**LMC Comprehensive Program Review**

Instructional Units

 **2017-2018**

**Program/Discipline: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The following provides an outline of the required elements for a comprehensive unit/program review for Instructional Programs and Units. Upon completion of this report, please upload your document in the unit/program review application data/documents tab.

# Program Changes

* 1. How have your degree and certificate offerings changed over the last 5 years? ( e.g. new programs, discontinued or major changes to existing programs)
	2. What changes are you planning to your degree and certificate offering over the next 5 years? What is the rationale for the anticipated changes? Will these changes require any additional resources?

# Degree and Certificate Requirements

**Please review the data provided on all degree/certificate completions in your program, including locally approved College Skills Certificates from Fall 2012—Spring 2017.**

* 1. For each degree/certificate offered, map a pathway to completion of courses within the major in a maximum of 4 semesters, assuming a maximum of 6-10 units of major courses within a semester. Use the following format:

|  |
| --- |
| Name of Degree or Certificate |
| Semester | Semester 1 | Semester 2 | Semester 3 | Semester 4  |
| List Courses Needed for Degree or Certificate in each semester. |  |  |  |  |

# Frequency of Course Offerings

**Please review the data provided on frequency of all courses offered in your discipline in the last 2 years (Fall 2015-Spring 2017).**

* 1. If a course has not been offered in the past two years, but is required for a degree or certificate, please explain why it has not been offered, and what the plan is to offer it in the future.
	2. If the course is not required for a degree or certificate, is the course still needed in the curriculum or is the department considering deleting it?
	3. For the next two years, project how frequently your program intends to offer each course. Please provide a rationale for any major changes from the last 2 years that you anticipate.

|  |  |
| --- | --- |
| Course | Estimated Number of Sections Offered by Semester |
|  | **Fall 2018** | **Spring 2019** | **Fall 2019** | **Spring 2020** |
| *COURSE 001* |  |  |  |  |
| *COURSE 002* |  |  |  |  |
| *COURSE 003* |  |  |  |  |
| Rationale for any Major Changes |
|  |

# Existing Curriculum Analysis

* 1. **Course Outline Updates**

**Please review the data provided on the status of COORs in your discipline. (Note: This data does not reflect courses submitted after May 2017.) For each COOR that has *not* been updated since Spring 2012, please indicate the faculty member responsible for submitting the updated COOR to the Curriculum Committee by April 18, 2018.**

|  |  |
| --- | --- |
| Course | Faculty Responsible for COOR Update |
| *COURSE 001* |  |
| *COURSE 002* |  |
| *COURSE 003* |  |

* 1. **Course Offerings/Content**

|  |  |
| --- | --- |
| How have your courses changed over the past 5 years (new courses, significant changes to existing courses)? |  |
| How have these changes enhanced your program?  |  |

# New Curriculum Analysis

* 1. **If you are creating new degrees or certificates in the next 5 years: (Indicate N/A if no new degrees or certificates are planned.)**

|  |  |
| --- | --- |
| What additional courses will need to be created to support the new degree or certificate? |  |
| What significant changes to existing course content would need to be made to support the new degree or certificate?  |  |

# Advisory Board Update (For all CTE TOP coded programs)

Give an overview of the current purpose, structure, and effectiveness of your Advisory Board. Include: membership, dates of last meetings over the past two years.

# Assessment Effectiveness:

* 1. **Course Level Assessment**

**Please review the data provided on assessment status of courses in your discipline in Cycle 1 ( 2012-2017).**

* + 1. If there were any courses that were not assessed in Cycle 1, please explain why they were not assessed.
		2. If a course was not assessed in Cycle 1 because it was not offered, what is the future of that course?
	1. Delete the course
	2. Market/promote the course to gain enrollments
	3. Other
		1. Course level assessment should be meaningful, measurable and manageable. Overall, reflecting on the course level assessment, please rate the degree to which you feel your assessments meet these 3M’s.

Meaningful:

|  |  |  |
| --- | --- | --- |
| 1 | 2 | 3 |
| The assessment was not meaningful in collecting data or information that supported course improvement or pedagogical changes.  | The intent was understood, but the outcome fell short of meeting the objective of course assessment, which is to improve student learning. The changes to the course or pedagogy to support the course were not clear.  | Changes were made to the course content or delivery to improve course effectiveness. The process promoted pedagogical dialog within the department, and changes were adopted accordingly. |

Measurable:

|  |  |  |
| --- | --- | --- |
| 1 | 2 | 3 |
| The data collected did not inform teaching and learning.  | The assessment produced some measurable information, but created more questions than answers.  | Results were straightforward and easy to interpret. The course of action to improve the course or its delivery was clear from the data that was collected.  |

Manageable:

|  |  |  |
| --- | --- | --- |
| 1 | 2 | 3 |
| Assessment was not manageable.  | The assessment process was somewhat manageable, but posed challenges to implement across the program.  | The assessment was easily scaled across the department so that full- and part-time faculty could participate with meaningful outcomes.  |

* + 1. What changes in the assessment process itself would result in more meaningful data to improve student learning?
		2. Share an outcome where assessment had a positive impact on student learning and program effectiveness.
	1. **Program Level Assessment**
		1. In 2016-2017, units engaged in program level assessment. **Please submit all Program Level Assessment Reports using the link provided**. Describe one important thing you learned from your program level assessment.
		2. What was the biggest challenge in conducting program level assessment?
		3. What resource needs, if any, were identified in your program level assessment?

# Course Success/Retention Analysis

**Please review the data provided on course retention and success, which has been disaggregated by as many elements as district can provide in their SQL Report**

One of our college goals as stated in our Integrated Plan is to “Increase successful course completion, and term to term persistence.” Our Equity Plan identifies African- American and low income students as disproportionally impacted in terms of successful course completion. (Foster youth are also disproportionately impacted on this indicator, but numbers are too small to disaggregate by discipline/program) Please indicate how well students in these groups are succeeding in your discipline.

|  |  |  |  |
| --- | --- | --- | --- |
|  | African-American  | Low Income Students |  All students in program/discipline |
| Completion Rate (program/discipline) |  |  |  |
| Success Rate (program/discipline) |  |  |  |

* 1. In looking at disaggregated data on success/retention, is there anything else that stands out?
	2. What are some strategies that might help students, particularly African-American, foster youth, and low income students successfully complete courses in your discipline? What resources would be needed to implement these strategies?

# Goals

* 1. **Review your program’s goals as listed in response to the final question of your 2012-2013 Comprehensive Program Review posted in the Data Repository of the PRST.**

|  |  |
| --- | --- |
| Highlight some of the key goals that were achieved over the past 5 years. What were the key elements that led to success? |  |
| Were there any goals that did not go according to plan? What were the key elements that impeded the progress on these goals? |  |

* 1. **Consider the College’s Strategic Directions along with our Integrated Planning Goals listed here:**

|  |  |
| --- | --- |
| College Strategic Directions 2014-2019 | Integrated Planning Goals  |
| 1. Increase equitable student engagement, learning, and success.2. Strengthen community engagement and partnerships. 3. Promote innovation, expand organizational capacity, and enhance institutional effectiveness. 4. Invest in technology, fortify infrastructure, and enhance fiscal resources. | **1. ACCESS: increase access through enrollment of students currently underserved in our community.****2. IDENTIFYING PATHWAYS: Increase the number of students that define a goal and pathway by the end of their first year.****3. COLLEGE-LEVEL TRANSITION: Increase the number of students successfully transitioning into college level math and English courses.****4. PERSISTENCE & COMPLETION: Increase successful course completions, and term to term persistence.** **5. EQUITABLE SUCCESS: Improve the number of LMC students who earn associates degrees, certificates of achievement, transfer, or obtain career employment.****6. LEARNING CULTURE: Enhance staff, faculty and administration’s understanding and use of culturally inclusive practices/pedagogy, demonstrating empathy and compassion when working with students.** |

**List 3 – 5 longer term (5 year) new goals for your program. For each goal, pick 1 – 2 College Strategic Directions and/or 1 – 2 Integrated Planning Goals to which your new goal aligns.**

|  |  |  |
| --- | --- | --- |
| Goals | Aligned College Strategic Direction(s) | Aligned Integrated Planning Goal(s) |
| Goal 1: |  |  |
| Goal 2: |  |  |
| Goal 3: |  |  |
| Goal 4: |  |  |
| Goal 5: |  |  |

**OPTIONAL**

## **9.3 Resource needs to meet five-year goals**

|  |
| --- |
| **Faculty/Staff Resource Request** |
| Department/Unit Goal - Reference # | Strategic Objective - Reference # |
|  |  |
| Department/Unit Name | Position Name/Classification | FTE |
|  |  |  |
| Position Type | Funding Duration | Funding Source | Est. Salary & Benefits |
|   |   |   |  |
| Justification: |
|  |

|  |
| --- |
| **Operating Resource Request** |
| Department/Unit Goal - Reference # | Strategic Objective - Reference # |
|  |  |
| Department/Unit Name | Resource Type |  |
|  |  |
| General Description | Est. Expense |
|  |  |
| Justification: |
|  |

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| --- |
| **Professional Development Resource Request** |
| Department/Unit Goal - Reference # | Strategic Objective - Reference # |
|  |  |
| Department/Unit Name | Resource Type |  |
|  |  |
| General Description | Est. Expense |
|  |  |
| Justification: |
|  |