



Comprehensive Program Review Guidelines 2016

Office of the Vice President for Student Affairs
Texas A&M University

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INTRODUCTION

History of Comprehensive Program Review in the Division of Student Affairs

The purpose of this manual is to provide a framework for departments who are continuing their journey of continuous improvement through self-assessment. The journey began in the Division of Student Affairs (DSA) in the fall of 1997 when Comprehensive Program Review (CPR) was introduced into the Division and piloted by the Department of Student Life. This stage of CPR was completed in the DSA when Student Life Studies completed their CPR process in the spring of 2004. (See Appendix C for the department timelines.)

Every department in the Division of Student Affairs at Texas A&M University wants to satisfy its students and stakeholders, and every department wants to achieve state-of-the-art results. Achieving both requires an organization that can perform consistently, is aligned throughout the organization, can be innovative, and can react quickly to a changing environment. It also requires a motivated, well trained, committed, and passionate staff. Continuous improvement becomes a way of life.

CPR was the first step for the Division of Student Affairs and its departments in becoming a continuously improving future focused organization. Understanding what our departments do was the first step in improving what we do. CPR is built on self-assessment as a team-based tool, not a top-down evaluation. Top-level commitment from departmental leadership and Divisional leadership is imperative to follow through with the actions that come out of self-assessment.

The second iteration of CPR is based on professional standards from the Malcolm Baldrige National Quality Award (MBNQA) Education Criteria for Performance Excellence and the Council for the Advancement of Standards (CAS) in Higher Education. The process in part also is modeled on The Ohio State University's Program Review. In addition, this second iteration of CPR builds on the outcomes of a department's first CPR and moves from description extensive to evaluation extensive processes and outcomes. This CPR leads to planning and implementing incremental actions and cycles of improvements that contribute to the Division's vision of being preeminent, student centered division.

Beginning in 2014, departments who have been through the second iteration of CPR are allowed to use the Council for the Advancement of Standards in Higher Education guidelines. The process still includes a self-study, external review, and strategic response.

Purpose, Goals and Principles

Purpose

Comprehensive Program Review (CPR) in the Division of Student Affairs at Texas A&M University is a formal and meaningful assessment of how well a department achieves its stated mission, goals and outcomes and the identification of ways to sustain and create program excellence. It is a process of purposeful, reflective self-study, external review, and action planning. It should help departments identify how they can be a preeminent department among their peers.

Goals

- Provide evidence of quality by confirming the effectiveness of a department's programs, activities, services, and operations
- Identify strengths, opportunities, aspirations, and results (SOAR) as part of the planning process
- Encourage strategic thinking about a department's plans for the future
- Shape short and long term planning efforts that coordinate with the department's own operational and strategic planning processes
- Provide evidence to assist with a department's resource allocation decisions by providing evidence of need and effectiveness
- Provide understanding of the department's overall contribution to the mission and goals of the Division of Student Affairs and Texas A&M University
- Support the expectations of SACSCOC (Southern Association of Colleges and Schools Commission on Colleges) standards for institutional effectiveness
- Evaluate the extent to which a unit has successfully established student learning and program outcomes and provided evidence of attainment
- Utilize the University's Assessment Plan process for outcomes assessment
- Be consistent with Texas A&M University's academic program review process

Principles

All Student Affairs units contribute to the work of the division and therefore will be a part of the program review process. The Vice President of Student Affairs exempted Student Health Services, Student Counseling Service, University Art, and the Becky Gates Children's Center from CPR because of their discipline specific accreditation processes.

What is gained from the process of program review is as important for attaining program quality and effectiveness as is the self-study report or conclusions derived from the external review process. Broad faculty, staff, and student participation in the reviews is essential in order to gain important insights and ideas for improvement as well as a broad recognition and understanding of the department under review.

See Appendix D for a glossary of terms used in this manual.

LOGISTICS Responsibilities

Comprehensive program reviews are most successful when all participants in the process understand and carry out their respective responsibilities completely and in a timely manner. This section outlines the specific duties of the Office of the Vice President for Student Affairs, the Department of Student Life Studies, the Department under review, and the individual reviewers.

Responsibilities and Timeline

		Student Life Studies	Department CPR Coordinator	Department Director	Reporting AVP	External Review Team Leader
Time Before External Review Team Visit						
11 months	Initiate meeting with SLS Director, department director, and AVP to review process and expectations	x				
10 months	Identify the departmental CPR Coordinator and self-study team			x	with	
10 months	Identify the non-departmental representative on the self-study team (usually from next department going through)	x	with			
10 months	Schedule department workshops	x	x			
9 months	Train self-study team	x				
9 months	Self-study team begins regular meetings and works on department profile		x			
9 months	Send departmental profile to SLS for feedback (must be done at least 2 weeks before department workshop)		x			
9 months	SLS provides feedback on departmental profile	x				
9 months	Make the department profile available to all department staff		x			

		Student Life Studies	Department CPR Coordinator	Department Director	Reporting AVP	External Review Team Leader
8 months	Provide departmental staff the self-study questions one week before the department workshop	x				
8 months	Hold department workshop	x	x			
8 months	Identify focus areas for external review. Brainstorm external review team leader (AVP will make final selection)			x	x	
8 months	Select dates for the external review team visit	with	x	x		
7 months	Begin writing self-study report		x			
7 months	Decide how the director staff/senior leadership will edit self-study category reports		with	x		
7 months	Decide how all staff will be able to see draft self-study report		x			
7 months	Decide on template for external review team report	with		x	x	
6 months	Send draft self-study category reports to SLS for feedback as they are done		x			
6 months	Provide feedback on draft self-study category reports	x				
6 months	Invite external review team leader (Invitation from AVP and SLS Director)	with			x	
5 months	Initiate contract process for the external review team leader	with	x			
5 months	Decide on payment process for all expenses	x	x			
4 months	Contact Student Government Association and Graduate Student Council for student members of the external review team (if applicable)	x				
4 months	Invite external review team members (DSA Director, faculty, undergraduate, and graduate student)				x	

		Student Life Studies	Department CPR Coordinator	Department Director	Reporting AVP	External Review Team Leader
4 months	Send welcome letter from AVP and SLS Director with manual, expectations, and report template	x			x	
3 months	Brainstorm stakeholder groups that external review team should meet with		x	x	x	
3 months	Draft external review team schedule (AVP review)		x	x	x	
3 months	Working with the administrative staff in the Vice President's Office, schedule VPSA meetings (Reporting AVP for the first/overview session, VP/AVPs/DoS interview as a group, VPSA/AVPs in the exit interview)		x			
3 months	Schedule meeting with Division directors (if schedule permits, it could be a VPM meeting time (2 nd and 4 th Wednesdays, 8:30-10 a.m.)		x			
3 months	Invite stakeholders to appropriate interviews		x			
3 months	External review team leader contacts external review team for (electronic) introductions and expectations					x
3 months	Send external review team the schedule of the visit		x			
3 months	Schedule travel and lodging for external review team leader		x			
3 months	Finalize self-study report through department director and senior leadership team		x			
3 months	If using an editor, complete report goes to editor		x			
2 months	Send self-study report to external review team		x			
2 months	Brief staff on progress of self-study report, external review team selection, and timeline			x		

		Student Life Studies	Department CPR Coordinator	Department Director	Reporting AVP	External Review Team Leader
2 months	Create Dropbox, Basecamp and/or website with ERT schedule, self-study report, supporting documents, etc. and share access with ERT		x			
1 month	Order food for external review team visit (check on dietary restrictions)		x			
1 month	Make self-study report available to entire department		x			
1 month	Request guest user account for internet access, if needed		x			
1 month	Create a plan to disseminate themes from the external review team with the department and develop an action plan from the final external review team report		x	x		
1 month	Confirm ERT interview in place of VPM meeting (if on 2 nd or 4 th Wednesday)			x	x	
1 month	External review team leader contacts team to get initial thoughts and brainstorm questions for each interview					x
2 weeks	Prepare department staff on external review team visit (purpose, types of questions, outcome, etc.)		x	x		
1 week	Send reminders to stakeholders about meeting times		x			
1 week	Print nametags/nameplates for all meeting attendees including external review team		x			
1 week	Prepare thank you notes and gifts (if applicable) for external review team		x		x	
1 week	Purchase (healthy) snacks and beverages for ERT		x			
	EXTERNAL REVIEW TEAM VISIT					

		Student Life Studies	Department CPR Coordinator	Department Director	Reporting AVP	External Review Team Leader
Time After External Review Team Visit						
1 week	Send thank you notes to self-study team			x		
1 month	Sends draft report to SLS director					x
1 month	Reviews draft report for completeness	x				
1 month	Sends draft report to AVP	x				
1 month	Sends draft report to external review team leader with corrections or questions using track changes	x				
1 month	Sends final report to AVP and SLS director					x
1 month	Meet to review/share report			x	x	
1 month	Process payment for external review team leader	x				
2 months	Director submits action planning report to AVP, could include strategic plan with timelines and responsible parties			x		
2 months	Assess the CPR Process	x				
1 year	Director meets with AVP to review progress			x	x	
2 years	Director meets with AVP to review progress			x	x	

Budget

Each Department has been allotted a maximum amount \$12,000 for the entire CPR process. AVPs and Department Directors have some flexibility on how to budget for this process. Prior approval must be granted by the reporting AVP if departments want to exceed the \$3,000 Team Leader stipend.

Sample Expenses:

External Team Leader(s) Stipend	\$3000
External Team Leader(s) Travel/Lodging/Parking	\$1000
Meeting Room Rental	\$600
Food during Self-Study Workshops	\$1500
Food during External Review Visit	\$1000
Editor/Designer (not typical)	\$2400
Scribe (not typical)	\$500

- The Office of the Vice President provides financial support for the external review process and has delegated this responsibility to Student Life Studies. Any questions about the accounting process may be referred to the Senior Office Associate in Student Life Studies, 862-5624 or the Office of the Vice President for Student Affairs Business Coordinator, 862-6802.
- The stipend will be supported by a Texas A&M Consulting Services Agreement (see Appendix B). The stipend will be paid upon receipt of the final written external review team report.
- Expenses incurred as the department plans and pays for the external review team leader expenses and the food expenses of the external review team can be charged directly to Student Life Studies account 218180. Documentation and originals of all receipts must be forwarded to Student Life Studies. The department may keep copies if they wish. Charges made on the department's purchasing card may be reallocated to Student Life Studies account 218180 with original supporting documentation forwarded to Student Life Studies.

THE SELF-STUDY

Goals of the Self-Study

The department's self-study process and report provide the basis for the entire review process. The department makes a candid assessment of its strengths, opportunities for improvement and future directions toward the next level of excellence. The categories are intended to provide a structure for the review and should be augmented by results as the department deems necessary to create an effective self-assessment. For departments following the *CAS Standards*, the self-study will follow the Self-Assessment Guide.

In general, the purpose of the self-study process and report should be to address how well the department performs in relation to its mission, outcomes, and institutional and Divisional goals and strategic initiatives. It provides evidence of the excellence and effectiveness of the department's programs, activities, services and operations, primarily within existing resources.

Components of the Self-Study

The self-study process is comprised of the following:

- Orientation for self-study team—Student Life Studies will review the purpose, goals and processes for the CPR process and the specific components of the self-study process.
- Departmental Profile—The self-study team will write the brief department profile (see below) and share with the department before the staff workshop.
- Workshops for Department staff—In the Texas A&M model, the (all day) workshop will consist of brainstorming the responses to most of the self-study report questions (not the last overall question or the 3-4 strengths, opportunities, and action plans). In the CAS model, the (half day) workshop will consist of an overview of the CAS criterion measures, practice responding to questions to develop consistency, and brainstorming available evidence.
- Self-Study Report—In the Texas A&M model, the report will be answers to all of the questions, summaries for each category (strengths, opportunities, actions), major findings and recommendations, and supporting material. In the CAS model, the report will consist of the summary responses to the qualitative and quantitative questions, any areas of unresolved discrepancy, and evidence and documentation.

Selecting the Self-Study Team

The department director should select a self-study team to represent all units and levels of the organization. The team should be a manageable size (usually four to six people depending on department size and scope) and have time to devote to the process, including attending meetings and contributing to the writing.

A department under review has the option to accept a non-departmental Student Affairs staff member on their self-study team. Generally, the person will be from a department going through their CPR within the next year. That person does not contribute to the writing but provides an external perspective.

Responsibilities of the non-departmental staff member to the self-study team:

- Participate in the department's all staff orientation workshop
- Participate in self-study team meetings
- Be an observer/participant of the self-study process
- Learn about the CPR process to implement the process in his/her own department
- Give feedback as requested as an impartial observer to the self-study team
- Be willing to read the self-study report as it is being developed and provide feedback as requested

SELF-STUDY REPORT FRAMEWORK

Regardless of the model used, the self-study report should contain the following sections: Department Profile, Department Performance Evaluation, Major Findings and Recommendations, and Appendices. The report should be concise, but thorough in the analysis. The appendices can provide supporting material and context to keep the actual report manageable.

Section 1. Departmental Profile (10 pages or less)

The Departmental Profile sets the context for the way the department operates. The environment, key working relationships, strategic challenges and previous recommendations and follow through from the last Comprehensive Program Review serve as an overarching guide for the departmental performance management system.

The Departmental Profile is critically important because:

- It helps everyone understand what is most relevant and important to the department and its performance both now and since the last Comprehensive Program Review;
- It helps identify potential gaps in key information, key outcomes and results; and
- It also may be used by itself for an initial self-assessment prior to initiating a full comprehensive program review. Topics for which conflicting, little, or no information is available, can be used for action planning.

The Departmental Profile should be completed by the self-study team and reviewed by Student Life Studies before the departmental workshops that begin the self-study process. All departmental staff should have the opportunity to read the profile before the departmental workshops occur (usually by posting it in a shared drive). Because the self-study will be read by people without previous knowledge of the department or functional area, it is helpful to avoid jargon/acronyms or at least include a glossary of terms.

Section 2. Departmental Performance Evaluation (40 pages or less)

For departments using the traditional Division of Student Affairs model, the categories will be:

- Category 1. Functions and Services for Students and Other Stakeholders
- Category 2. Human Resources/Staff
- Category 3. Financial Resources
- Category 4. Facilities, Equipment, and Technology
- Category 5. Legal, Ethical, and Risk Responsibility
- Category 6. Assessment and Evaluation
- Category 7. Planning
- Category 8. Leadership
- Category 9. Outreach and Engagement
- Category 10. Process Management (optional)

The report will provide answers to the questions and then articulate 3-4 strengths, opportunities for improvement, and actions for improvement. Each category should be sent to Student Life Studies for review as it is completed.

As much as possible, each category should be self-contained. When responses in one category can mutually reinforce those in another, it is appropriate to refer to other responses rather than repeat the information.

Make the best use of pages by using tables, graphs, flowcharts, and bullets to present information concisely while still maintaining reader friendliness. All graphs, tables and charts should be labeled for easy interpretation.

For departments using the CAS model, the categories will be:

- Part 1: Mission
- Part 2: Program
- Part 3: Organization and Leadership
- Part 4: Human Resources
- Part 5: Ethics
- Part 6: Law, Policy, and Governance
- Part 7: Diversity, Equity, and Access
- Part 8: Internal and External Relations
- Part 9: Financial Resources
- Part 10: Technology
- Part 11: Facilities and Equipment
- Part 12: Assessment

For each area, each staff member will respond individually to rating scale and open-ended questions (usually through a web-based survey; consult Student Life Studies for assistance), including the rationale and evidence for the rating. The self-study team will then review the findings, resolve the rating discrepancies, and identify strengths, areas for improvement, and action plans.

Section 3. Major Findings and Recommendations (4 pages or less)

Discuss major findings and recommendations, describe what has been learned through the process, and identify overarching themes and preliminary suggestions for action plans. This may be a good place to summarize your Strengths, Opportunities, Aspirations, and Results (SOAR) after completing the self-study process. This section should be sent to Student Life Studies for review before the final document is submitted.

Section 4. Appendices

- A. Organizational Charts (University, Division, and Department)
- B. Staff Profile (See Appendix A)
- C. Other Pertinent Information (Division strategic plan, Department assessment plan, Department strategic plan, Department business continuity plan, University Diversity Plan, etc.)

The self-study report should be shared with all staff in the department and should represent consensus, or it should state the nature of differences in viewpoints before it is submitted as a final report.

The final report should be sent electronically to Student Life Studies and the department's supervisor in the Office of the Vice President for review for completeness before it is sent to the external review team.

Departmental Profile

1. Explain your department's strategic plan: mission, vision, core values, key goals, objectives, and key functions as appropriate.
 - 1.1. Identify the key student learning and program outcomes around which all other self-study categories will work to achieve.
 - 1.2. Describe your department's Strengths, Opportunities, Aspirations, and Results (SOAR).
2. Identify the primary and secondary student users, student groups or other stakeholders that your department serves and attracts.
3. Highlight your department's core functions, services and activities and the methods/strategies used to deliver them to students and stakeholders.
4. Explain your department's organizational structure. (Use of an organizational chart is appropriate here, which may be the first appendix in the final self-study report.) Identify your department's senior leadership team and why they are identified as the senior leadership team.
5. Describe your department's staff demographics and contributions using the forms provided in Appendix A of this document. The Staff Profile Form is consistent with SACSCOC reaffirmation and only includes professional staff. The other forms can include graduate and associate staff.
 - 5.1. Describe any significant staffing changes over the past five years and any future anticipated changes.
6. Provide a financial overview of your department. (Include an overview table of revenue and expenditures.) Include a pie chart that illustrates the sources of funding (University Advancement Fee, E&G, rental, endowments, etc.) and a second pie chart that illustrates expenditures (salaries, technology, equipment, travel, etc.)
 - 6.1. Describe resource changes over the past five years and future anticipated changes.
7. Describe the major facilities, equipment, and technologies that support your department's operations.
8. Describe the key collaborative relationships (with and beyond Student Affairs) that your department is involved in and how they strengthen your department.
9. Describe your department's contributions to the advancement of University and Division goals and outcomes. (Vision 2020, University Strategic Plan, University learning outcomes, Aggies Commit/Quality Enhancement Plan, Texas A&M Diversity Plan, DSA Strategic Plan, etc.)
10. Explain the challenges your department faces and how they may be affecting the department's performance. These could include areas such as key program/service, learning and program outcomes; operations; resources; and campus environment.

11. Describe the overall approach your department uses to maintain a focus on departmental improvement.
12. Describe what being a “preeminent” department among your peers would look like and efforts you have taken to get there.
13. Provide a summary of major findings, recommendations, and subsequent actions taken from your last program review and any self-assessments against national standards such as the Council for the Advancement of Standards in Higher Education (CAS), if applicable.
 - 13.1. What were the primary strengths and weaknesses of the department as identified in each review?
 - 13.2. Describe any major changes, if any, which have been implemented that were NOT specific recommendations from a review.

Departmental Performance Categories

Category 1: Functions and Services for Students and Other Stakeholders

The Functions and Services category addresses how your department goes about determining, planning, and communicating functions and services. It also addresses how functions and services contribute to the University and Division goals for the satisfaction, retention, learning and diversity of its students.

- 1.1. What are the department's outcome expectations for its functions and services? (Refer to the department's assessment plan if it is comprehensive enough to cover all functions and services.)
 - 1.2. How does the department communicate its programs and services to students and stakeholders and how does it determine the effectiveness of that communication?
 - 1.3. How are new functions or services planned and current functions discontinued to meet student or other stakeholder needs?
 - 1.4. Where is there overlap or duplication of functions with other University or Division of Student Affairs departments?
 - 1.4.1. What efforts are being made to minimize if not eliminate these duplications?
 - 1.5. Overall, how do the functions, services and activities contribute to the department's mission, key student learning and program outcomes stated in the departmental profile? (The self-study team will answer this question in the self-study report.)
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this Category.

Considerations:

Maintaining awareness of stakeholder needs and expectations is critical to improve learning and services. To understand student/stakeholder needs and expectations, it is necessary to consider all aspects of program content and delivery and of the learning environment. An important part of this information comes from observations of student utilization of programs, services, and facilities to determine their influence on learning. This requires departments to use current knowledge about student development and learning, including academic, social, physical and ethical development.

Although many of the needs of stakeholders will be translated into student learning and development services for students, other stakeholders themselves may have needs that the department also must accommodate.

Category 2: Human Resources/Staff

The Human Resources category examines how the department engages, manages, and develops its own staff.

- 2.1. How do current qualifications and number of staff facilitate or impede the department's ability to be a high performing unit?
 - 2.2. What strategies are used for the recruitment, hiring and retention of staff?
 - 2.2.1. How does the department ensure diverse ideas, cultures, and thinking through its recruitment, hiring, and retention initiatives?
 - 2.2.2. How successful have the initiatives in 2.2.1 been?
 - 2.2.3. What are the deterrents to having a more diverse staff? How do you know that?
 - 2.3. How are staff performance expectations established?
 - 2.4. How does the department manage appropriate career progression (e.g., career ladder)?
 - 2.5. How does the department reward and recognize staff to reinforce high performance expectations?
 - 2.6. How does the department provide the education, training, and career development of its staff? (Include opportunities associated with new staff orientation, diversity, ethics, leadership development, workplace safety, and risk management, etc.)
 - 2.6.1. How does the department get input from various levels of the department on the education and training needs that exist?
 - 2.6.2. How does the department and its senior leaders and supervisors motivate staff and help them attain ongoing learning and career-related development?
 - 2.7. What formal or informal assessment methods are used to determine staff well-being, satisfaction, and motivation?
 - 2.7.1. How are the results used to improve the work environment?
 - 2.8. Overall, how does the management of human resources contribute to the department's mission and key student learning and program outcomes in the departmental profile? (The self-study team will answer this question in the self-study report.)
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this Category.

Considerations:

The human resources category addresses key human resource practices – those directed toward creating and maintaining a high-performance workplace and toward developing staff to enable them and your department to adapt to change.

Work and job factors for your consideration include use of teams/committees (including self-directed teams and, in some cases, involving paraprofessionals) and effective communication.

The category should include the formal (staff retention, absenteeism, grievance, safety, and productivity) and informal methods and measures used to determine a diverse staff's wellbeing, satisfaction, and motivation or refer to the department's assessment plan, if appropriate.

Many factors might affect staff wellbeing and satisfaction, and these factors are likely to differ greatly among staff groups. The department might need to consider factors such as effective staff grievance procedures, staff development and career opportunities; career ladders; preparation for changes in technology or organizational structure; the work environment and leadership support; workload; communication, cooperation, and teamwork; job security; compensation; equality of opportunity; appreciation of the differing needs of diverse employee groups; and the capacity to provide required services to students.

Category 3: Financial Resources

The Financial Resources category examines how a department makes decisions about resource allocation and the outcomes of that decision making.

- 3.1. How are budget allocation/reallocation decisions made in the department to make certain that your goals/action plans (category 7, planning) are accomplished?
 - 3.2. What is the link between assessment, planning and resource allocation?
 - 3.3. What are the department's indicators of budgetary and financial performance (see Considerations below)?
 - 3.4. How satisfied are you as a department with your current funding? What would you do/prioritize if you had more resources?
 - 3.5. Overall, how does the management of financial resources contribute to the department's mission and key student learning and program outcomes in the departmental profile? (The self-study team will answer this question in the self-study report.)
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this Category.

Considerations:

This category addresses those factors that best reflect the department's financial and budgetary performance. Measures of budgetary and financial performance might include income, expenses, and reserves; program expenditures as a percentage of budget; annual budget increases or decreases; resources redirected to your department from other areas such as grants and external partnerships. Comparative data for these measures might include performance relative to comparable departments and important benchmarks from within and outside the academic community.

Category 4: Facilities, Equipment, and Technology

The Facilities, Equipment, Technology Category addresses how effectively the department's current facilities/space, equipment and technology support the work of the department.

- 4.1. How effectively do the department's current facilities support the work of the department?
 - 4.1.1. How must facilities change in order to keep pace with the future needs and expectations of students and/or other stakeholders and to be a leader in your field?
 - 4.1.2. What would your priorities be if more space were available?
 - 4.2. How effectively does the department's current equipment support the work of the department?
 - 4.2.1. How must equipment change in order to keep pace with the future needs and expectations of students and/or other stakeholders?
 - 4.2.2. What strategies will you use to institute these changes?
 - 4.3. How is technology integrated into program, service and operating functions of the department?
 - 4.3.1. How successful have the efforts to integrate technology been and how do you know that?
 - 4.3.2. How have you kept pace with the development of hardware, software, maintenance, and training support?
 - 4.3.3. What are your projected technology needs for the future and what strategies will you use to address them?
 - 4.4. Overall, how does the management of facilities, equipment, and technology contribute to the department's mission and key student learning and program outcomes in the departmental profile? (The self-study team will answer this question in the self-study report.)
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this Category.

Category 5: Legal, Ethical, and Risk Responsibility

The Legal, Ethical, and Risk Responsibility category examines your department's approach to ensuring compliance with applicable legal and ethical responsibilities.

- 5.1. How does your department ensure non-discriminatory, fair, and equitable treatment of the staff and stakeholders that it serves?
 - 5.2. How does the department handle confidentiality issues?
 - 5.2.1. How are students, staff, and other stakeholders informed of these practices?
 - 5.3. How is staff trained to ensure that they are knowledgeable about laws and regulations and professional ethics that apply to their respective job responsibilities?
 - 5.4. How does the department monitor and ensure compliance with federal and state laws, system policies, and university rules?
 - 5.5. What risk management and safety processes are in place? (Refer to any risk management plans and procedures for students, staff, and customers in appendix or website. Also refer to the department's business continuity plan in and appendix or website.)
 - 5.5.1. How are staff included in creating and improving a safe, secure, and ethical department?
 - 5.6. Overall, how does the management of legal, ethical, and risk responsibilities contribute to the department's mission and key student learning and program outcomes in the departmental profile? (The self-study team will answer this question in the self-study report.)
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this Category.

Considerations:

Some of the questions in this category can be answered by referring to University policies, procedures and practices as well as the department's risk management and continuity of operations manuals.

Category 6: Assessment and Evaluation

The Assessment and Evaluation category examines your department's performance and improvement in key areas - student learning and development results; student and stakeholder-satisfaction; program, business or service outcomes; performance in creating a positive, productive, learning-centered, and supportive work environment for staff; distribution of information about outcomes; and support for the academic mission of the University. It also asks how the department determines that it is doing the right things not just assessing what it is doing now. Much of the information requested is found in a department's assessment plan, and it is appropriate to include it in its entirety to answer the questions here.

- 6.1. What methods are used to assess student and other stakeholder *needs, satisfaction and dissatisfaction* with your department's performance?
 - 6.1.1. What are the results from the assessment?
 - 6.1.2. How are results used (and how have they been used) to improve satisfaction and meet needs?
- 6.2. What methods are used to assess *student learning and development outcomes* achievement?
 - 6.2.1. What are the results from the assessment?
 - 6.2.2. How are the results used (and how have they been used) to improve outcomes?
- 6.3. What methods are used to assess the department's *program, business or service outcomes* achievement?
 - 6.3.1. What are the results from the assessment?
 - 6.3.2. How are the results used (and how have they been used) to improve outcomes?
- 6.4. How is your department's assessment outcome information made available to faculty, staff, students, and other stakeholders, as appropriate?
- 6.5. How does the department specifically connect to the academic life of students in support of the University mission and strategic plan (e.g., High Impact Practices, student worker learning outcomes, tutoring services, university learning outcomes, etc.)?
 - 6.5.1. How does your program assess student persistence, retention, time to graduation, academic success (e.g., GPR), and preparation for the work world? What are the results?
- 6.6. How do you obtain and use comparative or benchmark information to stay current with and/or excel beyond your peers and/or competitors delivering similar programs/services? In other words, how do you know that the department is doing the right things?
 - 6.6.1. What does this information tell you about your department's performance relative to your peers and/or competitors?
- 6.7. Overall, how does the management of assessment and evaluation responsibilities contribute to the department's mission and key student learning and program outcomes in the departmental profile? (The self-study team will answer this question in the self-study report.)

- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this Category.

Considerations:

The following considerations are important in responding to this category: (1) student learning should reflect holistic development and consistency with the department's mission; (2) current levels and trends should be reported to demonstrate year-to-year improvement; and (3) where possible, information should be segmented by student groups to permit an analysis of trends and comparisons that demonstrates the departments sensitivity to the improvement of and success for all students.

Effectively used, satisfaction results provide important indicators of departmental effectiveness and improvement – especially for departments where student learning and development are not the primary focus. Effective use entails understanding the key dimensions of satisfaction and dissatisfaction, recognition that satisfaction and dissatisfaction with programs, services and activities and/or performance might differ among student and stakeholder segments, and recognition that satisfaction and dissatisfaction might change over time.

The category focuses on the creation and use of all relevant data to determine and help predict your department's performance as viewed by students and stakeholders. Relevant data and information include gains and losses in student participation; positive referrals; complaints; student- and stakeholder-perceived value; student assessment of accessibility and availability of programs, services and activities; and awards, ratings, and recognition from independent rating or accrediting organizations.

Student learning outcome results should reflect not only what students know but also what they are able to do and how well they are able to function as a result of your department's programs and services. Appropriate for inclusion are formative and summative assessment results that address key student learning and development goals as articulated in the Departmental Profile.

Category 7: Planning

The Planning category addresses how your department develops strategic initiatives and action plans. It also examines how your strategic initiatives are utilized and progress are measured and sustained.

- 7.1. What are the key process steps in department planning?
 - 7.1.1. Who are the key participants in the process?
 - 7.1.2. What data is used for the process?

 - 7.2. What are the department's action plans for achieving goals?
 - 7.2.1. How are they developed?
 - 7.2.2. How is progress measured?
 - 7.2.3. What is the timeline for accomplishment?

 - 7.3. How does planning address:
 - 7.3.1. The department's challenges as identified in the departmental profile?
 - 7.3.2. Any changes in technology, student demographics, or student needs?
 - 7.3.3. Current trends in the field?
 - 7.3.4. Needs of staff members?

 - 7.4. How does your strategic plan align with the Division of Student Affairs Strategic Plan, the Texas A&M Strategic Plan, and your SOAR plan (Strengths, Opportunities, Aspirations, and Results)?

 - 7.5. Overall, how does planning contribute to the department's mission and key student learning and program outcomes in the departmental profile? (The self-study team will answer this question in the self-study report.)
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this Category.

Considerations:

Improvement and learning need to be embedded in a department's normal work processes. The role of planning is to align work processes and programs with the department's strategic directions to ensure that improvement and learning reinforce the department's priorities. The department planning and actions should illustrate alignment with the Division of Student Affairs strategic plan, the Texas A&M University strategic plan, the Texas A&M Quality Enhancement Plan, and any other related documents.

These questions do not imply formalized plans, planning systems, staff planning positions, or specific planning cycles. They also do not imply that all your improvements could or should be planned in advance. They do emphasize a future-oriented basis for decisions and priorities which requires clear strategic guidance, particularly when improvement alternatives, including major change, compete for limited resources. An increasingly important part of strategic planning is projecting the future environment. Such projections help to detect and reduce threats, to shorten reaction time, and to identify opportunities.

Category 8: Leadership

The Leadership category examines how the department's senior leaders (identified in the Department Profile) guide the department in setting values, directions, and performance expectations, as well as how they guide a focus on students and stakeholders, student learning, staff empowerment, innovation, and departmental learning. Attention is given to how senior leaders communicate with staff, review departmental and programmatic performance, and create a learning environment that encourages high performance.

- 8.1. What practices/methods are employed by senior leaders to establish and promote department's values, vision, mission and goals?
 - 8.2. What practices/methods are employed by senior leaders to establish and promote performance expectations to department staff, students and other key stakeholders?
 - 8.2.1. How are employees helped to understand how their work contributes to the success of the department and the Division of Student Affairs?
 - 8.3. How does department senior leadership address individual, organizational, and environmental conditions that inhibit goal achievement?
 - 8.4. How do senior leaders promote a work culture that encourages staff empowerment, innovation, and risk taking in order to serve students and other stakeholders?
 - 8.5. How do senior leaders support organizational and staff learning?
 - 8.6. What practices/methods do senior leaders employ to communicate with and engage the entire staff?
 - 8.6.1. How is frank, two-way communication encouraged?
 - 8.6.2. How and with what timeliness do senior leaders communicate key decisions?
 - 8.8. How does senior leadership contribute to the key student learning/development and program/process/performance outcomes of the department as identified in the departmental profile? (The self-study team will answer this question in the self-study report.)
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this Category.

Considerations:

Each department defines senior leadership for its own department (see the Department Profile). In some departments this may be the department director; in others it may include a number of associate and assistant directors.

Category 9: Outreach and Engagement

The Outcomes and Engagement category examines your department's performance, strategies and improvement in nurturing effective collaborations both inside and outside of Texas A&M. This category includes what the Division has been calling the "4 C's (collaboration, cooperation, coordination and communication)" and "academic integration."

- 9.1. What strategies does the department use to establish, maintain, and promote collaboration, communication, cooperation, and coordination with other departments *within the Division of Student Affairs*?
 - 9.1.1. How do these strategies and their outcomes benefit the Division of Student Affairs and the University?
 - 9.1.2. How does the department know these strategies are effective? What types of assessment are employed to determine effectiveness?
 - 9.2. What strategies does the department use to establish, maintain, and promote collaboration with relevant campus constituencies *outside the Division of Student Affairs within Texas A&M*?
 - 9.2.1. How do these strategies and their outcomes benefit the Division of Student Affairs and the University?
 - 9.2.2. How does the department know these strategies are effective? What types of assessment are employed to determine effectiveness?
 - 9.3. What strategies does the department use to establish, maintain, and promote collaborative relations with relevant individuals and agencies *external to Texas A&M*?
 - 9.3.1. How do these strategies and their outcomes benefit the Division of Student Affairs and the University?
 - 9.3.2. How do these strategies and their outcomes benefit the Bryan/College Station community, if applicable?
 - 9.3.3. How does the department know these strategies are effective? What types of assessment are employed to determine effectiveness?
 - 9.4. What goals does the department have in strengthening these types of relationships?
 - 9.5. How does the department manage/sustain these relationships through staff transitions?
 - 9.6. Overall, how does outreach and engagement contribute to the department's mission and key student learning and program outcomes in the departmental profile? (The self-study team will answer this question in the self-study report.)
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this Category.

Category 10: Process Management (Optional)

The Process Management category address how the department determines key student learning and program outcomes, designs and delivers its programs in order to maximize student learning and success, and how the department maximizes the service it delivers to students and stakeholders. This is a negotiable category. Some departments have a natural affinity for thinking and operating with process concepts; others do not. Although processes can often undermine the best intent and content of programs and activities, all departments will profit from completing this category.

- 10.1. What are the department's processes for determining student or other stakeholder learning outcomes and needs, as appropriate?
- 10.2. What are the processes for determining program outcomes?
- 10.3. What are the processes for designing work systems? Work systems can include how staff is organized into formal or informal units to accomplish your mission and your strategic objectives/initiatives; how job responsibilities are managed; and your processes for compensation, performance management, recognition, communication and hiring.
 - 10.3.1 What are the processes for implementing work systems?
- 10.4. How are key support processes determined, designed and implemented? Support processes might include processes for finance and accounting; facilities management; legal and human resources; information services; public relations; purchasing; management of suppliers/partners; and secretarial and other administrative services.
- 10.5. How does the department improve processes to maximize student success and to improve programs and services?
- 10.6. How does the department's process management contribute to the key student learning/development and program/process/performance outcomes of the department as identified in the departmental profile? (The self-study team will answer this question in the self-study report.)

Considerations:

A chart or table is completely appropriate for responding to 10.1.

Major Findings and Recommendations

Following the completion of the department profile and the categories, the self-study team should bring closure to the report using the following reflection questions.

- Based on your department's self-assessment provide a summary of your major findings.
- What is your reflection of your department's strengths in total?
- What are the major opportunities to align goals/outcomes and performance in each of the self-study categories?
- What are your recommendations for the future – for closing the gaps between goals and performance? What does your department need to do to improve and be innovative in thinking and actions?
- What resources does your department need to move to the next level of excellence?
- Based on your analysis, make recommendations on how your unit can best accomplish desired results.

EXTERNAL REVIEW

Goals of External Reviews

External reviews provide a professional and neutral evaluation, analysis, and recommendation to improve the quality of the department's programs and/or services. External reviews bring new perspective, fresh insight, and new ideas to the department's self-discovery that occurs during the self-study process. In addition, the external review offers the opportunity for the department to be examined in the context of national trends and standards.

Specifically, the External Review Team is asked to consider:

- How well the department carries out its mission and how successfully it serves students and other stakeholders
- The department's potential to serve students and stakeholders with future services and programs
- The adequacy of student learning and development opportunities in current programming and services
- If the department has adequate processes to evaluate the effectiveness of its student and program outcomes and if that feedback is applied to practice
- If staff, programs, services, and activities are appropriate given the human and physical resources
- If the activities address institutional, community and state/regional/national needs and trends
- The major limiting factors in quality improvement and the future growth and development of the department. What changes could raise the department to the next level of excellence?
- Specific needs that the reporting AVP or Director wish to include

Along with the Department's Self-Study Report, the External Review Team Report provides the department suggestions for future, long term planning, and the report is integrated into the department's final action planning document.

Components of the External Review

The external review process is comprised of the following:

- An off-site document review of the self-study report
- On-site review visit
- A preliminary presentation of findings while on-site
- A written report

Selecting the External Review Team

Based on the goals of the CPR, the Office of Vice President/Reporting AVP will determine the External Review Team Leader and members in consultation with the department director six to eight months prior to the planned on-site visit.

The External Review Team Leader should lead or have led exemplary divisions/departments of similar size and scope of the Division of Student Affairs department. The External Review Team Leader, as an expert in the field/profession, is encouraged to evaluate the department in its national context and provide insight and feedback on issues and trends particular to the department under review.

In addition to the team leader, the review team is comprised of a faculty member and/or academic administrator and a Student Affairs department director. Students (undergraduate and graduate) may be on the team, although they are expected not to miss class. Additional/different external or internal members with specific expertise or relevance to the department will be considered as appropriate (e.g., alumni, community members, other external expert).

External Review Team Responsibilities and Expectations

The department undergoing Comprehensive Program Review (CPR) relies heavily on the expertise of the External Review Team Leader and team members to provide insightful recommendations to move the department forward in its programs and services. The Team Leader will quickly build a cohesive team to engage stakeholders in interviews and to write a comprehensive report.

Prior to the Site Visit

The Team Leader will make contact with the team for (electronic) introductions and any initial expectations and thoughts about the process. Upon the receipt of the self-study report (at least one month before the visit) and the schedule, the External Review Team Leader will follow up with the team about initial questions and approaches to the visit. It is helpful to brainstorm initial questions for each interview before the review starts. Team members are expected to read the self-study report and supporting documentation. The Team may also recommend additional interviews.

During the Site Visit

During the site visit, the External Review Team will participate in the following activities:

- Welcome and orientation dinner
- Planning time for the team to finalize interview questions, formulate a plan for the interviews, and strategize how to process the information (facilitator, note-taker, timekeeper, etc.)
- Meeting with the Vice President for Student Affairs, department supervisor, and Division leadership
- Interviews with department staff at all levels
- Interviews with users and stakeholders of the department

- Processing time for the team to identify and discuss major findings and approaches to the written report
- An exit interview with the Office of the Vice President for Student Affairs, the Director of Student Life Studies, the department director and/or department leadership, and/or the Self-Study Team
- A brief exit interview with the Director of Student Life Studies about the CPR process

The External Review Team will be provided a room in which to conduct the interviews and have time to meet as a team. If the team should need anything during the visit, the CPR Coordinator or the Student Affairs representative on the External Review Team will assist.

At the beginning of each interview time, the External Review Team Leader should introduce the group and state the purpose of the meeting. Supervisors, staff hosts, and the department director should not be there, so that the participants feel free to discuss important issues openly. Team members should take notes during the interviews to capture responses and ideas to contribute to the report. (The department may choose to hire a scribe/note taker to capture interview responses.) The External Review Team may wish to hand out index cards for participants to also write down their answers anonymously, especially if it is a large group with a limited time. (If the cards are going to be collected and included in the report, be sure that participants know how the information will be documented.)

At the exit interview, the External Review Team will have the opportunity to verbally share preliminary findings and recommendations. There is not a set format for the exit interview.

Following the Site Visit

Utilizing the agreed upon template, team members will prepare the final report. Team members are responsible for contributing to and reviewing the written report, although the Team Leader is ultimately responsible for the completion of the report. The External Review Team Leader should provide all External Review Team members an opportunity to review and comment on the report draft.

The External Review Team Leader will email the draft report to the Student Life Studies (SLS) Director who will share it with the AVP. Feedback on areas of fact or clarification will be sent back to External Review Team Leader who will incorporate the comments as deemed appropriate. The final report is sent to the Student Life Studies Director and the reporting AVP within four weeks after feedback has been given. The reporting AVP will share the report with the Director of the department.

Specific roles and responsibilities are described below for each member, as applicable.

Team Leader

- Read the Self-Study report in preparation for the External Review Team (ERT) visit
- Convene and provide leadership at all meetings of the ERT prior to and during site review

- Use your professional experience, skills, insight, and expertise and that of the Team in the development of questions, in the interactions with focus groups and in the discussions and deliberations of the ERT
- Facilitate communication among and between team members
- Facilitate team work to make appropriate progress in each element of the CPR External Review and of the entire CPR External Review
- Ensure engagement and involvement of each team member
- Ensure that focus groups and interview groups remain on task and focused
- Ensure that ERT members remain focused on collecting quality information and observations to shape the final report
- In the exit interview, highlight both areas of strength and initial observations that may become recommendations
- Collaborate with the ERT to produce a well-written final report with observations and recommendations that contain the required elements of the report as described in the ERT Report Guidelines

TAMU Faculty/Staff Member

- Read the Self-Study report in preparation for the External Review Team (ERT) visit
- Use your professional experience, skills, insight, and expertise in the development of questions, in the interactions with focus groups and in the discussions and deliberations of the ERT
- Bring the unique perspective of the faculty/staff to the ERT and the subsequent report
- Be familiar with the members of the ERT and their respective roles on the team
- Attend every interview and meeting prior to and during the External Review Team visit
- Assist in the writing and editing of the report as requested by the ERT Leader

Student Affairs Director

- Read the Self-Study report in preparation for the External Review Team (ERT) visit
- Use your professional experience, skills, insight, and expertise in the development of questions, in the interactions with focus groups and in the discussions and deliberations of the ERT
- Bring the unique perspective of a Student Affairs Department Head to the ERT and the subsequent report
- Be familiar with the members of the ERT and their respective roles on the team.
- Attend every interview and meeting during the External Review Team visit
- Assist in the writing and editing of the report as requested by the ERT Leader

Student Affairs Staff Members (if applicable)

- Read the Self-Study report in preparation for the External Review Team (ERT) visit
- Use your professional experience, skills, insight, and expertise in the development of questions, in the interactions with focus groups and in the discussions and deliberations of the ERT

- Bring the unique perspective of a Student Affairs staff member to the ERT and the subsequent report
- Be familiar with the members of the ERT and their respective roles on the team
- Attend every interview and meeting during the External Review Team visit
- Assist in the writing and editing of the report as requested by the ERT Leader

Student Members

- Read the Self-Study report in preparation for the External Review Team (ERT) visit
- Use your professional experience, skills, insight, and expertise in the development of questions, in the interactions with focus groups and in the discussions and deliberations of the ERT
- Bring the unique student perspective to the ERT and the subsequent report
- Be familiar with the members of the ERT and their respective roles on the team
- Attend every interview and meeting during the External Review Team visit without missing class
- Assist in the writing and editing of the report as requested by the ERT Leader

The Scribe (if applicable)

- Read the Self-Study report in preparation for the External Review Team (ERT) visit
- Develop a system for taking notes based on the department's Self-Study Report (e.g., develop a template that is reflective of the categories identified in the Self-Study Report; develop a template for each of the program areas of the department)
- Consult with the ERT Leader(s), at the introductory dinner, and determine if the note taking templates are appropriate and/or need any editing
- Be familiar with the members of the ERT and their respective roles on the team
- Attend every interview and meeting during the External Review Team visit
- Use a laptop to take notes during each of the interviews
- Review and edit the notes, as needed, at the end of each day
- Provide the ERT Leader with an electronic copy of all the notes at the end of the ERT visit
- Assist in the writing and editing of the report as requested by the ERT Leader

Sample External Review Team On-Site Schedule

Tips for constructing the schedule:

- The schedule will look different for every department based on size, complexity, and focus. Be flexible, but also thorough in identifying stakeholders. Interview times typically run 45 minutes to an hour, but may vary based on size and scope. Ideally, the participants in each group have similar functions.
- Other than the time with the Division Directors, keep the participants to a manageable number, probably 5-8 depending on the time allotted. If the group is too large, not all participants will be able to contribute and/or the external review team will not be able to have all of their questions answered. You may want to have some “free time” late in the visit, in case the team identifies an additional interview they want to conduct.
- Supervisors of participants within the department should not be in the same interview as their employees.
- If the department has extensive facilities, be sure to include enough time for the tour.
- Get approval from department director and reporting AVP before sending final agenda to the External Review Team.
- In respect for the time commitments of campus members of the External Review Team, limit the amount of time spent during the on-site review, but provide enough opportunities to be able to do a credible job for the department.
- Provide as much space/down time as possible and still allow the team to accomplish its tasks (have short and longer breaks and time for the team to start formulating their response).
- Do not split team up into small groups to do interviews; the entire External Review Team needs to hear all interviews.
- Ideally, the team should have access to a “break room” near their interviews to have snacks and beverages, do work, etc.
- For evening times, the team should have access to a space where they can work on the report, prepare for the next day, etc. (room with internet access, dry erase board, projector, etc.). This could be their break room if logistics work out.

Day 1	
3:00 - 4:30 pm	Entire External Review Team (ERT) meets with Associate Vice President (AVP), Director, CPR Coordinator, and SLS Director - Set Scope and Parameters for Visit
4:30 – 5:30 pm	External Review Team Preparation Meeting Review agenda, finalize questions, make assignments, and discuss self-study report
5:30 – 7:30 pm	Dinner and work time (if needed)
Day 2	
8:00 – 8:45 am	Breakfast with Vice President for Student Affairs and reporting AVP
8:45 - 9:30 am	Tour of Department

9:30 - 9:45 am	Break
9:45 - 10:30 am	Meet with Director staff/Department leadership team
10:30 - 10:45 am	Break
10:45 - 11:45 am	Meet with Program/Service area
11:45 -12:00 am	ERT discussion time
Noon - 1:30 pm	Lunch, seated service with student clients
1:30 – 2:00 pm	ERT discussion time
2:00 – 3:00 pm	Meet with Program/Service area
3:00 – 3:15 pm	ERT discussion time
3:15 – 4:00 pm	Meet with constituent group
4:00 – 4:15 pm	Break
4:15 – 5:00 pm	Meet with constituent group
5:00 – 6:00 pm	ERT Process Check, evaluate programs reviewed that day. Discuss interviews scheduled for the next day
6:00 – 7:30 pm	Dinner for ERT members only
7:30 – ???	Work time if needed
Day 3	
8:00 – 8:30 am	Breakfast
8:30 – 9:30 am	Meet with Division Directors (can be at VPM [2 nd and 4 th Wednesdays] not including Office of Vice President staff or Director of Department)
9:30 – 9:45 am	Break
9:45 – 10:30 am	Meet with AVPs and Dean of Students (DoS)
10:30 – 10:45 am	Break
10:45 – 11:30 am	Meet with constituent group
11:30 am – 1:15 pm	Lunch and ERT work time
1:15 – 2:15 pm	Meet with constituent group
2:15 - 2:30 pm	Break
2:30 – 3:15 pm	Meet with constituent group
3:15 – 5 pm	Continue constituent groups meetings, open time for follow up meetings, or work time
5:00 – 6:00 pm	Break (optional)
6:00 – 7:30 pm	Dinner for ERT members only
Day 4	
8:00 – 8:30 am	Breakfast
8:30 – 9:30 am	ERT work time
9:30 am – 10:30 am	External Review Team exit interview with Office of the Vice President leadership team (VPSA, AVPs, DoS); Director of Department; Members of the Self-Study Team and/or Department as deemed appropriate by the Director; Director of Student Life Studies
10:30 – 11:00 am	Debriefing of External Review Team process with Director of Student Life Studies

External Review Team Report Framework

While the written report may vary in content and length, depending on the nature and size of the department, it should be formatted in Times New Roman or Calibri 12-point font with 1" margins. The report should include a list of the external review team members, the date of the review, and a copy of the schedule. There is an expectation that the written report be comprehensive in addressing each of the department areas and the department as a whole.

The report should include the following sections:

- A. Title page including name of department reviewed, date of the external review, list of external review team members and titles
- B. Overall impressions of the Department
- C. Strengths for specific areas, services, programs and processes
- D. Opportunities for improvement for specific areas, services, programs and processes
- E. recommendations for action for specific areas, services, programs and processes
- F. Observations/recommendations on additional focus areas as identified by Division/Department
- G. Overall conclusions
- H. Appendix: Copy of the interview schedule

The recommendations should include the basis or rationale for the statement as decided by the reporting AVP in conjunction with the External Review Team Leader (e.g., based on interviews, best practices in the field, benchmarks of similar programs, etc.). References to specific individuals or groups should not be identified in the report. The External Review Team Leader may communicate confidentially with the reporting AVP if there are potential issues with a particular person or group.

Finally, if there are any questions or concerns about the report, these should be directed to the reporting AVP. The importance of the external team leader's participation in the review process is recognized and sincerely appreciated in helping to make the comprehensive program review a productive and valuable exercise.

APPENDIX A - STAFF PROFILE FORMS

SACSCOC Comprehensive Standard 3.9.3
Qualified Staff: Students Affairs and Services

Name of Department

Date Form Completed:

Instructions:

Column One: List each student support staff member (professional staff).

Column Two: Indicate the title of each person listed.

Column Three: Describe the individual's primary responsibilities to provide student support services.

Column Four: Indicate the staff member's academic qualifications pertaining to his or her responsibilities in providing the institutions student support services.

Column Five: Describe the staff member's professional experience in the areas of student support service that qualify the individual to carry out his or her responsibilities.

Summary Institutional Form

Name	Title	Responsibilities	Educational Qualifications	Professional Experience

General Instructions:

Questions have been provided to fulfill expectations of the Southern Associations of Schools and Colleges Commission on Colleges (SACSCOC) Comprehensive Standard 3.9.3. "The institution employs qualified personnel to ensure the quality and effectiveness of its student affairs programs (Qualified staff)."

Staff may be grouped by working units within your department to more closely reflect the breadth of qualifications within that particular unit.

Associate and Graduate Staff Form

Use this form to describe staff, other than professional staff, in the department, as desired.

Column One: List each student support staff member.

Column Two: Indicate the title of each person listed.

Column Three: Describe the individual's primary responsibilities to provide student support services.

Column Four: Indicate the staff member's educational qualifications pertaining to his or her responsibilities in providing the institutions student support services. Educational qualifications could include degrees and certificates achieved, workshops completed, degrees/certificates being sought, etc.

Column Five: Describe the staff member's professional experience in the areas of student support service that qualify the individual to carry out his or her responsibilities. Experience qualifications could include number of years in the position/field, presentations given, software knowledge related to position, etc.

Name	Title	Responsibilities	Educational Qualifications	Experience Qualifications

Staff Involvement Form

This form highlights the contributions that all staff make (professional, associate, graduate assistant) to a variety of areas that may be inside or outside their formal position description.

Name	Contributions to the Division (e.g., Division Committees, special projects, etc.)	Contributions to the University (e.g., University Committees, searches, teaching, projects, etc.)	Contributions to the profession (e.g., publications, national organizational leadership roles, presentations, etc.)

APPENDIX B – SAMPLE TEXAS A&M CONSULTING SERVICES AGREEMENT

PROFESSIONAL SERVICES AGREEMENT
BETWEEN TEXAS A&M UNIVERSITY
AND
NAME OF EXTERNAL REVIEW TEAM LEADER

This Professional Services Agreement (“Agreement”) between Texas A&M University, a member of The Texas A&M University System, an agency of the State of Texas (“University”), and **ERT LEADER NAME** (“Provider”), is made and entered into as of **TODAY’S DATE** (“Effective Date”).

This Agreement is for the provision of professional services outlined in the Scope of Work. Provider represents to having the knowledge, ability, skills and resources to provide such services in accordance with the terms and requirements of this Agreement. To any extent required under the Scope of Work, Provider represents that any part of the performance required to be performed by a professional having state licensure in good standing will be performed by such licensed professional.

University and Provider hereby agree as follows:

1. SCOPE OF WORK

A. Provider shall serve as the External Review Team Leader for the Comprehensive Review of the Division of Student Affairs’ DEPARTMENT NAME. The External Review Team Leader will submit a report of findings and recommendations to the Office of the Vice President for Student Affairs.

B. The scope of the work (“Work”) and the time for performance thereof, is as set forth in Appendix A attached hereto and made a part hereof for all purposes including the HUB subcontracting plan and any reports required thereunder.

C. Upon execution of this Agreement, all services previously performed by Provider on behalf of University and included in the description of the Work, shall become part of the Work and shall be subject to the terms and conditions hereof.

D. University shall take reasonable precautions to verify the accuracy and suitability of any drawings, plans, sketches, instructions, information, requirements, procedures, requests for action, and other data supplied to Provider for use in the Service under this Agreement. Provider shall use reasonable efforts to verify the accuracy and suitability of any information supplied to Provider by University, or any other party, that Provider uses for the Project. Provider shall identify to the University in writing any such documents or data which, in Provider’s professional opinion, are unsuitable, improper, or inaccurate in connection with the purposes for which such documents or data are furnished. University does not warrant the accuracy or suitability of such documents or data as are furnished unless Provider advises University in writing that, in Provider’s professional opinion, such documents or data are unsuitable, improper, or inaccurate and University confirms in writing that it wishes Provider to proceed in accordance with the documents or data as originally given.

E. Provider agrees and acknowledges that University is entering into this Agreement in reliance on Provider’s represented professional abilities with respect to performing the services, duties, and obligations under this Agreement. Provider shall perform its services in accordance with the usual and customary professional standards of care, skill and diligence consistent with its industry and like firms in Texas that provide professional services for projects that are similar in size, scope, and budget to the

Project (the “Standard of Care”). Subject to this Standard of Care, Provider shall interpret and apply applicable national, federal, state, and municipal laws, regulations, codes, ordinances, and orders in effect at the time the services are provided. There are no obligations, commitments, or impediments of any kind known to the Provider that will limit or prevent performance by Provider of its services.

F. Provider shall allocate adequate time, personnel, internal administration, supervision, and resources as necessary to perform its services in an expeditious and economical manner consistent with the interests of the University.

G. University’s approval or acceptance of Provider’s services shall not relieve Provider of any of its professional duties nor release Provider from any liability for negligent delivery of such services because University is, at all times, relying upon Provider’s skill and knowledge in performing Provider’s services. University shall have the right to reject any of Provider’s services due to any material errors or omissions in any deliverables prepared by Provider or its consultants. Upon notice of any such errors or omissions, Provider shall promptly provide any and all services necessary to correct or remedy them at no additional cost to the University. Provider’s obligation to correct its errors and omissions is in addition to, and not in substitution for, any other remedy for defective services which University may have at law or in equity, or both.

2. TIME FOR COMMENCEMENT AND COMPLETION

It is understood that time is of the essence in the Work to be performed under this Agreement and that Provider shall complete all authorized Work in accordance with the time for performance described for the Work, and in a minimum of time consistent with the highest customs, standards, and practices of Provider’s business or profession. Work is to commence DATE OF 1 MONTH BEFORE THE ERT VISIT and will be complete no later than DATE OF ABOUT 1 MONTH AFTER ERT VISIT.

3. PAYMENT TERMS and MAXIMUM CONTRACT SUM

A. For the satisfactory performance of the Work, University shall pay Provider an amount not to exceed \$3,000 (three thousand dollars). University reserves the right to increase the scope of this engagement as necessary but the total billings for authorized work shall not exceed \$3,000 (three thousand dollars). The University also agrees to provide one roundtrip, coach-class airline ticket to/from College Station, TX, lodging, and meals for/during the site visit on DATE.

B. Payments of the amount due to Provider will be provided by University upon completion of work and receipt the final report as outlined in Appendix B. Payment for travel related expenses shall be in accordance with State of Texas Travel Guidelines.

C. University makes no representations regarding the amount or type of services, if any, that Provider will be asked to provide to University during the term(s) of this Agreement. It is expressly understood that the University is under no obligation to request any services from Provider and no minimum amount of work is required or contemplated under this Agreement. All service requests will be made by the University on an as-needed basis, subject to future agreement on the scope of the work and the fee.

4. DEFAULT AND TERMINATION

A. In the event of substantial failure by a party hereunder to perform in accordance with the terms hereof, the other party may terminate this Agreement upon fifteen (15) days written notice of termination setting forth the nature of the failure (the termination shall not be effective if the failure is fully cured prior to the end of the fifteen-day period), provided that said failure is through no fault of the terminating party.

B. University may, without cause, terminate this Agreement at any time upon giving thirty (30) days

advance notice to Provider. Upon termination pursuant to this paragraph, Provider shall be entitled to payment of such amount as shall compensate Provider for the services satisfactorily performed from the time of the last payment date to the termination date in accordance with this Agreement, provided Provider shall have delivered to University a final report describing the work completed to the date of termination. University shall not be required to reimburse Provider for any services performed or expenses incurred after the date of termination notice.

5. UNIVERSITY FACILITIES

University will provide Provider with office space, as needed, to carry out Provider's duties under this Agreement. Any non-consumable items provided by University will remain University property at the termination of this Agreement unless otherwise agreed in writing. Provider and its employees will be permitted access to and use of the allocated office space, but University reserves the right to enter the premises to conduct University business, as may be reasonably necessary or for health and safety purposes.

6. NOTICES

Any notice required or permitted under this Agreement must be in writing, and shall be deemed to be delivered (whether actually received or not) when deposited with the United States Postal Service, postage prepaid, certified mail, return receipt requested, and addressed to the intended recipient at the address set out below. Notice may also be given by regular mail, personal delivery, courier delivery, facsimile transmission, email, or other commercially reasonable means and will be effective when actually received. University and Provider can change their respective notice address by sending to the other party a notice of the new address. Notices should be addressed as follows:

Texas A&M University: Texas A&M University
Office of the Vice President for Student Affairs
1256 TAMU
College Station, TX 77843-1256
979-845-4728
979-845-3320 fax

Provider: ERT LEADER NAME
ERT LEADER PERSONAL ADDRESS
ERT LEADER EMAIL ADDRESS

7. PUBLIC INFORMATION

Information provided to Provider by University, including but not limited to information from the members, officers, agents, or employees of The Texas A&M University System or any of its components, and information provided to Provider by members of the public or any other third party shall belong to University.

Information created, derived, or otherwise produced by Provider prior to initiation of this Agreement or unrelated to the work conducted under this Agreement shall remain the exclusive property of Provider. Provider shall have the responsibility of clearly designating any confidential information that is provided to the University. In the event University receives a request for public information that includes information designated by Provider to be confidential, University will provide notice to Provider and Provider may submit a brief to the Office of the Attorney General, as provided by Chapter 552, *Texas Government Code*. The parties agree that University will be permitted, without penalty under this Agreement, to strictly comply with Chapter 552, *Texas Government Code*, in responding to any request for public information pertaining to this Agreement.

8. DISPUTE RESOLUTION

The dispute resolution process provided in Chapter 2260, *Texas Government Code*, and the related rules adopted by the Texas Attorney General pursuant to Chapter 2260, shall be used by University and Provider to attempt to resolve any claim for breach of contract made by Provider that cannot be resolved in the ordinary course of business. Provider shall submit written notice of a claim of breach of contract under this Chapter to the University Contracts Officer of Texas A&M University, who shall examine Provider's claim and any counterclaim and negotiate with Provider in an effort to resolve the claim.

9. MISCELLANEOUS

A. **Provider agrees to indemnify and hold harmless University from any claim, damage, liability, expense or loss arising out of Provider's negligent or intentional acts or omissions in performance under this Agreement.**

B. Provider shall neither assign its rights nor delegate its duties under this Agreement without the prior written consent of University.

C. Provider shall be an independent contractor, and neither Provider nor any employee of Provider shall be deemed to be an agent or employee of University. As an independent contractor, Provider will be solely responsible for determining the means and methods for performing the services described. Provider shall observe and abide by all applicable laws and regulations, policies and procedures, including but not limited to, those of University relative to conduct on its premises.

D. Ethics Matters. Neither Provider nor its employees, agents, representatives or consultants will assist or cause any University employee to violate the University's Conflicts of Interest Policy or applicable state ethics laws or rules. Provider represents and warrants that no member of the Board of Regents of the Texas A&M University System has a direct or indirect financial interest in the transaction that is the subject of this Agreement.

E. This Agreement constitutes the sole agreement of the parties and supersedes any other oral or written understanding or agreement. This Agreement may not be amended or otherwise altered except upon the written agreement of both parties.

F. The validity of this Agreement and all matters pertaining to this Agreement, including but not limited to, matters of performance, non-performance, breach, remedies, procedures, rights, duties, and interpretation or construction, shall be governed and determined by the Constitution and the laws of the

State of Texas. Pursuant to Section 85.18, *Texas Education Code*, venue for any suit filed against University shall be in the county in which the primary office of the chief executive officer of University is located.

G. If Provider is a taxable entity subject to the Texas Franchise Tax (Chapter 171, *Texas Tax Code*), then Provider certifies that it is not currently delinquent in the payment of any franchise (margin) taxes or that Provider is exempt from the payment of franchise (margin) taxes.

H. University may request a consultant to perform a criminal background check on any employee and/or representative of Provider who conducts business pursuant to this Agreement on the campus of University.

I. Under Section 231.006, *Texas Family Code*, the vendor or applicant certifies that the individual or business entity named in this contract, bid, or application is not ineligible to receive the specified grant, loan, or payment and acknowledges that this contract may be terminated and payment may be withheld if this certification is inaccurate.

J. Pursuant to Section 2252.903, *Texas Government Code*, Provider agrees that any payments owing to Provider under this Agreement may be applied directly toward certain debts or delinquencies that Provider owes the State of Texas or any agency of the State of Texas regardless of when they arise, until such debts or delinquencies are paid in full.

K. Provider expressly acknowledges that University is an agency of the State of Texas and nothing in this Agreement will be construed as a waiver or relinquishment by University of its right to claim such exemptions, privileges, and immunities as may be provided by law.

L. Provider acknowledges and understands that Section 2252.901, *Texas Government Code*, prohibits University from using state appropriated funds to enter into any employment contract, consulting contract, or professional services contract with any individual who has been previously employed, as an employee, by the agency within the past twelve (12) months. If Provider is an individual, by signing this Agreement, Provider certifies that Section 2252.901, *Texas Government Code*, does not prohibit the use of state appropriated funds for satisfying the payment obligations herein.

M. Performance by University under this Agreement may be dependent upon the appropriation and allotment of funds by the Texas State Legislature (the "Legislature"). If the Legislature fails to appropriate or allot the necessary funds, University will issue written notice to Provider and University may terminate this Agreement without further duty or obligation hereunder. Provider acknowledges that appropriation of funds is beyond the control of University.

[Signatures follow on the next page]

IN WITNESS WHEREOF, the parties have signed this Agreement on the date indicated below their signatures.

Texas A&M University

NAME OF TEAM LEADER

(Signature)

(Signature)

(Date)

(Date)

Contract Appendix A: Scope of Work: External Review Team Leader Responsibilities

Expectations

The department undergoing Comprehensive Program Review (CPR) relies heavily on the expertise of the External Review Team Leader and team members to provide insightful recommendations to move the department forward in its programs and services. The Team Leader will quickly build a cohesive team to engage stakeholders in interviews and to write a comprehensive report.

Prior to the Site Visit

The Team Leader will make contact with the team for (electronic) introductions and any initial expectations and thoughts about the process. Upon the receipt of the self-study report (at least one month before the visit) and the schedule, the External Review Team Leader will follow up with the team about initial questions and approaches to the visit. It is helpful to brainstorm initial questions for each interview before the review starts. Team members are expected to read the self-study report and supporting documentation. The Team may also recommend additional interviews.

During the Site Visit

During the site visit, the External Review Team will participate in the following activities:

- Welcome and orientation dinner
- Planning time for the team to finalize interview questions, formulate a plan for the interviews, and strategize how to process the information (facilitator, note-taker, timekeeper, etc.)
- Meeting with the Vice President for Student Affairs, department supervisor, and Division leadership
- Interviews with department staff at all levels
- Interviews with users and stakeholders of the department
- Processing time for the team to identify and discuss major findings and approaches to the written report
- An exit interview with the Office of the Vice President for Student Affairs, the Director of Student Life Studies, the department director and/or department leadership, and/or the Self-Study Team
- A brief exit interview with the Director of Student Life Studies about the CPR process

The External Review Team will be provided a room in which to conduct the interviews and have time to meet as a team. If the team should need anything during the visit, the CPR Coordinator or the Student Affairs representative on the External Review Team will assist.

At the beginning of each interview time, the External Review Team Leader should introduce the group and state the purpose of the meeting. Supervisors, staff hosts, and the department director should not be there, so that the participants feel free to discuss important issues openly. Team members should take notes during the interviews to capture responses and ideas to contribute to the report. (The department may choose to hire a scribe/note taker to capture interview responses.) The External Review Team may wish to hand out index cards for participants to also write down their answers anonymously, especially

if it is a large group with a limited time. (If the cards are going to be collected and included in the report, be sure that participants know how the information will be documented.)

At the exit interview, the External Review Team will have the opportunity to verbally share preliminary findings and recommendations. There is not a set format for the exit interview.

Following the Site Visit

Utilizing the agreed upon template, team members will prepare the final report. Team members are responsible for contributing to and reviewing the written report, although the Team Leader is ultimately responsible for the completion of the report. The External Review Team Leader should provide all External Review Team members an opportunity to review and comment on the report draft.

The External Review Team Leader will email the draft report to the Student Life Studies (SLS) Director who will share it with the AVP. Feedback on areas of fact or clarification will be sent back to External Review Team Leader who will incorporate the comments as deemed appropriate. The final report is sent to the Student Life Studies Director and the reporting AVP within four weeks after feedback has been given. The reporting AVP will share the report with the Director of the department.

Specific roles and responsibilities are described below for each member, as applicable.

Team Leader

- Read the Self-Study report in preparation for the External Review Team (ERT) visit
- Convene and provide leadership at all meetings of the ERT prior to and during site review
- Use your professional experience, skills, insight, and expertise and that of the Team in the development of questions, in the interactions with focus groups and in the discussions and deliberations of the ERT
- Facilitate communication among and between team members
- Facilitate team work to make appropriate progress in each element of the CPR External Review and of the entire CPR External Review
- Ensure engagement and involvement of each team member
- Ensure that focus groups and interview groups remain on task and focused
- Ensure that ERT members remain focused on collecting quality information and observations to shape the final report
- In the exit interview, highlight both areas of strength and initial observations that may become recommendations
- Collaborate with the ERT to produce a well-written final report with observations and recommendations that contain the required elements of the report as described in the ERT Report Guidelines

External Review Team Report Template

While the written report may vary in content and length, depending on the nature and size of the department, it should be formatted in Times New Roman or Calibri 12-point font with 1” margins. The report should include a list of the external review team members, the date of the review, and a copy of the schedule. There is an expectation that the written report be comprehensive in addressing each of the department areas and the department as a whole.

The report should include the following sections:

- A. Title page including name of department reviewed, date of the external review, list of external review team members and titles
- B. Overall impressions of the Department
- C. Strengths for specific areas, services, programs and processes
- D. Opportunities for improvement for specific areas, services, programs and processes
- E. recommendations for action for specific areas, services, programs and processes
- F. Observations/recommendations on additional focus areas as identified by Division/Department
- G. Overall conclusions
- H. Appendix: Copy of the interview schedule

The recommendations should include the basis or rationale for the statement as decided by the reporting AVP in conjunction with the External Review Team Leader (e.g., based on interviews, best practices in the field, benchmarks of similar programs, etc.). References to specific individuals or groups should not be identified in the report. The External Review Team Leader may communicate confidentially with the reporting AVP if there are potential issues with a particular person or group.

Finally, if there are any questions or concerns about the report, these should be directed to the reporting AVP. The importance of the external team leader’s participation in the review process is recognized and sincerely appreciated in helping to make the comprehensive program review a productive and valuable exercise.

Contract Appendix B: Fee Schedule

FEE SCHEDULE

For the scope of work, **ERT LEADER NAME** will receive payment of **\$X,XXX (X thousand dollars)** after the final report has been submitted to the University. In addition, the University also agrees to provide one round trip, coach class airline ticket to/from **LOCATION**, lodging, and meals during the visit on **SITE REVIEW DATES**. *You may also want to specify rental car, parking expenses, etc. depending on the travel plans.*

APPENDIX C - DIVISION OF STUDENT AFFAIRS CPR CYCLE/TIMELINE

FY 2007 – 2020

	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Becky Gates Children's Center		X*											
Corps of Cadets						X							X
Disability Services	X							X					
Information Technology					X							X	
Memorial Student Center				X							X		
Multicultural Services	X								X				
Music Activities								X					
Office of the Vice President									X				
Recreational Sports						X							X
Residence Life			X							X			
**Rudder Theatre Complex					X								
Student Activities		X								X			
Student Counseling Service				X*							X*		
Student Health Services			X*										
Student Life					X						X		
Student Life Studies						X							X
Texas A&M University Art Galleries						X*							
**University Center & Special Events												X	
Veteran Resource and Support Center									X				
Marketing and Communications												X	

*By letter dated January 21, 2011 the Vice President for Student Affairs, LtGen Joe Weber USMC (Ret.), allowed the Student Counseling Service, Student Health Services, and the Becky Gates Children’s Center to opt out of the CPR process, with support and permission of their reporting Vice President, due to formal accreditation processes. University Arts has a separate accreditation requirement to fulfill their review process.

**Following the completion of the CPR process for Rudder Theatre Complex in 2013, the department was re-configured into the University Center and Special Events.

APPENDIX D - GLOSSARY OF KEY TERMS

The Glossary of Key Terms defines and briefly describes terms used throughout the CPR manual.

Action Plans: Specific actions that respond to short- and longer-term strategic initiatives. Action plans include details of resource commitments and time horizons for accomplishment. Action plan development represents the critical stage in planning when strategic goals, objectives and outcomes are made specific so that effective department-wide understanding and deployment are possible.

Analysis: The examination of facts and data to provide a basis for effective decisions. Overall departmental analysis guides management toward achieving key departmental results and toward attaining strategic objectives/initiatives.

Despite their importance, individual facts and data do not usually provide an effective basis for actions or setting priorities. Actions depend on an understanding of relationships derived from analysis of facts and data.

Anecdotal: Process information that lacks specific methods, measures, deployment mechanisms, and evaluation/improvement/learning factors. Anecdotal information frequently uses examples and describes individual activities, rather than systematic processes.

An anecdotal response to how senior leaders establish and promote department values, vision, mission and performance expectations might describe a specific occasion when a senior leader gathered outcome information from a conversation with a single student. On the other hand, a systematic approach might be the outcomes measures used by all senior leaders to deliver performance expectations on a regular basis, the measures used to assess effectiveness of the methods, and the tools and techniques use to evaluate and improve the outcomes measures.

AVP: Associate Vice President for Student Affairs.

Benchmarks: Processes and results that represent best practices and performance for similar activities, inside or outside the Student Affairs profession. Departments engage in benchmarking activities to understand the current dimensions of world-class performance and to achieve non-incremental or breakthrough improvement.

Benchmarks are one form of comparative data. Other comparative data departments might use include data collected by a third party (such as professional organizations such as ACUI, ACHUO-I, ACHA, ASCA, NODA, NIRSA, NASPA, ACPA, etc. or consulting firms), data on performance of comparable student affairs departments, and comparisons with similar organizations in the same geographic area.

DoS: Dean of Students, included as part of the leadership team in the Office of the Vice President for Student Affairs.

Effective: How well an approach, a process, or an assessment method addresses its intended purpose. Determining effectiveness requires the evaluation of how well a need is met by the approach taken, its deployment, or the method used.

Empowerment: Giving staff the authority and responsibility to make decisions and take actions. Empowerment results in decisions being made closest to students and stakeholders, where work-related knowledge and understanding reside.

Empowerment is aimed at enabling staff to respond to students' needs, to improve processes, and to improve student learning and development. Empowered staff require information to make appropriate decisions; thus, a departmental requirement is to provide that information in a timely and useful way.

Formative Assessment: Frequent or ongoing evaluation during programs or learning experiences that gives an early indication of what students are learning. Formative assessment is often used as a diagnostic tool for students and staff, providing information with which to make real-time improvements in activities, techniques, and approaches. Approaches to formative assessment might include projects; portfolios; journals; observations of the learning process and learning outcomes; discussion groups; performances; self-assessments, or tests that occur during the program or activity, when student and staff can benefit from the information and improve.

Functions and Services: What you do and what you provide.

Goals: A future condition or performance level that the department intends to attain. They can be both short- and longer-term. Goals are ends that guide action.

Goals can serve many purposes, including

- clarifying strategic objectives and action plans to indicate how success will be measured
- fostering teamwork by focusing on a common end
- encouraging "out of the box" thinking to achieve a stretch goal
- providing a basis for measuring progress

How: In what way or manner? By what means? To what extent or degree?

Improvement/Innovation: Making meaningful change to improve programs, services, and/or processes and create new value for students and stakeholders. Innovation involves the adoption of an idea, process, technology, or product that is either new or new to its proposed application.

Successful organizational innovation is a multistep process that involves development and knowledge sharing, a decision to implement, implementation, evaluation, and learning. Although innovation is often associated with technological innovation, it is applicable to all key departmental programs, services, and processes that would benefit from change, whether through breakthrough improvement or a change in approach.

Key: The major or most important elements or factors, those that are critical to achieving your intended outcome.

Learning Outcome: What a participant should know or be able to do (demonstrate) following an intervention, activity, etc.

Methods: Information (quantitative and qualitative) that documents input, output, and performance dimensions of programs, processes, services, and the overall department (outcomes). Methods might be simple (derived from one measure) or composite from several different measures.

Mission: The overall function of a department. The mission answers the question, “What is this department attempting to accomplish?” The missions might define students, stakeholders, or future students served; distinctive competencies; or technologies used.

Outcome: The end result of an intervention/activity. Outcomes can be classified as learning outcomes (what a student should know or be able to do after an intervention) or program/process/performance outcomes (what the program is supposed to accomplish).

Partners: Refers to other departments, other divisions within the institution, other schools, and parents, as appropriate, with which your organization has cooperative relationships for purposes of ensuring effective student success.

Performance: The output results and their outcomes obtained from processes and services that permit evaluation and comparison relative to goals, standards, past results, and other organizations.

Process: Method(s) by which outcomes are produced. Often processes are linked activities for the purpose of producing a program or service for students and/or stakeholders within or outside the department. Generally, processes involve combinations of people, tools, techniques and materials in a systematic series of steps or actions. In some situations, processes might require adherence to a specific sequence of steps, with documentations (sometimes formal) of procedures and requirements, including well-defined measurement and control steps (for example, application to be a recognized student organization).

In service situations such as education, especially in situations where those served are directly involved in the service, process is used in a more general way to spell out what must be done, possibly including a preferred or expected sequence. If the sequence is critical, the service needs to include information to help those served understand and follow the sequence. Such service processes also require guidance to the providers of these services on handling contingencies related to possible action or behaviors of those served (For example, the selection, training, and support of Fish Camp counselors).

In knowledge work such as teaching, strategic planning, research, development, and analysis, process does not necessarily imply formal sequence of steps. Rather, process implies general understanding regarding competent performance such as timing, options to be included, evaluation, and reporting. (For example, the assessment of student leadership development)

Program/Process/Performance Outcome: What the program or process will accomplish, usually by a specific date or to a specific level.

Reporting AVP: The Associate Vice President in the Office of the Vice President of Student Affairs that supervises the department under review.

Results: Outputs and outcomes achieved by an organization in addressing the purposes of a category item. Results are evaluated on the basis of:

- current performance
- performance relative to appropriate comparisons
- the rate, breadth and importance of performance improvements
- relationship of results measures to key organizational performance requirements

SACSCOC: Southern Association of Colleges and Schools Commission on Colleges. The regional accrediting body for Texas A&M University.

Senior Leaders: Those with the main responsibility for managing the overall department. That might include the head of the department and his or her direct reports. “Senior leadership” is defined uniquely by each department in the Division of Student Affairs. In some cases this might be the director and associate and assistant directors. In other departments it might include coordinators of programs and services. It is the purview of each department to define senior leadership and to include this description in the body of the document where appropriate.

Stakeholders: All groups that are or might be affected by a department’s actions and success. Examples of key stakeholders might include parents, parent organizations, faculty, staff, boards, former students, employers, other schools, funding entities, and local/professional communities. Although students are commonly thought of as stakeholders, for purpose of emphasis and clarity, this program review process refers to students and stakeholders separately.

Strategic Challenges: Those pressures/forces that exert a decisive influence on a department’s likelihood of future success. These challenges frequently are driven by a department’s future competitive position relative to other providers of similar products or services. While not exclusively so, strategic challenges are generally externally driven. However, in responding to an external strategic challenge, a department may face internal strategic challenges.

External strategic challenges may relate to student, stakeholder, or future student needs/expectations; changes in programs or offerings; technological changes; or budgetary, financial, societal, and other risks. Internal strategic challenges may refer to the department’s capabilities or its staff and other resources.

See the definition of strategic objectives below for the relationships between strategic challenges and strategic objectives a department articulates to address key challenges.

Strategic Initiatives: A department's articulated aims or responses to address major change/improvement and/or competitiveness issues. Strategic initiatives generally are focused externally and relate to significant student/stakeholder, future student, service, or technological opportunities and challenges (strategic challenges). Broadly stated, they are what a department must achieve to meet/exceed mission/vision requirements and expectations. Strategic initiatives set a department's longer-term directions and guide resource allocations and redistributions.

See the definition of action plans for the relationship between strategic initiatives and action plans.

Student Learning Outcome: What a student will know or be able to do (demonstrate) at the end of an activity, class, intervention, training, experience, etc.

Student Segments: Groups of students with similar needs. The basis for the groupings might reflect their co-curricular interests, learning styles, service delivery, living status (on or off campus), mobility, special needs, race and ethnicity, gender or other factors.

Summative Assessment: Longitudinal analysis of the learning and performance of students and former students. Summative assessments tend to be formal and comprehensive, and they often cover global subject matter. Such assessment may be conducted at the end of a program and could be compared to the results of pretesting to determine gains and to clarify the causal connections between practices and student learning. For example, use of data from Your First College Year (YFCY) and the National Survey of Student Engagement (NSSE) could be used to support summative assessment of freshman student programs or senior year gains and behaviors.

Systematic: Approaches that are repeatable and use data and information so that improvement and learning are possible. Systematic approaches build in the opportunity for evaluation and learning and thereby permit a gain in maturity.

Trends: Numerical information that shows the direction and rate of change for a department's results. Trends provide a time sequence of departmental performance.

A minimum of three data points generally is needed to begin to ascertain a trend. The time period for a trend is determined by the cycle time of the process being measured. Shorter cycle times demand more frequent measurement, while longer cycle times might require longer periods before a meaningful trend can be determined.

Examples of trends called for in the categories may include student learning and development results, student, stakeholder and staff satisfaction and dissatisfaction results; program results; budgetary, financial, and future student performance; and departmental performance results, such as student participation, staff satisfaction and meeting budget requirements.

Value: The perceived worth of a program, service, process, asset, or function relative to cost and relative to possible alternatives. Departments frequently use value considerations to determine the

benefits of various options relative to their costs, such as the value of various programs and service combinations to students or stakeholders.

Departments need to understand what different student and stakeholder groups value and then deliver value to each group. This frequently requires balancing value for students and stakeholders.

Values: The guiding principles and/or behaviors that embody how the department and its people are expected to operate. Values reflect and reinforce the desired culture of the department. Values support and guide the decision-making of all staff, helping the department to accomplish its mission and attain its vision in an appropriate manner.

Vision: The desired future state of a department. The vision describes where a department is headed, what it intends to be, or how it wishes to be perceived.

Work Systems: How your staff is organized into formal or informal units to accomplish your mission and your strategic objectives/initiatives; how job responsibilities are managed; and your processes for compensation, performance management, recognition, communication, and hiring. Departments design work systems to align their components to enable and encourage all staff to contribute effectively and to the best of their abilities.