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ACKNOWLEDGMENTS

The authors reviewed a number of assessments and accreditation documents, including the Self Assessment Standards by the Commission on Colleges of the Western Association of Schools and Colleges. These documents provided the foundation for designing the guidelines and procedures for the areas and the Division of Student Affairs. CSU Channel Island’s (CI) original Comprehensive Program Review Process (CPR) was originally developed by Dr. Wm. Gregory Sawyer and Dr. George Morten in 2002 and was updated in 2011 by Dr. Morten. In 2013, the Student Affairs Assessment Council (appointed by the Vice President for Student Affairs) reviewed the content of the CPR in order to meet the emerging needs of the Division.

For additional information about the CPR process, please contact the Vice President of Student Affairs Office at 805-437-8536.

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PURPOSE

This guide is intended to support the staff of the CI Division of Student Affairs as they thoughtfully complete their respective CPR processes. It also serves as a resource for multiple audiences interested in the transformation, learning, and development of students outside of the classroom. It may also be useful for policymakers, University faculty, staff, administrators, students, and a wide variety of service providers.

CSU CHANNEL ISLANDS MISSION STATEMENT

Placing students at the center of their educational experience, California State University Channel Islands provides undergraduate and graduate education that facilitates learning within and across disciplines through integrative approaches, emphasizes experiential and service learning, and graduates students with multicultural and international perspectives.

The starting place for assessment at any institution is its mission statement. It is the mission that tells constituents why the institution exists. It highlights the institution’s values and spells out the principles it follows for realizing its greatest potential. But the mission is also a statement of promise. It says, “As an institution, we promise to fulfill our pledge to…” and it also says, “You can hold us accountable to our word.” Every mission statement comes with this often unspoken promise.
THE DIVISION OF STUDENT AFFAIRS

Vision
To be recognized nationally as university leaders who provide students with excellent needs-based programs and services that cultivate learning, diversity, leadership, wellness, personal and civic responsibility.

Mission
Placing students at the center of their educational experience, the Division of Student Affairs supports and enhances learning and development in and beyond the University community through quality co-curricular programs, services, activities, and facilities.

Core Values
- Collaboration
- Commitment
- Diversity
- Integrity
- Excellence

CAS (Council for the Advancement of Standards in Higher Education): The Council for the Advancement of Standards in Higher Education (CAS) develops and disseminates standards that enhance the quality of a student’s total learning experience in higher education. CAS collectively develops, examines, and endorses standards and guidelines for program and service areas in higher education.

Comprehensive Program Review (CPR): A three-year review process that focuses on program quality and improvement (see Appendix F for CPR Calendar). The CPR process involves members of the Division of Student Affairs, campus faculty, staff, administrators, outside professional reviewers, and community representatives to ensure a holistic review. The overall process includes:

1. Self-Study Phase, a program review phase that involves members of the program under review;
2. **Site Review Phase**, a program review phase that includes faculty, staff and administrators; and

3. **Outside Professional Reviewer Phase**, a program review phase that involves an outside professional consultant who is an expert in the respective program area.

Please see Appendix A, Division of Student Affairs Terms and Concepts for additional definitions of assessment-related terms.
INTRODUCTION

Just 20 years ago, the terms “learning outcomes,” “assessment,” and “evaluation” were rarely used by faculty or members of Student Affairs. Since then, these terms have gone from relative obscurity to become the rallying cry for critics of higher education. Parents, employers, and politicians alike have been relentless in their demands that colleges and universities do more to prepare students for the “real world.” Institutions have responded by encouraging faculty and student service professionals to do a better job of defining their educational objectives and in demonstrating that students are learning what they are supposed to learn.

But how can colleges and universities assess that they are delivering on their promises? What evidence can we give that today’s students, for instance, are acquiring the kind of skills, knowledge, and experience that employers will be looking for four to five years down the road? If the student chooses to attend graduate school, what evidence can we point to that the student has the necessary skills to succeed? This guide introduces an assessment model that provides assurance that institutions of higher education deserve the public’s trust and can provide the concrete and measurable evidence that it demands.

This model takes a no-nonsense approach to program assessment and accountability and insists that program administrators:

1) Clearly identify the educational needs of their students;
2) Develop and implement effective strategies for learning and development; and
3) Accurately and objectively demonstrate that students are learning what they are expected to learn as a result of the work of Student Affairs.

Comprehensive Program Reviews (CPRs) in the Division of Student Affairs serve many purposes. The most important of these is program improvement and to identify opportunities for future development.

CPRs provide a systematic mechanism to monitor the status, effectiveness, efficiency, and progress of programs in the Division of Student Affairs. CPRs provide information that allows the Division and the University to strengthen and improve the quality of its programs and services to students and
recognize and respond to the strengths and weaknesses of the program while identifying important
directions in the profession. CPRs also assist the Division and University in identifying future
directions, needs, and priorities as well as assist in assessing a department’s relationships with and
contributors to other programs within the University.

The primary purpose of the Comprehensive Program Review is
Program Improvement as determined by:

- Quality of programs, services and activities
- Availability of educational and program resources
- Adequacy of administrative, professional and classified staffing patterns
  - Available facilities
  - Experts’ evaluation

CPRs assist in long-range planning and are valuable in setting priorities, future goals, and directions for
the department, Division and the University. CPRs assure that co-curricular and service decisions (as
well as budgets) are based on real and verifiable data and priorities. CPRs provide the impetus for
change as programs that are not evaluated tend to cling to the “status quo,” making change difficult. By
developing a plan for CPRs and evaluations, a strategy exists for improvement that is systematic,
thoughtful, long-range, and apolitical.

The Vice President for Student Affairs office and area heads coordinate CPRs.

The Seven (7) Characteristics of Comprehensive Program Reviews:

1. They will occur on a three-to-seven-year cycle (unless accreditation reviews influence the timeline).
2. They will be evaluative, not just descriptive.
   They are more than data collection and meeting minimum criteria; program reviews require professional judgments about
   the department, programs, services, staffing, resources, and future directions.
3. They will be forward-looking.
   While assessment of current status is important, improvements are of the greatest concern.
4. Departments will be evaluated on professional standards and criteria – strengths and
   weaknesses – rather than financial and political criteria.
5. They will result in a public, objective, and transparent process.
6. They will be independent of any other type of review.
   They may assist with accreditation and system-wide reporting needs.
7. They will result in action!
   They will be the basis for re-evaluating the strategic planning and budget processes in the Division of Student Affairs.
OVERVIEW OF THE CPR PROCESS

Delivering quality and cutting edge student programs and services at CI has been a part of the Division of Student Affairs’ DNA since the founding Vice President arrived in January 2002. It was not long after this that the Vice President coined the phrase “Assessment is not separate and apart from what we do; it is integral to all that we do.” This set the stage for the development of the Division’s Comprehensive Program Review (CPR) assessment process.

On the surface, the CPR is similar to most other assessment processes in that it follows a common set of steps:

- Establish Division goals/priorities;
- Translate these priorities into aims* and objectives;
- Design and conduct assessment;
- Evaluate assessment findings to document outcomes; and
- Use results for decision making.
But where this CPR differs from other plans is in its comprehensive nature, its high level of inclusivity, and its use of professional standards.

The CPR has proven to be a powerful and effective tool for assessing an organization’s programs. The strength of the model comes from the enormous amount of information generated through a comprehensive system of review phases. Under the CPR, a single program is repeatedly reviewed by separate independent review teams, and each team builds on the knowledge gained from the previous team.

**The Process Compared to a Pair of 3D Glasses**

**FIRST LAYER** - A set of data is gathered and arranged by a single layer to create the first image.

**SECOND LAYER** - This information is added to data collected by a second layer that produces a sharper two-dimensional image.

**THIRD LAYER** - The two-dimensional image is combined with data from a third layer to create a clear three-dimensional picture.

In the case of our multiple program review model, a body of program data is collected and examined by an independent review committee, which produces an image of the program that includes its strengths and weaknesses. Later, a second review committee is formed that reexamines the program and the image developed by the first committee, which is synthesized to produce a new and clearer program image. Finally, a third program review is done by a completely different reviewer. The reviewer reexamines the improved image from the second committee and arrives at a sharper, more accurate picture of the program. This new picture, which includes new information and recommendations on the program, is later shared with the first review committee. The review cycle is then repeated. To be sure, the work of the multiple review committees is far more complex than the three-dimensional lenses analogy, but the same principles apply.
COMPREHENSIVE PROGRAM REVIEW PHASES

The Three CPR Phases—A Comprehensive, Thorough, and Inclusive Model

There are countless assessment models available that perform multiple program reviews. But very few are as thorough and inclusive as the Division of Student Affairs’ Comprehensive Program Review Model. The CPR intentionally involves a wide-range of constituents in its review process, including members of the Division of Student Affairs, campus faculty, staff, administrators, outside professional reviewers, and community representatives. Most importantly, the model stresses student involvement and feedback throughout each phase of the review process.

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<thead>
<tr>
<th>The Division of Student Affairs Three-Phase Model</th>
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<tr>
<td>1) <strong>Self-Study Phase</strong>, a program review phase that involves members of the Division of Student Affairs;</td>
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<tr>
<td>2) <strong>Site Review Phase</strong>, a program review phase that includes faculty, staff and administrators; and</td>
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<tr>
<td>3) <strong>Outside Professional Reviewer Phase</strong>, a program review phase that draws on the expertise of an outside professional.</td>
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PREPARING FOR THE REVIEW PROCESS

There are five tasks that need to be completed in order to prepare for the Comprehensive Program Review (CPR). These tasks are listed below and described in more detail in the following section.

1. Identify CPR Process Facilitator
2. Complete the Planning and Information Sheet (Appendix G)
3. Gather assessment data
4. Align budgets and resources
5. Create an internal timeline

Identify CPR Process Facilitator

The first step is to identify an individual to coordinate the self-assessment process. This person is generally the program director or coordinator, assisted by several members of the program undergoing the review.
To prepare to begin the CPR process, every member of the review team should have a clear picture of his or her role and responsibilities and understand how this fits within the larger CPR process. Structurally, the Division of Student Affairs is headed by the Vice President and supported administratively by the Assistant/Associate Vice Presidents and Executive Directors. The responsibility for carrying out program assessment, however, is most often delegated to program coordinators or analysts. It is generally the CPR Process Facilitator who will work with the Director of Student Affairs Assessment, Research and Staff Development during the preliminary stage to discuss CPR planning logistics.

Preparation is an integral step in order to plan and map out the work to be done over a 36-month review cycle. Before a reviewer can actually begin the CPR process, appropriate plans and preparations must be developed to ensure the success of the review. This is done by addressing the “who,” “what,” “when,” and “how” of the CPR. For instance, who is responsible for carrying out the assessment during each review phase? What assessment activities should take place in each phase? When will each phase be completed? How should the various assessment activities be conducted? These and similar questions must be answered and, when answered fully and correctly, each review phase should transition into the next to create continuity across the process.

**Complete the Planning and Information Sheet**
During the preliminary stage, the CPR Process Facilitator responsible for initiating the review is asked to complete the CPR Planning and Information Sheet (Appendix G). The sheet is divided into three sections representing the Self-Study, Site Review, and Outside Professional Reviewer phases. Once this sheet is completed, it is signed by the Director of Student Affairs Assessment, Research and Staff Development before the program can begin the Self-Study Phase.

**Gather Assessment Data**
Each program in the Division of Student Affairs is expected to conduct five major types of assessment to inform practice, including demographic studies, needs assessments, customer/student satisfaction, external comparison (peer or benchmark), and outcomes assessment. Other assessments used by the area to improve programs and services can also provide the substance of the CPR. The CPR Process Facilitator should gather all existing assessment data to prepare for Phase I.
Align Budgets and Resources
For the fiscal year(s) in which the department conducts the CPR, the budget should reflect the
departmental cost. Also, resources (such as staff time) should be dedicated toward CPR efforts. The
information below can be referenced when integrating the costs and resources into budgets.

Estimated Costs

Vice President for Student Affairs’ Office
Honorarium & Travel for Consultant - Outside Professional Review
(Dependent on Location of Consultant) $2,000

Department
Food & Refreshments for Site Visit $1,000
Duplication & Binding of Self-Study Report $600
Housing for Consultant (Optional) $200
Miscellaneous (Recognitions, “Thank You” Cards, etc.) $200
Total $4,000

Create an Internal Timeline
In concert with the annual cycle of the department, the CPR Process Facilitator will prepare a timeline
for completion of the CPR process. This timeline provides a mutual understanding of deadlines related
to completion of the review and will be approved by the Vice President for Student Affairs (VPSA).
Additional timeline-related information is located on the CPR Planning and Information Sheet
(Appendix G).
THE THREE-PHASE PROCESS
PHASE 1:

CAS

SELF-STUDY

PHASE
Phase 1: CAS Self-Study Phase

Ready…Set…Go!

The Council for the Advancement of Standards in Higher Education (CAS) develops and disseminates standards that enhance the quality of a student’s total learning experience in higher education. CAS collectively develops, examines, and endorses standards and guidelines for program and service areas in higher education. CAS has developed a set of commonly recognized Student Affairs standards that allow us to compare and rate different programs and arrive at a standard set of performance scores. These standards respond to real-time student needs, the requirements of sound pedagogy, and the effective management of a wide range of related programs (functional area standards) consistent with institutional missions. Individuals and institutions from nearly 40 CAS member organizations comprise a professional constituency of over 100,000 professionals. It represents a significant majority of higher education practitioners in student programs and services throughout the country. It is for these reasons that the CAS Self-Study is used as the first review phase of the CPR. It serves as a kind of baseline for the remaining Site Review and Outside Professional Review Phases. What follows is a brief discussion of how the CAS Self-Study is carried out and how the remaining phases build on this self-assessment phase.

CAS uses a Self-Assessment Guide (SAG) to translate its program standards and guidelines into a format that is easily used to conduct self-assessment. It outlines the self-assessment process and describes how to put it into operation. Educators can use the SAG to gain informed perspectives on the strengths and deficiencies of their services and programs and to plan for improvements. The self-assessment procedure involves five steps which we will examine further. The five steps of the process are:

1. Establish the Self-Assessment Review Team
2. Understand the CAS Standards and Guidelines
3. Compile and Review Documentary Evidence
4. Judge Performance
5. Complete the CAS Assessment Process
Step 1: Establish the Self-Assessment Review Team

The Self-Assessment Review Team should be identified and invited to be included in the assessment process. Additional information for selecting the appropriate number and role of individuals on the team is located on the CPR Planning and Information Sheet (Appendix G).

Step 2: Understand the CAS Standards and Guidelines

The Review Team should hold a meeting to examine the standards carefully before initiating the study; please see Sample Preparatory Meeting Agenda (Appendix J), Sample Self Study Initial Team Meeting Agenda (Appendix K), and Recommended Steps for Self Study Process (Appendix I). It is recommended that the team discuss the meaning of each standard. Through this method, differing interpretations can be examined and agreement generally reached about how the standard will be interpreted. Deliberate discussions should occur about how to initiate the rating process and select the optimal rating strategy. It is important that the team achieve consensual resolution of such differences before proceeding. Additional information about CAS Standards is located in the Introduction to CAS Review Instructions (Appendix B).

Step 3: Compile and Review Documentary Evidence

Collecting and documenting evidence of program effectiveness is an important step in the assessment process. The CPR Process Facilitator should organize the data collected in the “Preparing for the Review Process” section to align with the CAS Self-Assessment Guide (SAG) to facilitate an informed review process for the committee. As noted in the “Preparing for the Self-Review Phase” section of this document, no self-assessment is complete without relevant data and related documentation being used. It is good practice for programs routinely to collect and file relevant data that can be used to document program effectiveness over time. Existing evidence will differ per program but might include data from needs assessments, student surveys, student focus groups, etc. Please see Sample Self Study Evidence Collection (Appendix L) and Assessment Planning Workshop (Appendix M).

Step 4: Judge Performance

Assessment criterion measures are used to judge how well areas under review meet CAS Standards. These criterion measures, provided in the Self-Assessment Guide, are designed to use a six-point rating scale. In addition to the numerical rating options, Not Rated (NR) and Not Done (ND) ratings
are provided. This rating scale is designed to broadly estimate the extent to which a given practice has been performed (see rating scale below).

**CAS CRITERION STATEMENTS RATING SCALE**

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<th>2</th>
<th>3</th>
<th>4</th>
<th>NR</th>
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<tr>
<td>ND</td>
<td>Not Done</td>
<td>Not Met</td>
<td>Minimally Met</td>
<td>Well Met</td>
<td>Fully Met</td>
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Under rare circumstances, it may be determined that a criterion statement used to judge the standard is not applicable for the particular program (e.g., a male- or female-only program or other unique conditions that cannot meet a criterion statement for some reason). In such instances, an ND rating can be used and the rationale for excluding the criterion statement presented in the self-study report. The NR response can be used when relevant data are unavailable to support a judgment. When either the ND or the NR ratings are used, an explanatory note is entered on the Self-Assessment Guide after the item. NR items should generate careful group consideration and follow-up actions, as appropriate.

**A Two-Tired Judgment Approach**

A two-tiered (individual and group) judgment approach for determining the extent to which the program meets the CAS standard is suggested.

**Individual Judgment**

First, the self-assessment team and functional area staff members individually should rate each criterion statement using individual copies of the CAS Self-Assessment Guide. This individualized rating procedure is then followed by a collective review and analysis of the individual ratings.

**Team Judgment**

When the individual ratings have been reviewed and translated into a collective rating, the team is ready to move to the interpretation phase of the self-assessment. Interpretation typically incorporates considerable discussion among team members to assure that all aspects of the program are given fair consideration prior to a final collective judgment. If persistent disagreements over performance ratings may call for additional data collection.
STEP 5: Formulate a Self-Assessment Report/Action Plan

The CAS Judgment Process will identify program strengths and gaps between the program’s performance and the standards. A Self-Assessment Report should be composed that will serve as an action plan; this will be the guiding document used in Phases 2 and 3.

Guidelines for Preparing a Self-Study Report

The self-study report should be an evaluative document incorporating the types of information previously described as well as other information that team members identify as important to the department and its programs. The self-study is a unique opportunity to inform the University of the department’s strengths, weaknesses, plans, and goals. While resource needs are an important element of the self-study, the self-study report is NOT a budget request. The report will have the most favorable impact when the department seizes the opportunity to think creatively about its future.

The self-study team should consider the following questions:

• Is the delivery of programs and services to students useful/effective?
• Is the department/area meeting its goals? Is it contributing to the institution’s goals?
• Is the department/area responding to the needs of the profession and advancing the state of the knowledge and practice within the profession?
• How is the program assessed by experts in the field?

The following guidelines should be adhered to in preparing a useful self-study report. Specific areas to be addressed in the report are described in the following section, “Outline of the Report.”

Evaluative: This should be an evaluative report. A report that only describes the program or services of the department is inadequate as a CPR Self Study.

Responsiveness: The report should adhere to the outline for the self-study and be thorough while succinct and readable. It should address issues of program quality and its products while ignoring extraneous issues or details.
**Documentation:** The report should be evidence-based. Any evidence presented should be interpreted and evaluated, NOT just inserted in the document. Valid internal and external comparisons are helpful. Simplistic, selective and out-of-context data summaries are not useful and may be counterproductive.

**Tone:** The report should be constructive. Rather than dwelling on problems, it should focus on challenges, aspirations and goals. Avoid defensive, accusatory or lecturing styles.

**Objectiveness:** The report should be appropriately candid, introspective and analytical. The department should present an honest review of its status and opportunities. The report must be credible to be useful.

**Perspective:** The report should be forward-looking, consistent with departmental, divisional and University strategic plans; it should not be an unconstrained “wish list” nor an exercise in self-congratulation. Address needs comparatively, with appropriate attention to priorities and sequencing.

**Accuracy:** Errors of fact should be avoided. The Self-Study Committee must work in concert with the Director of Student Affairs Assessment, Research and Staff Development and the Vice President for Student Affairs to ensure the accuracy of the information contained in the document.

**Utility:** Comprehensive Program Reviews are time-consuming; therefore, every effort should be made to ensure that the full benefit of the process will be derived. Avoid posturing or using the self-study to “leverage” the area/department; these strategies detract from and thereby diminish the value of the review. A thorough, accurate, and neutral self-study provides the best guarantee that the University will understand and appreciate the needs of the department/area.

**Outline of the Report**
A detailed outline of the Self-Study Report is provided in Appendix H and simplified for quick reference below.

1. **Introduction**
II. Description of the Division of Student Affairs Department/Area
   a. Brief History of the Department/Area
   b. Department Overview
   c. Statement of Purpose and Objectives
   d. Programs and Services
   e. Staff Development, Research and Creative Activity

III. Findings and Recommendations Made During Previous Reviews (if applicable)

IV. Findings and Recommendations Work Forms A, B and C (Appendices B, C and D) can assist with developing this section but are not required.
   a. Answer Overview Questions (from the CAS Self-Assessment Guide)
   b. Identify Areas of Program Strength
   c. Identify Areas of Program Weakness
   d. Describe Practices Requiring Follow-up
   e. Summarize Actions Required for the Program to Meet Standards
   f. Summarize Program Enhancement Actions
   g. Write Program Action Plan

V. Appendices and Other References
PHASE 2:

THE SITE REVIEW PHASE
Phase 2: The Site Review Phase

Unlike the Self-Study Phase, the Site Review Team (SRT) is comprised exclusively of individuals outside of Student Affairs. Its members are from a broad range of campus constituent groups and perspectives, including representation from the local community. The Vice President for Student Affairs (VPSA) or a member of the VP’s staff is assigned to the Site Review Team to serve as liaison and assist with any information or documents helpful to the Team. The SRT will evaluate the work done in the preceding review phase and assess progress made towards completing any proposed recommendations and action plans.

The basic charge to the SRT is to address the following:

1. Who are the department/area’s current constituents, and are there potential audiences in the community who may be appropriate targets for future services and programs?
2. Based on your knowledge of the profession and/or the University environment, is the department’s programming current and does it provide adequate development and learning opportunities for students?
3. Are the programs, services or activities within the department appropriate, given the human and physical resources, and do these activities address student, institutional, community, and state/regional/national needs?
4. Does the department have adequate processes in place to evaluate the effectiveness of its programs (i.e., assessments)?
5. What are the major limiting factors in the quality and future growth and development of the department?
6. If the department has an accredited program, does the program meet accreditation standards at the present time? If not, what is needed to bring the program into conformity with accreditation standards? Does the documentation clearly address accreditation standards?
7. Is the program able to establish a clear purpose and objectives?
8. Is the program able to identify evidence that help the program/area determine the degree to which objectives were achieved?
9. Are actions being taken on the basis of improving program performance?
The Site Review Process

The Site Review Process will follow similar steps taken in the Self-Study:

1. Establish and prepare the Site Review Team
2. Compile and review documentary evidence
3. Conduct the review and judge performance

Step 1: Establish and Prepare the Site Review Team

The task of selecting the members of the Site Review Team is a joint effort between the CAS Process Facilitator under review (or designee), the Director of Student Affairs Assessment, Research and Staff Development and the Vice President for Student Affairs. The Vice President’s Assessment Council is a support team available to assist with the Site Review process. Prior to beginning Phase 1, the program administrator recommends a list of individuals on campus and in the local community to the VP’s Assessment Council for discussion and final approval. The program administrator then begins the process of contacting prospective committee members to get their initial commitment. Any member (with the exception of a student) of the Site Review Committee is eligible to serve as chair of the committee. This responsibility traditionally has been performed by a faculty member. The Vice President’s office sends a formal letter of invitation to each member of the committee, thanking them for agreeing to serve, along with a copy of the Committee Terms of Reference that outlines the charge, scope, time frame, and responsibilities of committee members.

Overview: The Committee begins its work with an initial team meeting that includes the appointed chair, selected committee members, and a representative from the Division of Student Affairs. This meeting is followed by a series of assessment activities that include reviewing evidence, interviews, and visits with people, committees or other groups on campus. Multiple meetings help validate team members’ reflections, triangulate findings, and identify useful lines of inquiry. The role of the Committee is to use the program’s own evidence and exhibits to determine that they accurately and fairly describe the program and that the program is making necessary and timely progress towards meeting its educational objectives. In the last stage of the review process, the team discusses its findings and recommendations and prepares its final report for the VPSA (see Appendix N).
Scheduling Initial and Subsequent Meetings: The schedule for the site review is drafted by the CPR Process Facilitator in collaboration with the Director of Student Affairs Assessment, Research and Staff Development and chair of the Site Review Team (SRT). During the SRT phase, members will participate actively in each of the following sessions:

1. Initial meeting that includes the VPSA, CPR Process Facilitator, the Division of Student Affairs representative who participated in the Self-Study, the Director of Student Affairs Assessment, Research and Staff Development and the chair of the SRT. The VPSA will discuss how the department fits organizationally into the Division and the University and the expectations of the Site Review Team;

2. Planning session for the SRT to identify interview questions, formulate a plan for conducting the interviews, and strategies for processing the information obtained during the Site Review;

3. Visit with the director (or designee) for an orientation of the department and any general introductory questions that the team has about the self-study;

4. Tour of the facility and any special facilities relevant to the department;

5. Individual interviews with each major administrative person within the department to discuss the findings of the self-study and questions identified by the SRT; the team should be allowed to meet without the director in attendance in order to encourage open dialogue;

6. Group interviews with professional staff, classified staff, and student employees of the department;

7. Group interviews with student users, academic representatives, and major users or departments; the schedule of these meetings should be provided to the representatives of these areas as soon as the SRT reaches agreement on who they would like to interview in order to minimize scheduling conflicts;

8. SRT meeting set up to process, identify, and discuss major findings and individual assignments and strategies for finalizing the SRT written report; and

9. Exit interview with the chair of the SRT, the VPSA, the Director of Student Affairs Assessment, Research and Staff Development, and the CPR Process Facilitator.
**Initial Meeting:** An initial meeting is scheduled by the VPSA office to:

1. Personally welcome and thank the committee for agreeing to participate
2. Introduce committee members
3. Announce the chair
4. Orient committee members to the CPR
5. Answer any questions that committee members might have about the CPR process
6. Review the SRT charge (before turning the meeting over to the chair, to discuss subsequent meetings)

**Step 2: Compile and Review Documentary Evidence**

As discussed earlier, collecting and documenting evidence of program effectiveness is an important step in the assessment process. No self-assessment is complete without relevant data and related documentation being used. It is good practice for programs to routinely collect and file relevant data that can be used to document program effectiveness over time. It is the responsibility of the CPR Process Facilitator to provide any additional (beyond what was compiled in Phase 1) evidence required by the Site Review Team.

Documentary evidence often used to support evaluative judgments in the Site Review Phase includes:

- All documents and reports that discuss the program’s performance over the past 36 months, including recommendations and action steps for improvement;
- The Self-Study Team, a good source of data that is available to the Site Review Team and can provide additional information when needed;
- Data obtained through review team special request. This might include data collected from targeted focus groups, interviews or from discussions with the Self-Study Team.

**Step 3: Conduct the Review and Judge Performance**

**Exit Interview:** It is critical for the SRT to have some quality time to process and summarize the findings of the review and establish a strategy to finalize the written report. The SRT will be expected to provide an overview of their findings and recommendations during the Exit Interview.
Site Review Team Report: Within three weeks after completing the site review, the SRT chair will provide a draft report to the program/area head and Director of Student Affairs Assessment, Research and Staff Development, who may seek assistance from the Assessment Council on the report. All editorial comments will be returned using track changes to the chair of the SRT. The chair will incorporate any corrections and provide the final SRT report to SRT members and the Director of Student Affairs Assessment, Research and Staff Development. While there are no format requirements for the Site Review Team report, the report should address the questions listed below. Alternatively, the SRT may utilize the template provided in Appendix N.

1. Who are the department’s current consumers and are there potential audiences in the community who may be appropriate targets for future services and programs?
2. Based on your knowledge of the profession and/or the University environment, is the department’s programming current and does it provide adequate development and learning opportunities for students?
3. Are the programs, services or activities within the department appropriate, given the human and physical resources, and do these activities address institutional, community, and state/regional/national needs?
4. Does the department have adequate processes in place to evaluate the effectiveness of its programs (i.e., assessments)?
5. What are the major limiting factors in the quality and future growth and development of the department?
6. If the department has an accredited program, does the program meet accreditation standards at the present time? If not, what is needed to bring the program into conformity with accreditation standards? Does the documentation clearly address accreditation standards?
7. Has the program established a clear propose and objectives?
8. Has the program identified evidence that help the program/area determine the degree to which objectives were achieved?
9. Are actions being taken on the basis of improving program performance?

The SRT is encouraged to comment on any aspect of the department that is important to program quality improvement. Comments from the SRT on how effectively the program is being administered and impressions of the morale and commitment of the staff are welcomed. However, references to
specific individuals or groups viewed as “troublesome” should NOT be included in the report. If the latter type of information is believed to be critical to the evaluation, this should be communicated via a confidential letter to the VPSA.
PHASE 3:

OUTSIDE PROFESSIONAL REVIEW PHASE
Phase 3: Outside Professional Review Phase

An Outside Professional Reviewer (OPR) brings another set of lenses to the review process. In addition to having a breadth and depth of knowledge and expertise in the program under review, the OPR also brings a level of objectivity and credibility to the process. The importance of maintaining the integrity of the review process can never be overstated. In spite of our best intentions, most professional staff will acknowledge it is impossible to fully disengage from our own program enough to be completely objective. We often experience this same problem when proofreading our own work. Regardless of how skillful we are at proofreading, we still have a tendency to see what we want to see. The OPR, on the other hand, has no personal investment/loyalty to any particular outcome or allegiance to the institution. This professional is hired to conduct as thorough and as accurate an evaluation as possible, report results, and make recommendations for improvements.

The CPR Process Facilitator will recommend the names of three recognized experts on the department/program under review. The individuals should have:

1. First-hand experience in programs similar to the one under review;
2. Recognized expertise in program planning, implementation, and assessment; and
3. The ability to effectively communicate assessment findings and recommendations in oral and written form to individuals and groups.

The VPSA should be provided with a description of each person’s current professional role, resume (if available), institutional affiliation, and explanation for the recommendation.

Appointment of Outside Professional Reviewer: At least six months before the site visit, the Outside Professional Reviewer should be appointed by the VPSA in consultation with the CPR Process Facilitator and VP’s Assessment Council. The CPR Process Facilitator should confirm interview dates of various faculty, students, committees, and administrators as deemed relevant by the OPR. In addition, the CPR Process Facilitator will work directly with the Outside Professional Reviewer to negotiate the dates of the OPR visit and develop a letter of appointment for the OPR to be signed by the VPSA, and draft a schedule of meetings for the visit.
Prior to visiting the campus, the OPR should be sent a packet of information on the program that includes:

a. Copies of executive summary reports completed by the Self-Study and Site-Review teams
b. A copy of the appointment letter
c. A draft copy of scheduled meetings
d. A copy of the CPR Manual

Full and complete copies of all program information and assessment data and reports will also be available for the OPR’s review upon arrival at the campus. The CPR Process Facilitator works closely with the OPR throughout the review process to provide requested information and to arrange meetings and other activities deemed helpful to the review process.

The Work of the Outside Professional Reviewer

The Outside Professional Reviewer is given considerable latitude over the method and approach used to conduct the review. The Division does, however, outline several questions that it asks the OPR to address over the course of the evaluation that should also be included in the final report. These questions were also posed and addressed by the Self-Study and Site Review teams. They seek to:

1. Evaluate how well the first two phases of the CPR met their intended purposes and assess the degree to which the program fulfilled the recommended improvements made by the Self-Study and Site Review teams;
2. Address and/or consider the following:
   a. Who are the department’s current consumers, and are there potential audiences in the community who may be appropriate targets for future services and programs?
   b. Based on your knowledge of the profession and/or the University environment, is the department’s programming current and does it provide adequate development and learning opportunities for students?
   c. Are the programs, services or activities within the department appropriate, given the human and physical resources, and do these activities address institutional, community, and state/regional/national needs?
   d. Does the department have adequate processes in place to evaluate the effectiveness of its programs (i.e., assessments)?
e. How does the level of professional development, research, scholarly and creative activity, and funding for such activities compare with those at peer institutions? What changes are needed to elevate the program to the next higher level?

f. What are the major limiting factors in the quality and future growth and development of the department?

g. If the department has an accredited program, does the program meet accreditation standards at the present time? If not, what is needed to bring the program into conformity with accreditation standards? Does the documentation clearly address accreditation standards?

Comments from the OPR on how effectively the program is being administered and impressions of the morale and commitment of the staff are welcomed. However, references to specific individuals or groups viewed as “troublesome” should NOT be included in the report. If the latter type of information is believed to be critical to the evaluation, this should be communicated via a confidential letter to the VPSA.

**OPR Review Schedule:** The schedule for the OPR is drafted in coordination with the CPR Process Facilitator and the Director of Student Affairs Assessment, Research and Staff Development. The schedule should include but not be limited to the following:

1. Welcome and orientation with the VPSA, the VP’s Assessment Council, and the Self-Study and Site Review teams, respectively. The VPSA will discuss how the department fits organizationally into the Division and the University and the expectations of the Self-Study and Site Review teams. The following is a possible meeting format;
   a. Welcome and introduction to CI;
   b. Review and discussion of the role and function of the VP’s Assessment Council;
   c. Review and discussion of the OPR’s preliminary assessment plans and strategies for completing the review;
   d. Discussion of:
      i. Evidence room and interviewing needs
      ii. Open forum
      iii. Exit interview
iv. Final report

2. Visit with the Self-Study and Site Review teams for an orientation to the department and to answer any general questions the OPR has about the Self-Study and Site Review;

3. Tour of the facility and any special facilities relevant to the department;

4. Individual interviews with key members of the program and department to discuss the findings of the Self-Study and Site Review; the OPR should be allowed to meet without the director in attendance in order to encourage open dialogue;

5. Group interviews with professional staff, classified staff, and student employees of the department;

6. Group interviews with student users, academic representatives, and major users or departments; the schedule of these meetings should be provided to the representatives of these areas as soon as the OPR determines who they would like to interview in order to minimize scheduling conflicts;

7. Open meetings for faculty, students and staff: Open-forum meetings should be scheduled for students, staff, faculty, and others.

8. Exit interview with the VP’s Assessment Council and any supervisor, dean or directors.

**Review Documentary Evidence**

As discussed earlier, collecting and documenting evidence of program effectiveness is an important step in the assessment process. No self-assessment is complete without relevant data and related documentation being used. It is good practice for programs to routinely collect and file relevant data that can be used to document program effectiveness over time. It is the responsibility of the CPR Process Facilitator to provide additional (beyond what was compiled in Phases 1 and 2) evidence requested by the OPR *(where available)*.

Documentary evidence often used to support evaluative judgments in the OPR Phase includes:

- All documents and reports that discuss the program’s performance over the past 36 months, including recommendations and action steps for improvement;
- The members of the Self-Study and Site Review teams are a good source of evidence that is available to the OPR;
• Data obtained through special request. This might include data collected from targeted focus groups, interviews or from discussions with the Self-Study Team.

**OPR Final Report**

Within three weeks after completing the site review, the OPR will provide a draft report to the program/area head and Director of Student Affairs Assessment, Research and Staff Development. The Director of Student Affairs Assessment, Research and Staff Development may seek assistance from the VP’s Assessment Council on the report. All editorial comments will be returned using track changes to the OPR. The OPR will incorporate any corrections and provide the final report to the Director of Student Affairs Assessment, Research and Staff Development.

While there are no format requirements for the OPR final report, the report should address the following questions:

1. Who are the department’s current consumers, and are there potential audiences in the community who may be appropriate targets for future services and programs?
2. Based on your knowledge of the profession and/or the University environment, is the department’s programming current and does it provide adequate development and learning opportunities for students?
3. Are the programs, services or activities within the department appropriate, given the human and physical resources, and do these activities address institutional, community, and state/regional/national needs?
4. Does the department have adequate processes in place to evaluate the effectiveness of its programs (i.e., assessments)?
5. What are the major limiting factors in the quality and future growth and development of the department?
6. If the department has an accredited program, does the program meet accreditation standards at the present time? If not, what is needed to bring the program into conformity with accreditation standards? Does the documentation clearly address accreditation standards?
7. Is the program able to establish a clear purpose and objectives?
8. Is the program able to identify evidence that help the program/area determine the degree to which objectives were achieved?

9. Are actions being taken on the basis of improving program performance?

Open Email Account for Further Comments
As a supplement to the open forum, the Division will arrange with IT to set up an email account, which the campus community may use to contact the OPR confidentially. The Division will notify the campus community of the website in its initial campus-wide announcement concerning the review and review schedule. The OPR will periodically monitor this account and share emails of any consequence with the CPR Process Facilitator and Director of Student Affairs Assessment, Research and Staff Development for possible consideration.

Final Report to the Campus Community
After the OPR has submitted his/her final report, the CPR Process Facilitator, area head and Director of Student Affairs Assessment, Research and Staff Development will discuss strategies for reporting key findings from the CPR process to the campus community.
APPENDICES

A. Division of Student Affairs Terms and Concepts
B. CAS Self-Assessment Guide Introduction and Instructions
C. CAS Work Form A: Assessment, Ratings, and Significant Items
D. CAS Work Form B: Follow-Up Actions
E. CAS Work Form C: Summary Action Plan
F. CPR Calendar
G. CPR Planning and Information Sheet
H. Detailed Outline for Self-Study Report
I. Recommended Steps for Self-Study Team and Writing Self-Study Report
J. Sample Preparatory Process Meeting Agenda (optional meeting facilitated by the Director of Student Affairs Assessment, Research and Staff Development)
K. Sample Self Study Initial Team Meeting Agenda (from Housing and Residential Education)
L. Sample Self-Study Evidence Collection List (from Housing and Residential Education)
M. Assessment Planning Worksheet
N. Template for Site-Review Team Report