



**Kansas City University
Of Medicine and Biosciences
Policy Library**

Institutional Effectiveness #1.1

Policy Name: Program Review
Approval Authority: Executive Leadership Team
Responsible Executive: VP Institutional Effectiveness & Accreditation Compliance
Responsible Office(s): College Deans, Department Chairs, Unit Leaders, and Institutional Effectiveness

KCUMB Program Review (For Academic, Non-Academic and Ancillary Services)

Policy Statement

Program review is the process of regular, systematic review and evaluation of all unit operations of the University. The primary purpose of program review is to examine, assess and develop the quality of academic and non-academic programs and services to identify strengths and weaknesses, opportunities and challenges so that priorities can be established for department/program improvement, modification and budget allocations. The ultimate goal of program review is to promote and maintain academic and service excellence, and ensure that departments/programs are being efficiently and effectively administered in ways that are in alignment with the University's mission and values. Consequently, program reviews are integral to formulating and implementing realistic plans for the future growth and improvement of the University.

The Office of Institutional Effectiveness and Accreditation Compliance is responsible for coordinating the program review process, in collaboration with the program, department and/or unit leaders. All program, department and/or unit reviews (to include academic, non-academic and ancillary units) shall occur within a 5-7 year cycle. There are two primary reasons for this cycle: 1) it fits within the cycle/half-cycle for accreditation review, thereby reducing duplication of efforts; and 2) it provides a manageable number of programs/departments/units for review each year.

Selection of the programs, departments and/or units to be reviewed in a given year will be made by the Vice President of Institutional Effectiveness and Accreditation Compliance in consultation with the Provost. Recognizing that several programs, departments and units will be reviewed each year, the following factors should be considered in the selection process. These considerations are not in priority order:

- Relationship of the program, department or unit to others under review.
- Accreditation cycle(s).
- Marked change in student demand.
- Recent or planned program, department or unit changes of a significant nature.
- Elapsed time since last review.

The program review process has four major components:

1. **Program/Department/Unit Strategic Plan**
The strategic plan allows the program, department and/or unit to develop a mid-range view (3-5 years) of its mission, priorities, and objectives. It should represent a realistic view of the programs/departments/units goals and aspirations along with a specific plan for how it intends to achieve those goals/aspirations. This serves as the baseline for program review.
2. **Internal Review/Self-Study** (Audit)
This is a comprehensive internal review/audit that addresses every aspect of the program, department, and/or unit operations. It should contain the program/unit mission, goals, and objectives, and make recommendations for improvement and/or development based on the analysis of data that shows to what degree or not the program/department/unit are meeting their missions, goals and objectives. This document allows the program/department/unit to share its story with internal and external constituents and is often posted to the University website to fulfill a Title IV compliance regulation.
3. **External Review and/or Best Practice Comparison**
This is the use of an external review team and/or best practice comparison data to secure some perspective on the quality of either the academic program and/or services provided in comparison to industry and consumer expectations. Also helps gauge relevancy of existing practices to consumer demands and expectations.
4. **Action Plan**
Action plans are intended to provide structure for the implementation of recommended improvements that may come from the program review process and should include an implementation time schedule that is reasonable and supported by appropriate budget allocations. All Action Plans must be endorsed by the appropriate college dean or unit leader and approved by the Executive Leadership Team.

Entities Affected by the Policy

All program, department and unit leaders, and their staff.

Policy Procedures

The Vice President for Institutional Effectiveness and Accreditation Compliance (VPIEAC) will inform each program/department/unit leader of their review cycle start date no later than the first business day in October.

Each program/department/unit review shall be completed and submitted to the Vice President for Institutional Effectiveness within 10 months of their notification date.

The VPIEAC will provide Executive Leadership with copies of all program/department/unit reviews.

Executive Leadership reads review and provides program/unit leaders with feedback and/or approval within 4 months of receipt. This feedback cycle provides adequate time for the program/unit leaders to incorporate necessary funding requests into the upcoming budget cycle and/or begin implementing desired changes to program delivery/content and/or service operations either immediately or in preparation for a new academic year.

Recommended Guidelines

The following **guidelines** should prove helpful during each phase of the program review process. Because each program/unit is unique, it is expected that variations may be necessary.

Strategic Plan (if not already developed)

Each program, department and/or unit should develop a strategic plan, which includes, at minimum:

1. A Mission Statement
 - a. Include primary purpose of program/unit/department
 - b. Address how the work of the program/unit/department supports and/or contributes to the University's mission, vision, values, and objectives
2. A SWOT Analysis
 - a. Identify strengths and weaknesses in instruction, research and/or service
 - b. Identify opportunities and threats both currently and in the immediate future, to include internal issues as well as external conditions and/or trends that may impact our ability to achieve stated goals/objectives.
3. Outcomes & Assessment Plan
 - a. Identify the primary expected outcomes for students who complete each degree program; how you assess progress toward achievement of those outcomes, and how assessment results will be used to improve effectiveness of instructional programs. (academic units)
 - b. Identify primary service outcomes/expectations; how you assess progress towards achievement of those expectations, and how assessment results will be used to improve effectiveness of those services (non-academic & ancillary units)
4. Priorities & Objectives/Goals
 - a. Identify other program/unit/department goals and priorities as they relate to instruction, research, and/or service; along with desired outcomes and assessment mechanisms.
 - b. Identify priorities for each goal/objective
 - c. Identify who will be responsible for oversight
5. Action/Implementation Plan
 - a. Describe how the plan will be implemented
 - b. Describe resources needed (funding, technology, staffing, etc)
 - c. Identify time frame for completion

Internal Review (Self-Study)

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Utilizing the program, unit or department strategic plan as a baseline, each unit should conduct an audit/review of all elements of their functional unit (e.g., mission, objectives, goals, services, operational practices, etc.) to not only recognize accomplishments, but also identify opportunities for improvement and growth, as appropriate. The review should include information and analysis pertaining to the unit's efforts to meet and/or support the University's strategic plan, and include supporting evidence. Assessment data should include no less than 5 years worth of data. Examples of assessment data include, but are not limited to:

- Applicant verses matriculated profiles
- Enrollment and graduation rates
- Course/Section score averages and pass rates by program/degree
- Scores on major field achievement and/or licensure/certification tests (e.g., COMSAE, COMLEX, USMLE pass rates and scores by test discipline)
- Student persistence/retention rates (# LOA, WD, Suspensions, Dismissals)
- Service Assessments & Surveys
- Co-curricular activity participation data
- Elective course enrollments by year/term/session
- Faculty teaching, advising and/or research load
- Budget allocations and management
- Professional and/or faculty development participation
- Funded research activity
- Faculty/staff publications
- List of major service accomplishments or awards received
- Technology Survey results
- Section/Course CQI evaluations
- Student evaluation of faculty
- Student & Staff Perception Survey
- Space utilization data
- Number of patrons served
- Number of service requests received and responded to
- Committee participation
- List of modifications made to curriculum, services and/or delivery methods
- List of service learning experiences/activities
- List of community outreach activities
- List of specialized accreditation

Preparation of the self-study should NOT be the sole responsibility of the unit administrator. Instead, the self-study should be a product of the entire department, and potentially include a couple primary service constituents (e.g., students, faculty, and representatives from other service units).

The program/unit/department should engage in the self-study process with the intent of evaluating the extent to which it believes it has been able to realize the mission, priorities, and objectives/goals established in the strategic plan, and should engage in a new SWOT analysis to help envision how it can build on its successes and/or continue to improve, and when unsuccessful, should identify those factors which caused it to fall short.

External Review (or Peer Comparison)

If a program/unit/department elects to pursue the use of an external reviewer/consultant for the self-study process, the selection of that individual or team of individuals must be approved by the Provost. The external reviewer/consultant(s) should be an administrator (usually a dean or department head) from the same discipline and preference should be given to those who have prior experience as a peer reviewer and/or accreditation consultant. If the use of an outside consultant is approved, the VPIEAC will prepare a letter at least one-month prior to the scheduled visit which includes a list of issues/topics the consultant is expected to address in their final report. It is anticipated that the following items will be addressed by any consultant utilized for program self-study reviews:

- the appropriateness of the programs/unit/department's strategic plan and initiatives;
- the quality of the course offerings, academic programs and/or services;
- the quality of the units research and/or scholarly activity (academic);
- the quality of the units outreach efforts;
- the quality and efficiency of the units resource management; and
- recommendations for change and/or improvements in all appropriate areas.

In addition to the items listed above, programs/units/departments may also suggest a limited number of questions related to its unique nature.

Action/Implementation Plan

After all steps of the program review process have concluded, a summary of findings needs created and will include an action plan with specific dates as to how and when recommended changes will be addressed, along with what resources are needed. The program review documents and summary are then submitted to the VPIEAC who then routes the document to the Provost for review and consideration. The Provost reviews the unit review documents and either accepts the response or suggests appropriate changes.

Once agreement is reached and approval of the Provost and/or Executive Leadership Team is communicated, the unit leader then incorporates all recommended changes into a revised strategic plan, and the unit begins implementing the action plan. The revised strategic plan then becomes the baseline for subsequent program review.

Definitions

Academic Programs – An academic program shall be defined by any one or more of the following characteristics:

- includes the word “College”, “School”, “Department”, “Division”, “Institute”, “Center”, “Bureau”, “Clinic” or “Laboratory” as part of its title;
- is headed by a person with academic rank entitled “dean”, “director”, “chair”, “coordinator”, or “head”;
- leads to a degree, certificate, major, minor, credential, or continuing education unit;
- is a distinct academic option, track or emphasis within a larger unit;
- has a sequence of specific academic requirements;

- has received administrative approval to be a distinct academic, research or service function.

Support/Service and/or Ancillary Programs – any unit, department or division that does not have one or more of the academic program characteristics identified above

Responsibilities

Title or Committee
Title or Committee

Responsibility details...
Responsibility details ...

Interpreting Authority

Statutory or Regulatory References

Relevant Links

Policy Adoption Review and Approval