendocino College's Mission?				
How does this request relate to Mendocino College's Strategic Goals?				
Does this request contribute to the achievement of your program or department's SLO/SAO's? Please Describe				
Does this request involve ADA compliance? Please Describe				



	Request#2:				
What are your Facility Needs? Please Describe					
Do you have any safety needs with this request? Please Describe					
Does this request involve serving more students? Please Describe					
Are you experiencing, or expecting, growth in your area or department? Please Describe					
Is this request essential to your department or program operations? Please Describe					
How does this request relate to Mendocino College's Mission?					
How does this request relate to Mendocino College's Strategic Goals?					
Does this request contribute to the achievement of your program or department's SLO/SAO's? Please Describe					
Does this request involve ADA compliance? Please Describe					



	Request#3:
What are your Facility Needs? Please Describe	
Do you have any safety needs with this request? Please Describe	
Does this request involve serving more students? Please Describe	
Are you experiencing, or expecting, growth in your area or department? Please Describe	
Is this request essential to your department or program operations? Please Describe	
How does this request relate to Mendocino College's Mission?	
How does this request relate to Mendocino College's Strategic Goals?	
Does this request contribute to the achievement of your program or department's SLO/SAO's? Please Describe	
Does this request involve ADA compliance? Please Describe	



	Request#4:
What are your Facility Needs? Please Describe	
Do you have any safety needs with this request? Please Describe	
Does this request involve serving more students? Please Describe	
Are you experiencing, or expecting, growth in your area or department? Please Describe	
Is this request essential to your department or program operations? Please Describe	
How does this request relate to Mendocino College's Mission?	
How does this request relate to Mendocino College's Strategic Goals?	
Does this request contribute to the achievement of your program or department's SLO/SAO's? Please Describe	
Does this request involve ADA compliance? Please Describe	



Part IB D. PROFESSIONAL DEVELOPMENT REQUESTS				
If no requests are to be made, click here	Progra Depart			
List the departmental requirements normal budget. These requests will				
	Request#1:			
What are your department's profession learning objectives for the upcoming year? Please list 1-3 objectives (issues topics your department should prioriti as professional development needs)				
What is the professional development request?				
Who will attend?				
What are the dates?				
How does this request relate to the Mendocino College's Mission?				
How does this request relate to the Mendocino College's Vision?				
How does this request relate to the Mendocino College's Strategic Goals?				
How does this request contribute to th achievement of SLO/SAO's?				
Estimated total:				



	Request#2:
What are your department's professional learning objectives for the upcoming year? Please list 1-3 objectives (issues or topics your department should prioritize as professional development needs)	
What is the professional development request?	
Who will attend?	
What are the dates?	
How does this request relate to the Mendocino College's Mission?	
How does this request relate to the Mendocino College's Vision?	
How does this request relate to the Mendocino College's Strategic Goals?	
How does this request contribute to the achievement of SLO/SAO's?	
Estimated total:	



	Lequest#3:
What are your department's professional learning objectives for the upcoming year? Please list 1-3 objectives (issues or topics your department should prioritize as professional development needs)	
What is the professional development request?	
Who will attend?	
What are the dates?	
How does this request relate to the Mendocino College's Mission?	
How does this request relate to the Mendocino College's Vision?	
How does this request relate to the Mendocino College's Strategic Goals?	
How does this request contribute to the achievement of SLO/SAO's?	
Estimated total:	



	Request#4:
What are your department's professional learning objectives for the upcoming year? Please list 1-3 objectives (issues or topics your department should prioritize as professional development needs)	
What is the professional development request?	
Who will attend?	
What are the dates?	
How does this request relate to the Mendocino College's Mission?	
How does this request relate to the Mendocino College's Vision?	
How does this request relate to the Mendocino College's Strategic Goals?	
How does this request contribute to the achievement of SLO/SAO's?	
Estimated total:	

Part IB E. Outreach and Recruitment							
If no requests are to be made, click here Program or Department:							
]	Please utilize this form fo	r requests rela	ted to outreach and recruitme	nt.		
Outreach Need		Market	ing Services		Graphic A	Arts	Funding Available in Dept.?

Part IB F. CTE PROGRAM 2-YEAR REVIEW

NOT a Career and Technical Education Program, click here:

California Education Code section 78016 requires that every vocational or occupational training program offered by a community college district shall be reviewed every two years to ensure that each program, as demonstrated by available sources of labor market information:

- meets a documented labor market demand; Centers of Excellence
- does not represent unnecessary duplication of other manpower training programs in the area;
- is of demonstrated effectiveness as measured by the employment and completion success of its students

For information regarding Data, please contact mflores@mendocino.edu

Any program that does not meet these requirements shall/may be terminated within one year. The review process required by this section shall include the review and comments by the local Private Industry Council. A written summary of the findings of each review shall be made available to the public - California Code, Education Code - EDC § 78016

CTE Advisory Committee Agendas/Minutes

PROGRAM-SPECIFIC DATA

Provide the following information for <u>each</u> certificate and/or degree in the discipline.										
Does this p	Does this program continue to meet a labor market demand?									
Program:	Certificate/Degree									
Labor Mark	Market Information Year: Wages:			Hour Mean	•					
Estimated Y	Years:		Employ. Change		Number:		Perce	ent:		
Source:										
Does this program prepare students to transfer to a 4-year college or other education/training program that meets a labor market demand?										
Does this program duplicate another person power-training program?										
If YES, ide	ntify the	program(s) an	d explai	n briefly ho	w the duplic	cation is r	iecessa	arv.		



Student Success Data
Persistence; Completion; Transfer; Employment; SLO Assessment Results; Demographic data [all
compared with institutional data]. Provide a brief analysis of the program's student success data:
CTE 2 yr Curriculum/Prerequisite Review
Completing this section of program review will be mandatory as of Fall 2016. Title V requires all CTE programs to review their prerequisites every two years. Have you reviewed your degrees' and certificates' curriculum and prerequisites/co-requisites with your advisory committee? Please briefly summarize that meeting or submit meeting minutes to your Dean. What, if any, changes did they recommend?

NON-INSTRUCTIONAL

Program Review Part II

Not a Non-Instructional Program?

Financial Aid, Vice-President of Student Services, Library, Information Technology and ALL Student Serving Departments

F. SERVICE AREA OUTCOME ASSESSMENTS

Approved SAOs can be found on the SAO website. All outcomes should be assessed for your program/department.

SAO	Assessment Method	Assessment Results	Plan for Improvement	Assistance Needed?



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Part II F. Self-Assessment instrument – Non-Instructional

Please read the following evaluative statements and indicate a number between 1 and 5 to indicate how well you feel the statement describes your office or program. Choosing the number 1 indicates that you Strongly Disagree with the statement as an evaluation of your office or program; indicating the number 5 indicates that you Strongly Agree with the statement as an evaluation of your office or program.

program.						
Strongly Disagree	Disagree	Neither Agree/Disagree	Agree	Strongly	Agree	
1	2	3	4	5		
		Statement			Rating	
· · ·	~	necessary to handle the	e workload curre	ently		
generated by faculty	, staff and students					
	•	and technology neces	sary to handle to	workload		
currently generated						
3.) Sufficient time a	ind resources are av	vailable for profession	al development a	ictivities.		
4.) The department	has effectively imp	lemented internal con	trols including t	he		
		no employee has com	plete control ov	er key		
financial and busine	ss responsibilities					
5.) Workload in the	office or program	is distributed equitably	y			
6.) The program ha	s sufficient faculty	(full-time and part-tim	e) to meet stude	nt demand		
for courses.						
7.) Job descriptions	of members of the	office or program are	current and refle	ect current		
staff responsibilities						
8.) Performance evaluations are performed in a timely manner						
9.) Policies and pro or printed	9.) Policies and procedures relevant to the department are readily available either on-line or printed					
If you chose 1, 2, or comments here:	3 for any statemen	t, and would like to di	scuss that evalua	ation, please e	nter your	



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You have completed your 2019-2020
Program Review Part IB. If proceeding to Part II
(Instructional Programs in Group E), click
"Part II" if not, click "Submit"



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Program Review Part II – GROUP E INSTRUCTIONAL DEPARMENTS

GROUP E: AOD, BUS, CCS, CAM, ECO, HUS, MTH, RLS. If you are an instructional program, please

complete the following tables. For information specific to your department, please use the Student Success Analyzer and/or Degrees/Certs Earned

PART II Program Student Learning Outcomes Assessment (PSLOs)

If your course SLO's are not mapped, please contact the Dean of Instruction, Dr. Rebecca Montes as rmontes@mendocino.edu					
PSLO's (List All)	Assessment Results	Action Needed, If Any	Year		
Your program-level student learning	They can be assessed based on: 1.) Student Surveys, 2.) Program	("Action Needed, If Any") include any desired revision	Assessed		
outcomes (<u>PSLOs</u>) must be assessed.	Completers, 3.) And/or analysis of course SLO's that are mapped to	in program design, curriculum, instructional delivery			
	PSLO's	methods, or changes in the PSLOs themselves.			



	ion taken/resolution:
Summary assessment of students' overall achieving of the	
learning outcomes. What are the strongest areas for your	courses and programs? What areas
need further development? What are you plans for achiev	ing that development: Are your
assessments across sections, locations and modality?	
assessments across sections, locations and modality?	
assessments across sections, locations and modality?	
assessments across sections, locations and modality?	
assessments across sections, locations and modality?	
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assessments across sections, locations and modality?	
assessments across sections, locations and modality?	
assessments across sections, locations and modality?	
assessments across sections, locations and modality?	





A.2 Self-Assessment instrument

Please read the following evaluative statements and choose a number between 1 and 5 to indicate how well you think the statement describes your program. The number 1 indicates that you strongly disagree with the statement as a description of your program and the number 5 indicates that you strongly agree with the statement as an evaluation of your program.

				_	
Strongly Disagree	Disagree	Neither Agree/Disagree	Agree	Strongl	y Agree
1	2	3	4	5	5
	S	tatement			Rating
1.) Current curricu	ulum meets the learn	ning needs of student			
2.) Course offering	gs reflect the state o	f knowledge in the disc	ipline		
3.) Course SLOs a	re being measured a	nd outcomes assessed f	or most courses		
4.) The program h	as sufficient faculty	to achieve its goals			
5.) The program has sufficient academic resources (e.g. hardware/software, technology, dedicated space) to achieve its goals					
6.) The program has sufficient faculty (full-time and part-time) to meet student demand for courses.					
7.) The program receives sufficient administrative support to achieve its goals					
8.) Program goals are based upon current resources					
9.) Program goals require significant new resources					
If you chose 1, 2, o	or 3 for any statemen	t, discuss that evaluati	on and enter you	r commen	ts here:



Success and Retention			
a. Reviewing Analyzer data, how does your program compare to the College as a whole regarding student success and student retention?			
b. Over the past several years, is student success, retention, and enrollment consistent in your classes? Improving? Declining?			
c. How many students are declared majors in your degrees/certificates? How many completers have you had over the past five years in these degrees and certificates?			
d. Please provide information which may explain any data that is not satisfactory.			
	Equity		
a. Referring to Analyzer data, or term data, how does this program compare with the college as a whole in enrollment, success and retention when disaggregated by race, ethnicity, gender and age?			
b. Can you identify factors which may be limiting equity within the program? Do you have any ideas on how these factors can be ameliorated?			
	Efficiency		
a. Reviewing the Analyzer Data, how does the efficiency (in terms of FTES/FTEF) of the program compare to the efficiency of the College as a whole?			

YOUR COMMUNITY. YOUR COLLEGE. YOUR SUCCESS b. Does the data indicate any trends in program efficiency over the past five years? Are these trends concern for the program? c. Are there factors or conditions (e.g. mandated enrollment limits) that may be affecting program efficiency? If so, please explain. Outreach a. Briefly describe the program's current efforts to build and maintain relationships with various segments of the community. b. What are the program's plans, if any, to build new relationships or strengthen existing relationships over the next three years? c. What changes or resources are needed to build or strengthen relationships with other segments of the community?



Program Assessment	
Considering your SLO Assessments and data review, please answer the following questions:	
What are the Strengths of your program?	
What are its challenges and how might they be addressed?	
Are any changes in the field anticipated that will affect your program?	
Are any curricular changes (modifying a program, adding new classes, adding prerequisites to improve success in a course, inactivating a certificate) called for?	
Are there any other ways the college, senate and/or colleagues can support the success of your students?	



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You have completed your 2019-2020 Program Review Part IB and II. Please click the submit button below: