

Discussion Notes  
Hawaii Community Colleges  
Program Review Evaluation

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1. Colleges share program review implementation and results

**Hawaii CC.** The process dates back to April 2004. An Assessment Committee task force was appointed to address issues of SLOs and program Review. However, driven by accreditation needs, it ended up focusing on program review.

It decided on a 4-year comprehensive review cycle. Campus discussions determined that there are 44 programs and units to review.

In the first year, 12 programs and units went for review—6 were clearly instructional. However 2 OCET programs were primarily instructional.

The Dean's Template was discussed and from those items, an irreducible core (including the Perkins Core Indicators). Data elements were differently defined. Timing problems also arose because of short turn-around time for reviews: drafts turned in by November, then go to the Chancellor after college committee reviews them. The committee selected 18 data elements from the Deans' 42, but some were also added by HawCC administrators. All 12 reports were done on time for visitation team review.

It was important that the data was accurate and its provenance could be documented.

After the visit, HawCC was taken off warning.

21 programs still must be reviewed. Core review data needs to be identified.

Question: What is the difference between annual and comprehensive reviews? The annual review is the presentation of data elements. It is used to identify things to watch for in the review and to determine "treatment." Then the annual data will show that whether or not the treatment is working or if the college is reaching its goals.

**Honolulu CC.** Data driven decision making related to budget. By the mid-term visit determined that enough assessment had been done.

HonCC is following a 5-year schedule of program review. More people are becoming involved and committed to reviewing the data and using the data to make decisions.

A big change has occurred in the way programs are identified. Often several separate units have been redefined as and grouped into a program: e.g., student services.

An assessment specialist was hired to assist with review. 45 programs identified. An assessment committee was formed. A policy was formulated, which changed the due date and specified who receives the completed reports.

HonCC is still unclear about when the annual program is needed if comprehensive had been done. One date—Feb 1—was set for all reports. The previous year's data is used to write the current report.

Actually HonCC already had annual reports required for CTE programs.

The process of trying to get faculty & staff to buy into the review became important. They needed to see the linkage between the process of review and the decisions made on budget. The program review was used, for example, to inform the automotive advisory committee, which then gave further counsel based on program review data.

Question: What's the advantage of doing a three-year comprehensive if you're doing annuals anyway? If you are accumulating data annually and making decisions on an annual basis, then do we need to do a comprehensive review?

Question: Why three years or five years? The three-year review allows the program reviews to coincide every five years with biennium budget.

**Kapi'olani CC.** Review have been done annually by instructional programs since the early 90's. The 2004-2005 new policy outlined which programs are to be reviewed, including AES units (e.g. student services).

KapCC follows a three-year cycle coordinating with the tactical planning cycle. Two cycles of tactical planning leads to a revision of the strategic plan.

All programs complete reviews at the same time: April. AES programs turned in their reviews in May.

In the first cycle of the new policy, KapCC did its comprehensive 3-year review.

Question: How are the Liberal Arts "programs" handled? As one program review—actually an AA degree program review.

## **Kaua'i CC**

Kaua'i follows a 5-year cycle for comprehensive program review, with annual program review updates (APRU). All Board approved programs are reviewed. In addition, there is a separate review for Hawaiian Studies and another for Physical Education. Student Services does one review. Academic support has a review for each unit. Business Office does a separate review. OCET also submits a review.

There is some confusion about the annual report and the comprehensive review. Kauai CC has tried to get the two data sets aligned.

Previously, there had been no longitudinal view with program health indicators. Also the PHI reporting was purely an administrative job.

The “push” was to make the process collegial, involving faculty and staff, and getting both to take the process seriously. The review is now synchronized with budgeting processes.

Criteria will be established and written into campus policy to be used by a College Council to judge resource requests that come up through program review process. The criteria should conform as closely as possible to conform to Strategic Plan goals.

The College has had a problem making sure people update action plans based on program review. Action plans updated every year.

The Chancellor publishes a “Decisions Memo” communicating the decisions of the College Council.

A brief discussion followed about the amount of data needed and what data is critical. The upshot of the discussion is that it how much data you are looking at is not as important as what decisions will result from the data.

Program reviews were due in March. The delivery date was moved to the end of November. The full, comprehensive review is also due in November. Prior year's data is used.

**Leeward CC.** LCC wrestled with the definition of a program. It was decided to go by degrees—so in this case an AA Program Review. Everyone has planning templates that are filled out on-line. These templates were based on questions generated by ACCJC standards, strategic plan, etc. Essentially, these templates outlined what should be covered in division planning meetings. They focus on 10 key performance indicators.

The program template information is merged into 4 major planning areas. Those 4 plans are merged into a College Plan. This process is done annually. In effect, LCC does a comprehensive program review every year, which is rolled up into a 5-year cycle. The key concept is “integration.” So planning merges into budgeting.

LCC is focusing on benchmarking at this time.

Questions the utility of the comprehensive review: What is its purpose?

It was admitted that the comprehensive review is driven by accreditation and policy requirements.

**Maui CC.** MCC built its program review around the PHIs. But not with LBRT. Program review was tied to strategic review. Administration identified faculty to lead campus through program review, SLO development, assessment processes, etc. Program heads--the ones closest to programs--carried the burden. They came up with a self-study guide for comprehensive and annual program reviews.

MCC follows a 5-year comprehensive program review cycle. Everyone is provided a model to follow.

One of the big problems was not being able to get the data for the reviews. MCC had no IRO person at the time process was developed.

MCC also redefined its programs—going from 35 programs to about 20 programs. Administrative & Student Services write separate reviews. There is a separate AES review. The data from the reviews is used to inform budget decisions.

Timelines were a big issue. Also . . . where data comes from and which data elements are actually needed. The need to educate the faculty about the budgeting and decision-making processes became apparent. A pattern of data, discussion, decision-making was established

There were a lot of workshops on SLOs, tying them into Strategic Plan.

Reviews are due mid-September. They use prior year's data.

Some observations from others at this point:

Less concern about data, more concern about how we use the data for analysis or decision making.

We must be careful to differentiate between the annual budgeting process and the Biennial requests.

We need to recognize the labor-intensiveness of this process. Some systems have entire offices with staff to handle program review.

Importance of benchmarking: without benchmarks, the data does not make sense. We need to answer questions about how to define standards and who to benchmark against.

Cost per SSH is critical but we don't know how to get this kind of information.]

**Windward CC.** WCC follows a 5-year cycle. Annual review with LBRT, broken down by ASCs. ETC has been doing this for a long time. Very new for instructional programs. Since 2002 WCC has used data to review programs across college. One of the chief problems: getting numbers useful for WCC. Also concerned about "drift" in how we collect the information.

Annual reports sent to Strategic Planning Committee for review. The committee makes recommendations to the budget committee, which discusses how the recommendations will be implemented.

Reports are due in November to have them in time for developing budget requests. They use prior year's data.

Questions about the nature and quality of data.

Questions about the path of data—who gets the reports and what happens to them.

Discussion of items 3a-3c.

**We are in an evolution, trying to get back as a system of CCs. We have to have a common process—common dates, data elements, processes.**

**To get common data elements, a committee with IR, CC, and CAO representation was suggested. It should try to answer three questions: how many elements, where the data should come from, and how reliable the data is. We want consistent, coherent data elements**

**We should aim for clarity, simplicity, consistency, utility**

What does the system need for program review?

**If we really want consistent, coherent, reliable data, we should have uniform generation of data from a central office—APAPA, for example. Perhaps we should commit resources to a system effort, especially for program review.**

Differences in due dates and cycles can be resolved in this discussion.

**There does appear to be a need for longitudinal, in-depth analyses (i.e., periodic comprehensive program reviews). Comprehensive reviews encourage examination of long term trends. They are also needed when we want to determine if a program should be continued or stopped.**

We also need to link program review and data elements to Strategic Plans.

**We need to have a program review council with representatives from administration, including CAOs, IR, and faculty. We need to focus on how data will be used and what actions will follow. We need to keep in mind that we probably need fewer data elements—10 to 15—but that is not the main concern.**

**We need for benchmarks and core indicators that can be rolled up system-wide.**

We need to develop multiple strategies to address the issues raised by the data

**Continuous improvement – who is the client? The faculty has to be addressed. So we should add department chairs to the proposed program review council.**

We actually have multiple clients: faculty, legislators, public.

#### Discussion of Item 4: Procedures

We need clearer communication. We have disconnections within campuses AND the system .

It is not only a problem of inconsistent data and program review reports. We also have a problem of inconsistent organizational structures at the various campuses.

It is not clear who is responsible for disseminating information—who “owns” program review. It is not enough to identify the Chancellor as the one primarily responsible for program review.

Back to the issue of timelines . . .

We need to set a date so that the reports are done in time to

- gather the data on which the review is based;
- inform the budgeting process—end of June and July;
- allow the campus to analyze and discuss the data.

We cannot set a specific date at this time, but we agreed that the due date should come at the end of the Fall semester.

We also agreed to use prior year data so that, for example, the 2006 program review will be based on 2004-2005 data.

#### Discussion of items 5-6: Benchmarks and Health Indicators

Initially, at KapCC, the program heads set benchmarks. They were allowed to select benchmarks initially so that they could feel ownership. They were to have subsequently re-examined those benchmarks and reset them based on program performance.

We need to have a sense of the internal range of the benchmarks, as well as a system-wide range.

We need to have benchmarks that can be used across the system, but we also need to be sensitive to local conditions and accommodate different conditions among the colleges. At the same time, we want to make sure that we don't get to the point where we feel we cannot establish benchmarks because of regional differences.

It was suggested that some of the campuses at least participate in the National Community College Benchmark Project so that we have access to some national outcome and effectiveness data.

But we want to make sure that we don't get to the point where we cannot establish benchmarks because regional differences.

Does the administration trust the departments to make their own determination of health? If so, then a reasonably competent dean and department can determine its own benchmarks.

Colleges in other parts of the nation have been much more “prescriptive” in their use of benchmarks, using them often to determine whether to continue or terminate programs. We have tended to be more laissez-faire.

If we fear too rigid an interpretation of benchmarks, perhaps some benchmarks should be allowed a range of values.

We can use a formula to calculate benchmarks consistently, but the formula used could also take into account local conditions that affect the various colleges.

Establishing benchmarks is a very complex process, but it is crucial that benchmarks are set and that we follow through and act on the data.

The Program Review Committee will also take up the discussion of how to determine benchmarks.

Discussion of items 7 & 8: Summarizing and reporting on the system outcomes and program changes resulting from program reviews

[I may have been missing much of the discussion here, but I don't think we actually said very much to the points. We did talk about

the possibility of providing system-wide data for campuses via the Web; focusing on benchmarks which would be easy to understand and have a high degree validity.]

## Discussion Notes—Program Review Day Two

### I.

#### Miscellaneous concerns about data, PHI reports, and Program Reviews

There was a consensus that if we need to get uniform, consistent data, there should be one source of data instead of seven campuses generating their own data independently.

At this time, getting program level data and getting useful data is difficult.

But perhaps part of the problem is how we define programs. There is some confusion about program level and department level data.

Perhaps we need to go back and see how we define our program, department, course level structures.

We need to understand why programs have been defined the way they are. Sometimes these differences arise from the way we use the tools we have (like labeling courses by alphas). Sometimes we have just been inattentive: the coding might not reflect reality.

We need to focus on what difference this process of defining programs make in terms of the students. The issue of LBRT majors was mentioned 3 times—determining who LBRT majors really are and what they are there for so we will know better how to work with them.

Concern about Program Health Indicators. A question arose about what constitutes a PHI report and what must be done to satisfy Perkins reporting requirements. We no longer need the PHI reports as they have been done in the past. The 7 Perkins Core Indicators are the only data required.

We run into a problem when reviewing the AA program. At the program level, the data is too general to be useful. We need to get down to the division level. But divisions are campus units. The data must be tagged AT THE CAMPUS LEVEL so that data can be extracted properly. This can be done for fiscal as well as instructional information.

However, Board policy says that we report on Board approved programs. That is the level—program—we must agree on.

Perhaps fields that have entrepreneurial activity should be judged differently from those that don't (like Liberal Arts). We can go down to discipline level and look at demand, percentage of fill, etc.

MAPS reports have the data for  $\frac{3}{4}$  of the measures and that data is provided to the colleges annually. MAPS has data from the system down to the discipline level. The Academic Planning Profile, provided by the VP's Office also has a single "page" for each discipline.



There are several problems with MAPS:

Timing—Not all of the reports are ready when we need the data.

Format—The information is not provided in a form that is easily manipulated (e.g., even simply copying and pasting the data is sometimes awkward).

Consistency—The information is not organized in the way we need it for our reporting purposes.

Another problem is that we all want to have these program characteristics at the various campuses, but then it becomes difficult to aggregate data at the division level. [Not sure about this note. I might have misheard the comment. It's possible that what was meant was: Another problem is that we all want to have these data at the various campuses at the division level, but then it becomes difficult to aggregate data at the program level.]

We return to the original problem: determining core measures. If we can define a small set of core measures, other measures can be added. If we have the data.

We need to evolve: we can be more precise as the process unfolds. If we try to define all our terms and measures perfectly and precisely, we will never get to anything useful. And we cannot focus on the differences between environments, campuses, and programs. We have to balance the concerns of institutional differences against our ability to get useful data.

We will use 1 of the 8.5 positions to develop data for the CC system.

## II.

We decided to set up a Program Review Council (or Cabal--PRC) to settle some of the issues related to program review. The membership of the PRC would consist of

An IR analyst each from Hawaii, Honolulu, Kapi'olani, and Kauai CC, and from the System Office.

A Chancellor each from Leeward and Maui

A CAO each from Hawaii, Kapi'olani, Leeward, Maui, Winward

A DC each from Hawaii, Honolulu, Kapi'olani, Kauai

That is, around 15 people. Mike Rota will convene the group and lay out the charge

The PRC will return with recommendations by October 20 on timeline, data, and format of Program Reviews.

For the coming year, we will meet the Perkins requirements. We may submit PHI reports by April 15, with the core indicators for the state, along with measures and information that we supply for campus information. We also submit the Program Review coversheets, assessing health in the three areas. We will continue with the process of doing the program reviews at the various campuses.

### III.

The last part of the session focused on determining how to allocate UHCC funds for program improvement: about \$245,000.

What goes into the pot for program improvement will be renewed from year to year, but what is allocated to a program will be a one-time only allocation. Unallocated funds carry over to the next year.

We could (should?) use program review and benchmark data to determine allocation, but neither have been defined yet).

We also might take into consideration program health. For example, we might choose to base allocations on program need—those programs that are less healthy might need more help. The problem is that we really don't have a clear and consistent understanding of how program health was determined--what was cautionary and what unhealthy.

The discussion touched on the issue of remedial education. How do we base our decision about program improvement allocation if data on remedial students is not always readily available and sometimes not at all available?

We might also use the funds to help develop a system-wide information distribution system. There is a great need for data. The 8.5 position was in response to that need.

Could we also use some money for marketing to compete with private institutions?

How should the money be allocated? Three options are available: a proportionate distribution by campus, RFPs based on program review, specification by the system-of areas that need to be funded.

There might be additional requirements that come up in PRC discussions. If those arise, we might decide to allocate some of the funds for system-wide concerns.

An example of such an issue is the one concerning remediation and the "leaky pipeline"—our current inability to determine where a significant percentage of HS students go after graduation.

We narrow the set of issues that we need to deal with at the system level. We look to the program reviews to make the determination of where the money should go.

After some discussion, it became clear that we need a combination of approaches to allocate the funds: we need a system-wide specification of areas that need to be funded and an RFP type process based on program review. We would then ask

Who screens the applications for these funds?

How do colleges apply for these funds?

We use the data from program reviews to screen the applications

The screening would be done by the council of chancellors. So . . .

The System decides on a set of priorities.

An RFP process is used by which campuses apply for funding.

Any application should tie in to program review data. This would also reinforce the culture of data and the linkage between program review, budgeting, and strategic plans.

The screening is done by the CC council of Chancellors based on system priorities and data from program review.