Program Review Feedback—Instructional Planning Committee (IPC)

Program Name:	Division:
	Date Reviewed:

Program Review Sections & Standards	Commendations	Recommendations	Comments	ACCJC Exemplary Example
Program Context				
1. Mission - Share how your program contributes to the College or fits into the College's Mission. For example, what other academic programs and student/academic services does your program engage with? Examples of student/academic services include the Learning Center, Library, STEM Center, SparkPoint, Dream Center, etc. Another example, how does your program fit into any of the College's plans (such as Equity, Technology, Strategic Enrollment, etc.)?	Provided: ☐ Mission	Information Needed: ☐ Mission		
2. Articulation - Are there changes in curriculum or degree requirements at high schools or 4-year institutions that may impact your program? If so, describe the changes and your efforts to accommodate them. If no changes have occurred, please write "no known changes."	Provided: ☐ Evidence ☐ Analysis ☐ Impact on program ☐ Efforts to make changes	Information Needed: ☐ Evidence ☐ Analysis ☐ Impact on program ☐ Efforts to make changes		
3. Community and Labor Needs - Are there changes in community needs, employment needs, technology, licensing, or accreditation that may affect your program? If so, describe these changes and your efforts to accommodate them. If no changes have occurred, please write "no known changes". CTE programs: identify the dates of your most recent advisory group meeting and describe your advisory group's recommendations for your program.	Provided: ☐ Community needs ☐ Employment needs ☐ Technology needs ☐ Licensing ☐ Accreditation ☐ Impact on program	Information Needed: ☐ Community needs ☐ Employment needs ☐ Technology needs ☐ Licensing ☐ Accreditation ☐ Impact on program	□ No recommendation or change needed□ Not Applicable	

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Looking Back				
4. Curricular Changes - List any significant changes that have occurred over the prior years in your program's curricular offerings, scheduling, or mode of delivery. For decisions made by your department, explain the rationale for these changes. If applicable, how have state policy changes affected your curricular offerings?	Provided: ☐ List of changes that occurred ☐ Rationale for changes	Information Needed: ☐ List of changes that occurred ☐ Rationale for changes	□ No recommendation or change needed□ Not Applicable	
5A. Progress Report—IPC Feedback - Provide your responses to all recommendations received in your last program review cycle.	Provided: ☐ Response to all Recommendations	Information Needed: ☐ Further description of some or all recommendations	☐ No recommendation or change needed☐ Not Applicable	
5B. Progress Report—Prior Action Plans - Provide a summary of the progress you have made on the program goals identified in your last program review.	Provided: ☐ Summary of progress	Information Needed: ☐ Further description of summary of progress	☐ No recommendation or change needed☐ Not Applicable	
6A. Impact of Resource Applications - Describe the impact to date of previously requested new resources (assignment, equipment, facilities, research, funding) including both resource requests that were approved and not approved. What impact have these resources had on your program and measures of student success? What have you been unable to accomplish due to resource requests that were not approved?	Provided: ☐ Thorough description of new resources' impact on program. ☐ Thorough description of impact on students ☐ Any negative impacts due to lack of resources	Information Needed: ☐ Further description of new resources' impact on program. ☐ Further description of impact on students ☐ Any negative impacts due to lack of resources	□ Not Applicable	

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6B. Impact of Staffing Changes - Describe the impact on your program of any changes in staffing levels (for example, the addition, loss or reassignment of faculty/staff). If no changes have occurred, please write "not applicable".	Provided: ☐ Thorough description of staffing changes' impact on program	Information Needed: ☐ Further description of staffing changes' impact on program	□ Not applicable	
Current State of the Program				
7A. Enrollment Trends - Use the data provided by PRIE to examine your enrollments by department or courses. Describe trends in headcount, FTES, and load. If applicable, describe any other enrollment data that is relevant to your program.	Provided: ☐ Thorough description of trends in all identified areas ☐ Quantitative evidence from data packets	Information Needed: ☐ Further description of trends in some or all identified areas ☐ Quantitative evidence from data packets	□ Not applicable	
7B. Significant Changes in Your Program - Have there been any significant changes in enrollment trends or course offerings? For example, has there been a significant increase or drop in FTES or Load? If applicable, consider trends in class cancellation rates and how it might have affected your course offerings. If needed, consider how the pattern of course offerings (times/days/duration/delivery mode/number of sections) affected your enrollment?	Provided: ☐ Identified Changes ☐ Discussed impact of changes made	Information Needed: ☐ More information needed on identified changes and/or impacts based on changes made	□ Not applicable	

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7C. Planning for Your Program - What changes could be implemented, including changes to course scheduling (times/days/duration/delivery mode/number of sections), curriculum, marketing, and articulation of pathways that might improve these trends? If applicable, include plans for faculty recruitment and faculty training.	Provided: ☐ Changes that could be implemented	Information Needed: ☐ Changes that could be implemented	☐ Not applicable	
8A. Access & Completion - Describe the student completion and success rate in your courses and/or program using the data provided by PRIE. Look at your course offerings, in the last program review cycle was it possible for a student to complete your certificates or degrees while only completing courses at Cañada College? How can the college help you improve student completion and success? What changes could be made?	 □ Thorough description of student success rate data (courses and/or program) □ Described course offerings as they relate to certificate or degree completion □ Described how College 	Information Needed: □ Further description of student completion data (courses and/or program) □ Further description of student success rate data (courses and/or program) □ Description of course offerings as they relate to certificate or degree completion □ Description of how College can help improve student completion and success □ Changes that could be made	□ Not applicable	
8B. Student Equity - One of the goals of the College's Student Equity plan is to close the performance gaps for disproportionately impacted students. Use the data provided by PRIE that indicates which groups are experiencing a disproportionate impact in your program. Which gaps are most important for improving outcomes in your program? How can the college help you address these gaps? What changes could be made?	Provided: ☐ Gaps that are most important for improving program outcomes ☐ How the College can help address these gaps ☐ Changes that could be implemented	Information Needed: ☐ Gaps that are most important for improving program outcomes ☐ How the College can help address these gaps ☐ Changes that could be implemented	□ No recommendation or change needed□ Not applicable	

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8C. Completion — Success Online - The college has a goal of improving success in online courses. Using the data provided by PRIE, what significant gaps do you see in success between online/hybrid and non-online courses? What changes could be made to reduce these gaps? If your program does not offer online/hybrid courses, please write "not applicable".	Provided: ☐ Gaps in success between online/hybrid and nononline courses ☐ Changes that could be made to reduce gaps	Information Needed: ☐ Gaps in success between online/hybrid and non-online courses ☐ Changes that could be made to reduce gaps	 □ No recommendation or change needed □ Not applicable 	
9A. SLO Assessment—Compliance - Are all active courses being systematically assessed over a three-year cycle? Refer to the Program/ Department's Three-Year Assessment Plan and describe how the plan is completed across sections and over time.	Provided: □ Evidence that all active courses are systematically assessed over a 3-year cycle. □ Coordination of assessment across sections and time is thorough	Information Needed: □ Evidence that all active courses are being systematically assessed over a 3-year cycle. □ Further description of assessment across sections and time		
9B. SLO Assessment – Impact - Summarize the dialogue that has resulted from these course SLO assessments. What specific strategies have you implemented, or plan to implement, based upon the results of your SLO assessment?	Provided: ☐ Summary dialogue Strategies ☐ Implemented/plan to implement	Information Needed: ☐ Summary dialogue Strategies ☐ Implemented/plan to implement		

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10. PLO Assessment - Describe yo Program Learning Outcomes assessment using your Program/Department's Thir Assessment Plan. Summarize the material of your PLO assessments. What are simprovements that have been, or can implemented as a result of PLO assessment.	nent plan ree Year ajor findings some be,	Provided: □ Description of Program/Department's 3- Year assessment plan □ Summary of major findings □ Improvements that have been and/or can be implemented	Information Needed: □ Description of Program/Department's 3-Year assessment plan □ Summary of major findings □ Improvements that have been and/or can be implemented		
Looking Ahead					
11. Program Planning and Goals this section in the Program Planning as section of Improve. Based on your assyour program, create goals for progra improvement and/or growth for the up cycle. Consider things such as curriculatings, employment trends, equity requipment needs, future staffing and needs, etc.	and Goals sessment of m coming llum needs,	Provided: ☐ List of goals for program improvement and/or growth	Information Needed: □ List of goals for program improvement and/or growth	□ No recommendation or change needed	
Overall Commendations:					
Overall Recommendations:					
Overall Program Effectiveness:	☐ Highly Effective ☐ Effective ☐ Needs Program Improvement				