

- last program review. Doesn't ask for documentation of implementation of the plan. Page 6, number 5, took a lot of discussion and time but it is not included in the steps in the process. Rubrics are a third disconnect focus mainly on number 5. Whatever is published needs to look at the purpose of program review. It is supposed to be about a self-study and subsequent improvement. Need to be clear that the beginning of the handbook is an overview of the process.
- Reviewed the first draft of a memo to Gloria with information on the Units who participated in Program Review this year to help as she makes resource allocation decisions. Committee agrees that it would have been helpful to have this document before prioritization.
  - a. Cheryl will add a summary comment about particularly healthy programs and those that need to be "watched" due to health problems.
  - b. Committee discussed what the "average" of the rubric scores for health/effectiveness and document quality really tells us about the program.
  - c. Recommend that the summary be more of an executive summary (a snapshot) with major concerns as well as programs who did exceptionally well. The comments provided by the subcommittees should be provided as an attachment for additional documentation purposes.
  - d. The purpose of this summary is to describe where the programs are trending.
  - e. There is concern that the inclusion of "program health" in the prioritization process was understood by committee members without expressing it directly. There was no clear expectations on how health factored into the decisions and next year there needs to be a clearer connection.
  - f. This committee is responsible for two things; resource allocation based on prioritization of objectives and program review.
- III. The average score of health is a concern as the campus will have decreased morale when they compare themselves with other units. This is a simplistic measure of a complex analysis. Scott recommends that we leave the scores off all together and just give the qualitative data.
  - a. The intent is a strategic look at all of the programs and services to which a quantitative measure is appropriate. This rubric score allows comparison to a standard.

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- b. The bottom line is that the composite score is somewhat irrelevant and without context this year. Next year with revised rubrics and a clear understanding of the expectation for the committee members and the campus this type of indicator will be more appropriate.
- c. We will need to establish a meaningful definition of healthy and unhealthy programs. It must include some sort of "judgment" and/or ranking.

d. There is concern that removing the numbers and letting the programs that did a poor job and /or are not up to par have no consequences makes this entire process worthless. There must be some teeth in the program such as the ability to put units on probation. The president should be able to see specifics on where programs are strong and where they need help and the more information the better.

- e. This committee needs to identify their own goals and purpose- It is to focus is on helping people improve while still indicating which programs are unhealthy.
- IV. The committee needs to set clear standards for what determines where the unit lands on the scale.
  Discussed possibility of dividing scores into three categories where programs would be: 1) exemplary, 2) ok, or 3) troubled. This does not mean that exemplary programs get all the resources.
  - a. Some disconnects in this year's process include; Goals/Objectives were prioritized by area, not by unit, and there wasn't a differentiation among disciplines.
  - b. The process is working well, but it does have holes. Some programs had terrible quality of goals and objectives. Timing is not working don't know how to fix that. Can't work all summer long.
  - c. Cheryl will make revisions to the President's memo based on today's discussion. Keith and Cheryl will work on a chart and executive summary and bring it back to the committee; they will remove the overall averages and identify and/or highlight exemplary and unhealthful programs.
- V. There is a credibility issue with this committee among members of the campus which is continuing as we don't meet expectations such as timelines. We also need to work on speed up the feedback piece.
  - a. To counteract the negatives, members of this committee need to stand up and talk about the amount of time committed and all of the hard work that we did counter measures to combat the poison.
    Conversations like this help. Be cognizant of the carping, but keep moving forward and improving. We have a good foundation and will continue to improve.
  - b. Another consideration for not meeting promised timelines is that we didn't necessarily receive the documents at their due dates either. This is a learning process and we will make improvements, it is important to acknowledge the committee's success.
- VI. Committee reviewed the Draft Rubric which will be revised and included in the handbook. Committee agreed to Curriculum, SLO's, Scheduling, Retention, Success Rate, and WSCH/FTEF. Will continue at the next meeting

Next Meeting: 4/12/2010 3:00 - 5:00

- Continue review of Instructional Health Evaluation Rubric
- Review Non-Instructional Rubric and sub-committee comments for recommendation to the President
- Revisit Purpose of Integrated Planning and Program Review Process
- Continue discussion of how to improve the planning and program review process for the 2010-2011 cycle.

## NEXT MEETING WILL IN LADM 217 4/12/2010 FROM 3:00 - 5:00