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| Youngstown State University |
| Program Review Handbook |
| Standards, Processes, and Forms |

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| 10/1/2015 |

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# YSU Undergraduate Program Review Guidelines

Program review is integral to effective planning at the department, college, and university levels. Program review enables faculty members to evaluate their program’s effectiveness in meeting its goals and foster continuous improvement. This process involves collecting and analyzing data, developing and implementing action plans for improvement, and reevaluating progress. Effective program review fosters a strong and positive sense of each unit’s identity and contributions to the mission of YSU.

The outcomes of program review must be consistent with and responsive to the mission and strategic plan of the University as well as the expectations of the communities of interest served by the program. Communities of interest may include, but are not limited to, faculty, students, graduates, employers, community stakeholders, University administration, and advanced degree programs.

The purpose of the review process is to:

* Ensure that a program’s goals and outcomes are consistent with the University’s mission and strategic plan;
* Identify program strengths and weaknesses;
* Identify challenges, opportunities, and potential areas for program change(s);
* Evaluate the use, allocation, need for, and availability of program resources.

Program review will follow a **five-year cycle** that includes an annual progress report. A program may elect to follow a shorter review cycle to meet accrediting or other reporting needs.

# Program Review Process and Methodology

### Program Goals and Outcomes

Program goals and outcomes related to student learning provide the basis for program planning, implementation, and evaluation. The goals and outcomes for student learning must be compatible with the mission and expectations of the University and the communities of interest. The goals and specific outcomes related to student learning are based upon the educational needs of the students, graduates, employers, and advanced degree programs.

Program goals and outcomes should be:

* Measurable
* Realistic and attainable
* Aligned with the needs of communities of interest
* Aligned with the mission of the University
* Aligned with the accrediting body or professional organization

Note: Program faculty may identify as many goals and outcomes as are relevant but should prioritize for effectiveness.

### Review of Goals and Outcomes

Program review is a cyclical process that includes

* determining goals
* defining outcomes
* collecting and analyzing data
* reporting results.

Following this analysis, faculty design an action plan that leads to program improvement. Faculty must regularly assess stated goals and outcomes through an annual review (Progress Report) to measure program improvement. Revisions to program goals and outcomes should reflect outcome data and/or newly identified program needs.

### Strategic Plan

The program must have a strategic plan (including steps to implement that plan) in place to begin this process. Program goals should align with the department’s strategic plan.

### Sources of Evidence

Not all sources of evidence described in these guidelines will be applicable to every program. Select applicable sources of evidence to conduct the review. Faculty may also utilize other sources of evidence not listed in the guidelines.

# Program Review Evaluation Standards

**Program Improvement Plan (PIP) Update**

In their 2014—15 Program Improvement Plans, program faculty formed Action Plans and identified significant challenges and significant opportunities. The plans also outlined specific action steps for addressing those challenges and opportunities to improve the program.

* Provide the program’s 2014—15 PIP Action Plan.
* Report on the program’s successes in achieving the action steps outlined in the Program Improvement Plan.
* Describe the impact of these successes.
* Provide specific evidence to illustrate progress.
* If any goals were not achieved, provide an explanation and a timeline with specific dates for achieving those goals.
1. **Program Mission and Strategic Alignment**

* 1. **Mission(s) Alignment**

The program should align with the mission of the discipline/profession, academic department, academic college, and University.

* Provide the program’s strategic plan and mission statement.
* Describe and demonstrate how the program aligns with and contributes to the mission of its discipline/profession, department, college, and university.
* Discuss any instances in which the program is not aligned with these missions or addresses additional goals/missions.
* If applicable, discuss how the program fulfills a specialized need outside any of these missions.
	1. **Strategic Alignment**
* **Community Engagement**

The program should demonstrate a commitment to the educational, economic, and societal needs of the region through direct engagement to local, regional, and discipline communities of interest. Describe evidence of the program’s community engagement activities and scholarship, including level of participation and impact upon the community and/or the program’s field.

* **Interdisciplinary Engagement**

Dynamic programs seek to create or extend connections between fields and programs. Program faculty work together to answer big questions and solve problems to advance knowledge in their fields as well as to seek innovative ways to serve students and communities of interest.

Describe the program’s interdisciplinary engagement in the following areas:

* + Curriculum
	+ Department, college, and university
	+ Research and scholarly activity
	+ Other as applicable
* **Global Engagement**

Programs also meet needs beyond the region and fulfill areas of societal and global concern. How does the program address or allow for an awareness of a global society?

1. **Program Quality**
2. **Program Student Learning Outcomes Assessment**

Assessment of student learning is a primary indicator of program quality. The program faculty should assess student learning in relation to stated competencies. Data should provide both students and faculty with valid and timely indicators of student progress toward stated goals and outcomes across the learning domains. Programs already participate in assessment processes on a yearly basis, and assessment reports can be used to provide evidence during program review.

Some of the expected activities of assessment include

* analysis of outcome data is used to identify strengths, weaknesses, obstacles, and opportunities for student learning at the program level
* an action plan based upon the analysis is developed and implemented
* periodic data analysis is used to determine the effectiveness of the plan.

A progress report including adequate documentation of student learning, progression, and achievement of required minimum expectations and competencies must exist in sufficient detail. Consult “Appendix A: Student Learning Outcomes Assessment Worksheet” for guidance completing this section.

The program should document and demonstrate the **effectiveness** of the following:

* Appropriate plans to assess student learning with adequate formative and summative assessment instruments
* Assessment reports that reflect collection of data and analysis of all learning outcomes in the program
* Holistic review of the assessment cycle for strengths and challenges
* Evidence of appropriate program improvements and impact on learning
1. **Curricular Effectiveness**

The program’s curriculum must be structured to ensure achievement of the program goals and outcomes in all learning domains. To ensure curricular effectiveness, the following should occur at the program level:

* Scope and sequence of courses are reviewed periodically to ensure student success. Courses are aligned to provide efficient matriculation through the program.
* Syllabi are clearly written and include stated goals, outcomes, and competencies required for course completion.
* Courses within the program provide the required knowledge, skills, and competencies to meet or exceed those demanded by the discipline or the profession.
* Course instruction follows “best practice” related to teaching and learning.

Use the forms of evidence listed below to discuss the **curricular effectiveness** of the program:

* Program four-year plan
* Length of time to completion for students
* Sample syllabi
* Course pass rate
* Analysis of syllabi for content, instructional practices, and types of assessment
* Alignment matrix to discipline or professional standards
* State or national exam pass rate
* Curriculum change documentation demonstrating relationship to program effectiveness
* Other evidence as appropriate
	+ 1. **Program Effectiveness Evaluation**

Faculty must assess a program’s effectiveness in achieving its goals and outcomes in all learning domains. Student progress, completion, and post-graduation data are used to evaluate the effectiveness of the program.

 Suggested means of evaluating the **effectiveness** of the program include:

* Enrollment trends (last five years)
	+ Number of students
	+ Admission requirements
	+ Diversity of student population
	+ Number of applicants (last five years)
	+ Number of accepted/provisional/denied applicants (last five years)
* Program completion rates (last five years)
* Graduation rates (last five years)
* Attrition (identify reasons for attrition)
* Average time to degree completion
* Student success
	+ Employment
	+ Graduate school admissions
* Exit interviews at the conclusion of the program
* Student surveys
* Graduate surveys
* Employer surveys
* State or national board exam performance
* Status of accreditation with external agency (if applicable)
* Other evidence as appropriate
1. **Program Resources**

The program resources must be sufficient to ensure the success of the program and achievement of the goals and outcomes.

* + 1. **Personnel**

An adequate number of qualified faculty and staff with the necessary qualifications must exist to perform the necessary job functions to achieve the goals and outcomes of the program.

* **Faculty**

 Describe the program’s faculty in relation to the following areas:

* + Diversity (gender, ethnicity, length of service)
	+ Full-time and part-time teaching
	+ Ratio of “qualified by credential” to “qualified by exception”[[1]](#footnote-1)
	+ Continuous activities and achievements in teaching, scholarship, and service
	+ Need for additional faculty

Describe the adequacy of faculty resources including office computers, technology, and software as well as institutional support for travel, grant writing, and grant administration.

* **Professional, Clerical, and Support Staff**

Describe the adequacy of the number of professional, clerical, and support staff. Describe any additional needs.

* + 1. **Relationship of Resource Allocation to Mission and Strategic Plan**

Resource allocation within a program should align with the program mission and strategic plan. Provide information and/or data related to the program’s financial resources. Describe how decisions are made to allocate these resources based upon the program’s (and the university’s) mission and strategic plan. Sources of evidence could include:

* Requests for / allocation of faculty positions
* Use of reassigned time
* College fee use
* Course fee use
* Lab fee use
* Funding requests
* Grant funding
	+ 1. **Classroom, laboratory, clinic, technology, and technology support**

Programs require adequate facilities in order to achieve their goals and outcomes. Describe the adequacy of the program’s information resources and classroom, laboratory, clinic, technology, and technology support. Include information from any of the following sources as evidence:

* Resource survey
* Student exit interviews
* Graduate survey
* Employer survey
* Adequacy of library resources
	+ 1. **Instructional equipment and supplies**

Programs require an adequate amount, type, and distribution of equipment and supplies in order to achieve their goals and outcomes. Describe the adequacy of the program’s instructional equipment and supplies. Include information from any of the following sources as evidence:

* Resource survey
* Student exit interviews
* Graduate survey

* + 1. **Affiliations for internships, practicums, co-ops, and clinical instruction**

 Adequate affiliations must exist to achieve the goals and outcomes of the

program. Describe the adequacy of the program’s affiliations. Include information from any of the following sources as evidence:

* Resource survey
* Student exit interviews
* Graduate survey
* Employer survey
1. **Ethical and Responsible Conduct**
	* 1. **Advising Support for Student Progress and Completion**

Program faculty should demonstrate concern for student aptitude or ability to benefit in the program. Program faculty should assist students in making reasonable progress in the program, make students aware of university policies and procedures, and refer students to support services and resources to assist them with their academic and non-academic needs.

The program should document and demonstrate the effectiveness of the following:

* Up-to-date curriculum sheets and four-year graduate plans
* Accurate program information in DARS
* Program/department advising policies
* Curriculum sheets / four-year plans
* Committee/program/department minutes with advising discussion/action steps/progress reports
* Department advising handbooks that are up-to-date
	+ 1. **Publications and Disclosure**

All announcements, catalogs, bulletins, publications, and advertising must accurately reflect the program. Discuss the adequacy of the program’s publications and disclosures in relation to the following areas:

* Current and up-to-date curriculum for distribution
* Accurate web-site information from all sources (regularly updated and maintained)
* Clear information on plan(s) to successfully complete the program

* + 1. **Agreements**

Formal affiliation agreements or memorandum of understanding between the program and all other entities involved in the education of the students, University, and affiliated site. Summarize any relevant agreements. The agreement must describe the relationship, role, and responsibilities of the program, University, and affiliated site. Describe the adequacy and status of any of the program’s agreements at all sites.

1. **Next Steps**
	* 1. **Goals and Action Steps**

Identify new goals and actions steps for the program’s strategic plan that were generated during the program review process.

# Appendix A: Student Learning Outcomes Assessment Worksheet

## Full Assessment Cycle[[2]](#footnote-2) Review and Analysis

**Yearly student learning outcomes assessment reporting is an integral part of program review**. It is necessary for programs to collect, analyze, and take action on student learning outcomes assessment data on a yearly basis in order to demonstrate evaluation of program quality in program review. In order to support the holistic view of the assessment cycle needed as part of program review, this worksheet guides programs in a full cycle assessment review. This worksheet will allow departments to consider the current status of student learning in the programs as well as identify key areas to evaluate for improvement. Completion of this worksheet will serve three functions:

1. Completing this worksheet will satisfy program review needs for Section II. A. Program Student Learning Outcomes Assessment.
2. It will satisfy assessment reporting for the programs in 2015-16.
3. It will provide evidence of programs’ efforts to “close the loop” in evaluating all outcomes while planning for the next cycle of student learning outcomes assessment.

Programs would be expected to produce an assessment cycle analysis using assessment reports over the last five years (or number of years in cycle). Program assessment report submissions and feedback for the last five years is available on the Office of Assessment website. The analysis should address the following questions at a full-cycle level:

1. What student learning outcomes data did you collect in 2014-15?
2. What are your student learning outcomes for the program?
3. In the cycle, what were major strengths or challenges in student learning?
4. Were there action steps identified in the past assessment cycle?
5. Where those changes made? What is the evidence of these changes?
6. What is the impact of those changes on student learning in the program?
7. If there is no evidence of impact, what data do you need to collect to evaluate change? What is your timeline for evaluation, starting with the 2015-16 academic year?
8. How well does your assessment process adequately evaluate student learning in the program?
9. What are current concerns regarding student achievement of program learning outcomes?
10. Upon which outcomes should the program focus for the next cycle? Programs may choose to place a priority focus on a particular program student learning outcome (e.g., student writing, contextual analysis, technical performance, etc.) as long as each SLO is measured once in the next five years[[3]](#footnote-3).

# FAQs for Completing 2015-16 Undergraduate Program Review

### Q: When is the self-study due to the dean?

Program review self-studies are due to the College Completion Committees on **February 1, 2016**.

In 2015—16, approximately 20% of the university’s academic programs will submit for a full program review. The rest of the academic programs will be divided equally and scheduled to undergo full review over the next four years.

Programs undergoing full review will address **all** of the standards in their self-study.

Programs not scheduled for full review must complete the following standards:

* **Program Improvement Plan Update**
* **Standard I (Program Mission and Strategic Alignment)**
* **Standard II.A**. **(Program Student Learning Outcomes Assessment)**

If a program has insufficient evidence to address one or more of the other standards, the program should develop an action plan with a timeline for completion of the review.

### Q: What do we do if we can’t yet address part of a standard?

During this initial phase of program review, some programs may not yet have had time to develop or implement the processes to address everything required in the standards. If a program cannot yet address part(s) of a standard, the program should provide an **Evidence Action Plan** (with specific target dates for steps in the plan) to address the standards. If, for example, a program does not have a method of assessing placement and employment of its graduates, the program should provide an action plan for that review standard. A program may have multiple action plans within its self-study.

### Q: What happens to our self-study after it is submitted on February 1, 2016?

Consult “Program Review Year 1 Process” for a timeline of the process.

The College Completion Committees will review the self-studies (Internal Review) and make recommendations about when each program should begin the full review cycle. This review evaluates completion, not quality of process. If a self-study is incomplete, the program will have a brief window of opportunity to address omissions. The college committees’ findings are due by February 19, 2016.

On February 19, 2016, university committees consisting of faculty members from each of the colleges (External Review) will begin reviewing self-studies using the program review rubric. Reviews will be based upon the level of evidence provided to meet standards. Once the reviews are complete, findings are due to an ad hoc Academic Senate committee on April 1, 2016.

On April 1, 2016, the senate committee will begin reviewing the findings from the External Review to confirm those findings, provide recommendations about opportunities for program investment, and make any adjustments to review cycles. The senate committee’s findings will be presented to the full Academic Senate at its May 2016 meeting, and then the findings will be sent to the Provost.

### Q: Who determines when each program is scheduled to undergo Full Review?

The dean of the program’s academic college, in consultation with the College Completion Committee, will make a recommendation to the Provost regarding when each program will undergo Full Review.

### Q: How will we keep the College Completion Committee updated on our progress with our Action Plans?

In any year that programs do not undergo Full Review, programs will submit yearly **Progress Reports** documenting progress with each element of their Action Plans. Program Reports should also include any updates to Standard I and Standard II.A.

### Q: How long does our self-study have to be?

The self-study document should adequately answer each question while remaining clear and concise. The documents will be reviewed by committee members who may not be familiar with your discipline.

### Q: Who is responsible for carrying out the actions and steps outlined in our program improvement plan, our self-study, and our action plans?

Program review is a faculty-driven process undertaken in coordination with department chairs and/or program coordinators. All full-time faculty associated with a program should participate in its review and are responsible for setting and meeting deadlines established in the program review documents.

### Q: Any other general advice?

Each program director and faculty member should read the program review guidelines and the review standards thoroughly before composing the self-study document. Each program director, whenever possible, should work on this review with a committee of faculty to emphasize program unity and shared governance.

# Program Review Tracks Explained

The program review process at YSU is envisioned as a five-year cycle, with each program undergoing a full program review every five years. Approximately 20% of all programs in a college will be reviewed each year by the program review process. However, since program review has not been undertaken in some time, YSU needs to simultaneously move forward with some full reviews while ensuring that all programs are gathering the evidence needed to complete their reviews within the next five years.

The program review process for 2015—16 will include two tracks, which will be decided by the deans in the colleges in consultation with department chairs:

**2015—16 Full Review (Track One):** Selected programs will undergo a full program review and will provide evidence and arguments for all sections of the program review. The full review will be completed by approximately 20% of programs in each college. Reviews will go through the full review process, and the university-level Program Review Committee will conduct the evaluation.

**2015—16 Abbreviated Review (Track Two):** The remaining 80% of programs will undergo an abbreviated program review for 2015—16. The abbreviated review will include submission of the PIP update; Section I (Mission and Strategic Alignment); and Section IIA (Assessment Cycle Review).

In addition, all abbreviated reviews will submit an Evidence Action Plan to aid in distributing the remaining 80% into review years for 2017—2020. The action plan is a spreadsheet used to catalog available evidence to meet the remaining standards, any evidence needed to be gathered or compiled, an action plan for preparing, and a reasonable timeline for completion. The Evidence Action Plan will be used by the College Completion Committee to make recommendations to the dean for the program review schedule. Programs will need to report to the College Completion Committee yearly on Evidence Action Plan progress to ensure preparation for full program review.

Program Review Tracks Process, 2015—2016

Internal

Review

Only

**Internal and external review**

**Undergoes internal (college) and external (university) review**

# Program Review Year 1 Submission Process and Deadlines

Confirms

Makes recommendations Creates cycle

External Review

Internal Review

College Completion Review

University Level Review

~42 faculty members (7 committees x 6 members)

Senate Committee

Provost

@ May

meeting

Due February 1

Due February 19

complete

Due April 1

Opportunity for program response

Incomplete

# Full Program Review Submission Form

Please refer to the Program Review Standards, Evaluation Rubric, and FAQs for information about how to complete the program review.

Please provide evidence of standards for each of the following areas. Text boxes will expand as you type. You may include some visual or graphic evidence within the answer, but include longer evidence as appendices at the end of the form.

**Program Name**:

**Contact Person**:

|  |
| --- |
| **Program Improvement Plan (PIP) Update** |
|  |
|  |
| **I. Program Mission and Strategic Alignment** |
| 1. **Mission Alignment**
 |
|  |
| 1. **Strategic Alignment**
* **Community Engagement**
* **Interdisciplinary Engagement**
* **Global Engagement**
 |
|  |
|  |
| **II. Program Quality** |
| 1. **Program Student Learning Outcomes Assessment**
 |
|  |
| 1. **Curricular Effectiveness**
 |
|  |
| 1. **Program Effectiveness Evaluation**
 |
|  |
|  |
| **III. Program Resources** |
| 1. **Personnel**
* **Faculty**
* **Professional, Clerical, and Support Staff**
 |
|  |
| 1. **Relationship of Resource Allocation to Mission and Strategic Plan**
 |
|  |
| 1. **Classroom, laboratory, clinic, technology, and technology support**
 |
|  |
| 1. **Instructional equipment and supplies**
 |
|  |
| 1. **Affiliations for internships, practicums, co-ops, and clinical instruction**
 |
|  |
|  |
| **IV. Ethical and Responsible Conduct** |
| 1. **Advising Support for Student Progress and Completion**
 |
|  |
| 1. **Publications and Disclosure**
 |
|  |
| 1. **Agreements**
 |
|  |
|  |
| **V. Next Steps** |
|  |

# Abbreviated Program Review Submission Form

**(with Evidence Action Plan)**

Please refer to the Program Review Standards, Evaluation Rubric, and FAQs for information about how to complete the program review.

Please provide evidence of standards for each of the following areas. Text boxes will expand as you type. You may include some visual or graphic evidence within the answer, but include longer evidence as appendices at the end of the form.

**Program Name**:

**Contact Person**:

|  |
| --- |
| **Program Improvement Plan (PIP) Update** |
|  |
|  |
| **I. Program Mission and Strategic Alignment** |
| 1. **Mission Alignment**
 |
|  |
| 1. **Strategic Alignment**
* **Community Engagement**
* **Interdisciplinary Engagement**
* **Global Engagement**
 |
|  |
|  |
| **II. Program Quality** |
| 1. **Program Student Learning Outcomes Assessment**
 |
|  |

Please use this spreadsheet to inventory sources of evidence available to support program review, needed additional data, and an action plan and timeline for gathering needed data.

| Evaluation Standard | Evidence Available | Additional Evidence Needed | Action Plan for Sufficient Evidence | Timeline for Completion |
| --- | --- | --- | --- | --- |
| 1. Program Quality
	1. Curricular effectiveness
 |  |  |  |  |
| 1. Program Quality
	1. Program effectiveness evaluation
 |  |  |  |  |
| 1. Program Resources
	1. Personnel
 |  |  |  |  |
| 1. Program Resources
	1. Relationship of resource allocation to mission and strategic plan
 |  |  |  |  |
| 1. Program Resources
	1. Classroom, laboratory, clinic, technology, and technology support
 |  |  |  |  |
| 1. Program Resources
	1. Instructional equipment and supplies
 |  |  |  |  |
| 1. Program Resources
	1. Affiliations for internships, practicums, co-ops, and clinical instruction
 |  |  |  |  |
| 1. Ethical and Responsible Conduct
	1. Advising support for student progress and completion
 |  |  |  |  |
| 1. Ethical and Responsible Conduct
	1. Publications and disclosure
 |  |  |  |  |
| 1. Ethical and Responsible Conduct
	1. Agreements
 |  |  |  |  |

# Program Review Evaluation Rubric

This rubric will be used for external evaluation by the University-Level Program Review Committee

|  |  |
| --- | --- |
| Name of Degree Program |  |
| Program Director/Coordinator andPerson completing the review (if different) |  |
| Review Completion Data |  |
| Review Team—Lead  |  |
| Review Team members |  |

| **CRITERIA** | **(1)****Program is missing evidence or missing enough detail to demonstrate the component has been met.**  | **(2)****Program provides evidence of progress toward meeting the component.** | **(3)****Program provides evidence that the component has been met.**  | **(4)****Program provides evidence that the component has been met and exceeded.** | **Comments** |
| --- | --- | --- | --- | --- | --- |
| **I. Program Mission and Strategic Alignment** |  |  |  |  |  |
| A. Mission and Strategic Plan Alignment | The program mission and strategic plan are not aligned with the mission of the discipline, department, college, and/or university. | The program mission and strategic plan show some alignment to at least one of the following missions: discipline, department, college, or university. | The program mission and strategic plan show direct alignment to the mission of the discipline, department, and college but not to the university. | The program mission and strategic plan show direct alignment to the mission of the discipline, department, college, and university. |  |
| B. Strategic Alignment—Community Engagement | There is no evidence of direct engagement with local, regional, or discipline communities of interest. | There is evidence of indirect engagement with local, regional, or discipline communities of interest. The program has tenuous partnerships with such entities. | There is evidence of direct engagement with local, regional, or discipline communities of interest. There is evidence of strong partnerships with such entities. | There is evidence of direct engagement with local, regional, or discipline communities of interest. There is evidence of strong partnerships with such entities. In addition, program shows how communities of interest rely on the program to achieve their mission/goals. |  |
| C. Strategic Alignment—Interdisciplinary Engagement | There is no evidence of interdisciplinary engagement with other fields or programs. | There is evidence of sporadic engagement with other fields or programs. | There is evidence of long-term, sustained engagement with other fields or programs. | There is evidence of long-term, sustained engagement with other fields or programs that result in innovation. |  |
| D. Strategic Alignment—Global Engagement | There is no evidence that the program addresses or allows for an awareness of a global society. | The program demonstrates an awareness of the need for global engagement but does not have a plan in place for it to occur. | The program demonstrates active participation in activities that address or allow for an awareness of a global society. | The program demonstrates how its participation in global society has made a difference in the lives of individuals or groups. |  |
| **II. PROGRAM GOALS AND OUTCOMES** |  |  |  |  |  |
| A. Program Student Learning Outcomes Assessment | No outcomes stated or outcomes are not appropriate to the mission of the program. No analysis of learning at the program level **or** no evidence of addressing learning deficiencies. | Outcomes are present but are vague, or are not measurable.Analysis of the program learning outcomes is not done in a holistic manner. Incomplete evidence of addressing learning deficiencies. | Outcomes are clearly stated and include adequate formative and summative assessments to measure them. Holistic analysis of all learning outcomes in the program. Evidence of program improvements to address deficiencies. | Level 3 plus a comprehensive review of program strengths, challenges, and ways to address them. Program has evidence of impact on student learning. Program provides a plan for the next assessment cycle including areas for emphasis or further investigation. |  |
| B. Curricular Effectiveness—Alignment  | No evidence of scope and sequence related to KAS (knowledge, application, and synthesis) **or** no evidence of alignment to program goals. | Evident scope and sequence but not related to KAS **or** partial alignment to program goals. | Scope and sequence show how knowledge, application, and synthesis are distributed across courses and the program. Direct alignment to program goals. | Program demonstrates Level 3 plus a visual representation of direct alignment between program goals, student learning objectives, courses, KAS’s, and assessments.  |  |
| B. Curricular Effectiveness—Content | Course content is not related to the content and competencies demanded by the discipline or the profession **or** content competencies are not stated. | Course content is vaguely related to content and competencies demanded by the discipline or profession. | Course content is clearly related to competencies demanded by the discipline or profession. | Program demonstrates Level 3 plus innovation in curriculum structure and delivery. |  |
| B. Curricular Effectiveness—Pedagogy  | There is no evidence of anything other than direct instruction used in the courses. | There is evidence that content is presented in modes other than direct instruction in courses. | Content is presented using a variety of modalities and technology in courses.  | Level 3 plus courses include projects and/or opportunities to apply content (experiences outside of class). |  |
| B. Curricular Effectiveness—Data  | Data is not used to demonstrate curricular effectiveness. | A limited amount of data is presented to demonstrate curricular effectiveness. | Various forms of data are presented to demonstrate curricular effectiveness. | Program demonstrates use of data to make appropriate changes to positively impact curriculum effectiveness. |  |
| C. Program Evaluation—Data  | Data is not used to demonstrate program effectiveness. | A limited amount of data is presented to demonstrate program effectiveness. | Various forms of data are presented to demonstrate program effectiveness. | Program demonstrates use of data to make appropriate changes to positively impact program effectiveness. |  |
| **III. Program Resources** |  |  |  |  |  |
| A. Personnel-Faculty | Faculty lack expertise, scholarship, service, and/or sufficient diversity to adequately meet program needs.  | Faculty exhibit expertise, scholarship, service, and diversity in some, but not all, area of program and university need.  | Faculty exhibit sufficient expertise, scholarship, service, and diversity to support the program and university.  | Faculty exhibit breadth of expertise, scholarship, service, and diversity to support program and university excellence.  |  |
| A. Personnel-Staff | Staff support is inadequate. | Staff support may be inadequate. | Staff support is adequate. | Staff support is adequate and enhances program excellence. |  |
| B. Relationship of resource allocation to mission and strategic planning | Program provides no evidence of a connection between resources and program mission and goals | Program provides some evidence of resource allocation alignment, but evidence may be incomplete or not clearly aligned with program mission or goals. | Program provides evidence of alignment between mission and goals of program and available resources to allocate.  | Program provides strong evidence of alignment between mission and goals of program and available resources to allocate **and** evidence of communicating financial need and advocating for program needs. |  |
| C. Classroom, laboratory, clinic, and technology support | Facilities and resources are inadequate and cannot meet program needs.  | Facilities and resources may be adequate in some, but not all, areas.  | Program provides evidence that facilities and resources are sufficient to support program needs.  | Program provides evidence that facilities and resources are used to effectively meet program goals and enhance educational experiences. |  |
| D. Instructional equipment and supplies | Equipment and supplies are inadequate and cannot meet program needs.  | Equipment and supplies may be adequate in some, but not all, areas.  | Evidence that equipment and supplies are sufficient to support program needs. | Evidence that equipment and supplies are used to effectively meet program goals and enhance educational experiences. |  |
| D. Affiliations for internships, practicums, co-ops, and clinical instruction (if applicable) | Program does not have sufficient affiliations for applied experience to meet the goals of the program. | Program may have affiliations in place, but not to sufficient breadth or depth of applied experience to meet the goals of the program. | Program provides evidence of sufficient affiliation to meet applied experience goals of the program. | Program provides evidence of strong affiliations that support alignment of applied experience with program goals. Communication supports direct alignment of experience with program goals  |  |
| Addressing resource deficiencies | Inadequacies are identified, and no plan or capacity for improvement is in place. | Inadequacies are identified; however, plan and capacity for improvement are in place. | Inadequacies are identified, but action steps have been taken to improve. | There are no inadequacies. |  |
| **IV. Ethical and Responsible Conduct** |  |  |  |  |  |
| A. Advising and Support for Student Progress and Completion | Program materials are not up-to-date or multiple versions exist. Policies and advising support is inadequate and/or hinders student progress to completion. | Some program materials are up-to-date, but not all **or** there are multiple versions. Policies and advising may not sufficiently support student progress to completion | Program materials are up-to-date and policies and advising practices assist students in progress to completion. | Program materials, policies, and advising practices support and promote efficient progress for students to completion. Program works with students to revise plans and/or overcome obstacles to completion |  |
| B. Publications and Disclosure | Public information may be incomplete, contradictory, out-of-date, or missing. Public materials are not ADA compliant. | Some public information may not current and/or consistent. Public materials may not be ADA compliant. | Public information communicated about the program is current. Public materials are ADA compliant. | All pubic information on the program and program completion is clear, up-to-date, and consistent. ADA compliance is considerate of the range of potential and current students and is fully integrated into all public communications and materials. |  |
| C. Agreements | Affiliate agreements are not formalized or are inadequate to fulfill the educational needs of the program and students. | Affiliate agreements may not be appropriately formalized, but roles and responsibilities have been articulated for all involved parties. | Affiliate agreements are formalized, and agreements outline roles and responsibilities of the program, students, and affiliates. | Affiliate agreements are formalized and outline roles and responsibilities of the program, students, and affiliates. Communication ensures parameters of agreements are met and educational needs of students are fulfilled. |  |
| **V. Next Steps** |  |  |  |  |  |
| 1. Goals and Action Steps
 | Goals and action steps for the program are not identified and are not identified in the departmental strategic plan. |  | Goals and action steps for the program are identified or are included in the departmental strategic plan. |  |  |

1. Consult the Provost’s website for YSU’s Faculty Highest Degree Form and more information at <http://web.ysu.edu/gen/ysu/Forms_for_the_Academic_Division_m1227.html> [↑](#footnote-ref-1)
2. assessment cycle: the number of years needed to collect and analyze data for all program SLOs, usually on a two-SLOs-per-year schedule [↑](#footnote-ref-2)
3. For example, if a program with six SLOs wishes to place a priority focus on one area of learning concern—for example, writing—the program could focus its data collection, analysis, and action steps in that area each year with the intent of making changes and looking for learning improvements. Programs could use one method to measure the others over the next five years. The result would be: Y1, writing/SLO2; Y2, writing/SLO3; Y3, writing/SLO4; Y4, writing/SLO5; and Y5, writing/SLO. [↑](#footnote-ref-3)