



**AD HOC SELF-EVALUATION REPORT
REVISED RECOMMENDATION 4**

Helena College University of Montana

Helena, Montana

www.helenacollege.edu

Report Prepared for the Northwest Commission on Colleges and Universities
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INTRODUCTION

In a letter dated July 22, 2020, the Northwest Commission on Colleges and Universities (NWCCU) requested that Helena College prepare and submit an Ad Hoc Report without a visit in Spring 2022 with regard to Recommendation 4 (Revised) from the April 2017 Year Seven Evaluation Report. This document provides a narrative overview and supporting exhibits demonstrating the College's ongoing response to Recommendation 4.

REVISED RECOMMENDATION 4

Use the results of the assessment efforts to inform academic and learning-support planning and practices to continuously improve student learning outcomes. (2020 Standard 1.C.7)

RESPONSE TO RECOMMENDATION 4

An ad hoc report was submitted to document progress between 2017 and 2020 toward Recommendation 4. This report provides information on continued progress made on institutional assessments efforts since that time. Improvements have been made in the areas of documenting mission fulfillment, program assessment, and use of Helena College Assessment Database.

Mission Fulfillment

Chaired by the Director of Institutional Research and Effectiveness, the Institutional Development, Effectiveness, and Accreditation (IDEA) Committee is charged with advancing the strategic direction of Helena College through assessment and planning. Committee membership is representative of all stakeholders on campus, with participation from faculty, administration, staff, and students.

In response to the 2020 update of the NWCCU accreditation standards, the IDEA committee determined it would no longer utilize Core Themes as indicators of mission fulfillment. Indicators of mission fulfillment will be incorporated into the College's new strategic plan for 2022-2027, planning for which began in the spring of 2021. To date, the College has adopted a new mission and vision statement, as well as four guiding principles to serve as the pillars of the plan. These four guiding principles embody the College's core values and guide the work of all departments toward fulfilling our mission: effectiveness, stewardship, impact, and equity. The draft Strategic Plan (2022-2027) is attached as Appendix A.

The IDEA Committee has assembled four work groups with membership from all areas of campus, each tasked with finalizing the defining characteristics of a guiding principle, as well as recommending key performance indicators (KPIs) and up to two measurable strategic goals for their principle. The chairs of each work group, along with the Dean/CEO and the Director of Institutional Research and Effectiveness, make up the Strategic Planning Steering Team, which reports to IDEA. The work groups are using a combination of past mission fulfillment reports (including core theme indicators), institutional data, strategic issues identified by the Dean's Cabinet, and campus input to accomplish their tasks. IDEA will be responsible for finalizing the KPIs, strategic goals, and targets for success.

Following implementation of the new strategic plan in fall of 2022, the IDEA Committee will produce an annual report of mission fulfillment, documenting: (1) alignment of departmental work plans to defining characteristics (see Program Assessment section), (2) measurement of key performance indicators, and (3) evaluation of progress toward strategic goal targets.

Key performance indicators will provide meaningful measures of student learning and institutional effectiveness. Where possible, the KPIs will be benchmarked against a group of peer institutions, a list that is currently under review by IDEA. The goals will be strategic initiatives intended to guide the College in accomplishing its vision. Annual evaluation of both the KPIs and progress toward the strategic goals will ensure continuous improvement according to our four guiding principles.

Program Assessment

Significant progress has been made in regard to program assessment on two fronts: annual plans and program review for both academic and non-academic areas.

As described in the 2020 ad hoc report, the annual plan process at Helena College is used to identify and assess specific actions aligned to one or more of the College's strategic goals. While the connection of department goals will change slightly with the implementation of a new strategic plan (as described in the Mission Fulfillment section), the process will remain the same. The annual plan process has proven very successful for the College and provided a mechanism for all departments to connect initiatives to the College mission.

Since 2020, the following improvements have been made:

1. Added prompts and validation for required fields
2. Work plan documentation provided to all plan developers at the start of each year, including an explanation of SMART goals, accompanied by an explanatory video
3. Plans are now reviewed by a supervisor prior to IDEA review
4. IDEA review feedback is shared with plan developers
5. Implemented a mid-year update

An end-of-year report summarizes overall progress toward the College's mission and strategic goal objectives (example attached as Appendix B). The Dean's Cabinet reviews this report, identifies priorities for the upcoming year, and shares these with the campus, encouraging areas to align their work accordingly. This process has also led to improvements in annual employee evaluations. Supervisors are encouraged to help their employees set individual goals that support the departmental annual plan goals.

Efforts to improve program review at Helena College began with the decision to develop two separate processes, one for academic programs, and one for non-academic programs.

Over the fall 2020 and spring 2021 semesters, the President of Faculty Senate, the Director of Institutional Research, and the developer of the assessment database met with the Executive Council of the [Faculty] Senate (ECOS), members of faculty who recently completed a program review, and colleagues at other colleges to identify ways to improve the academic program review process. The new process was approved by IDEA and ECOS in spring 2021, while the necessary bylaw changes to form a new committee were approved by Faculty Senate in fall 2021. Improvements include:

- Program reviews are assigned to program faculty, with division directors providing support where necessary
- Program review report completed within the assessment database, which will allow for integration of program review recommendations into area annual work plans. This will eliminate the need for a mid-cycle evaluation.
- Academic Program Review Committee (APRC) formed to provide mentorship, review the report, and make preliminary recommendations for the future of the program, to be approved by the Dean's Cabinet.
 - The committee members include: Director of Institutional Research & Effectiveness (chair), Director of Business Services, Executive Director of Enrollment, two faculty who completed a program review the year before, and two faculty to serve two-year terms.
- Supplemental reports summarize highlights of the review period, and faculty are encouraged to meet with report providers for context. These reports include:
 - Annual work plan summary for overview of departmental activities

- Professional development report for all program faculty
- Five-year budget summary
- Data summary
- Summary of assessment activities and mapping of student learning outcomes
- Expansion of recommendations section to include success targets, a preliminary implementation strategy, and needed resources. There is also space within the database for the Dean's Cabinet to respond to recommendations.

The new process has been implemented for the 2021-22 academic year. Faculty were notified in October and received all of their supplemental reports in time for a check-in meeting in February 2022. Final reports are due to the APRC on April 1, 2022. IDEA Committee and the Dean's Cabinet will read the reports over the summer, and a final determination by Cabinet is expected by September 1, 2022. There will also be an opportunity for the faculty and Cabinet to meet and discuss any implementation strategies, if necessary. At the conclusion of this first program review cycle, the APRC will meet with the faculty to solicit feedback and consider any suggestions for improvement.

In September 2020, a committee was formed to consider ways to tailor the program review process for non-academic program areas. This committee was made up of directors of four student support departments: K-12 Partnerships/Dual Enrollment (chair), Financial Aid, Library Learning Hub/Tutoring, and TRIO Student Support Services. The committee met throughout the fall semester and presented their proposal for a revised process to the IDEA committee in February 2021. The process was approved by the IDEA Committee to go into effect in May of 2021.

The approved process included a number of changes meant to tailor the experience to non-academic program areas. Highlights for the process include:

- Moving to a 3-year report cycle from a 5-year cycle with no mid-cycle report. Non-academic program areas felt that more frequency is necessarily for non-academic program areas to focus on continuous improvement.
- Restructuring the report to include 7 sections meant to move program areas through an evaluation process. The final section includes program recommendations and a preliminary implementation plan.
- A revised timeline more aligned to the non-academic program cycle. Programs are notified of their selection for the process on May 1 and submit final reports in April of the following year.
- The inclusion of a peer review process. Other directors will provide feedback to encourage collaboration and increase awareness of program efforts and initiatives.

The first non-academic program areas to participate in the new process were notified of their selection May 1, 2021 and have been participating in a number of professional development workshops as they are writing reports. Final reports for this group will be due April 1, 2022 and Cabinet will meet with each reviewer in early May to discuss strategies for recommendations. At this time the newly formed non-academic program review committee will solicit feedback and consider whether any revisions to the report template are needed. Appendix D includes the full description of the Non-Academic Program Review Process.

Helena College Assessment Database

As documented in detail in the previous ad hoc report, in 2017 Helena College began development of an assessment database that would address the continuing challenge of documenting how, when, and where assessment of student learning occurs and how that data is used to improve teaching and learning. This database has proved to be a valuable tool, not only for tracking student learning assessment efforts, but also for housing documentation from the Academic Standards and Curriculum Review Committee, annual plans, and program reviews. The integration of all processes into a single database allows the College to ensure accuracy of records and establishes relationships among various assessment and curriculum management activities.

The database provides a structure for documenting assessment of student learning at the credential and course level, as well as two options for recording assessment of institutional learning outcomes.

Assessment of credential-level learning outcomes is documented through the mapping of course-level outcomes to credential-level outcomes. This allows the College to easily show where in the curriculum each credential outcome is introduced, reinforced, or mastered. Gaps in the curriculum would be easy to identify. Figure 1 provides an example of a credential-level report, the final version of which is currently in development.

Figure 1 – Sample report documenting assessment of credential outcomes within curriculum

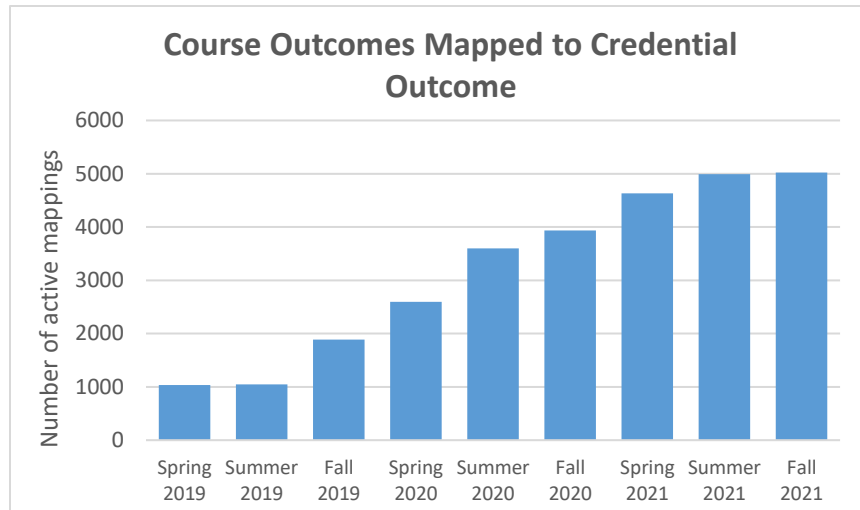
Courses in Program	Credential Outcome 1	Credential Outcome 2	Credential Outcome 3	Credential Outcome 4
1	I	R	M	
2		I	M	
3	I		R	M
4	R	M		
5		I		M

I=introduce R=reinforce M=mastery

Each semester, faculty receive a report of the number of active mappings for each course they teach. This report shows any courses where one or more course outcomes are not linked to a credential outcome, supporting regular review of curriculum. An example of the report is attached as Appendix E.

The value of these reports and the outcome mapping process were discussed in a series of interviews between the chief academic officer/accreditation liaison officer (CAO/ALO) and individual faculty members, conducted in fall 2021. Faculty noted that it provided a much-needed opportunity to review the curriculum and make appropriate changes to ensure credential outcomes are adequately taught and assessed. This process resulted in a substantial review of all academic programs and correction of curricular gaps. Figure 2 shows the increase in course outcomes mapped to a credential outcome. There are currently 254 total credential learning outcomes, and an average of 2185 different course outcomes offered in a term, though a course learning outcome can be mapped to more than one credential outcome, and vice versa. While the number of mappings is expected to level off once all course outcomes have been mapped to credential outcomes, there will be slight variations as curriculum is adjusted, courses offerings change, or programs are added or eliminated.

Figure 2 – Course outcomes mapped to credential outcome, by term.



At the course level, instructors enter at least one planned assessment for each course learning outcome. They also set a success target, which is the percentage of students expected to pass the assessment, indicating successful student learning and appropriate assessment. At the end of each semester, instructors enter the results of their assessments in the database. Faculty are also encouraged to reflect on the results and determine whether or not changes should be made to improve student learning. The process for following through with planned changes is still in development. Figure 3 provides an example of how this information is captured in the database.

Figure 3 – Sample assessment faculty reflection field from database

Edit Section Assessment

Assessment: In Task 3 students must use packages for all classes., Target: 80
 CSCI111 sec:VF

Total Assessed: 15

Total Passed: 13

Assessment Results: Reached target of 80% with 86.67 % passing assessment.

Faculty Analysis:

Faculty Planned Changes:

Select Status: Pending Assessment

As the governing body of the faculty, the Executive Committee of the [Faculty] Senate (ECOS) set the expectation for use of the database to document assessment of student learning at the course level. ECOS determined that all full-time faculty should use the database to record the results for 100% of course outcome assessments in at least 80% of courses taught each term. Reports have been developed to measure individual progress toward fulfilling this requirement. Sample reports are attached as Appendices F and G. The reports are shared with faculty and academic division directors each term and have been incorporated into faculty performance evaluations.

The College made the following efforts to increase usage since the March 2020 mid-cycle accreditation visit:

- Spring 2020: All General Education and Transfer division full-time faculty expected to enter results
- Fall 2020: Additional training provided to Trades division faculty
- Spring 2021: All full-time faculty expected to enter results
- Spring 2022: Developing process for entry of assessment results by adjunct instructors

Figures 4 and 5 show the increase in usage of the database by semester since spring 2019. Figure 4 shows usage at the section assessment level. The number of planned assessments indicates the total number of assessments stored in the database, while the number of section assessments indicates how many assessments were given and how many assessments were completed, or had results and analysis entered. The increase in number of planned assessments indicates that faculty are entering more assessments into the database, while the increase in percent section assessments completed indicates the degree to which faculty are following through and completing the majority of their assessments each term.

Figure 4 – Overall assessment completion rate at the section level, by term

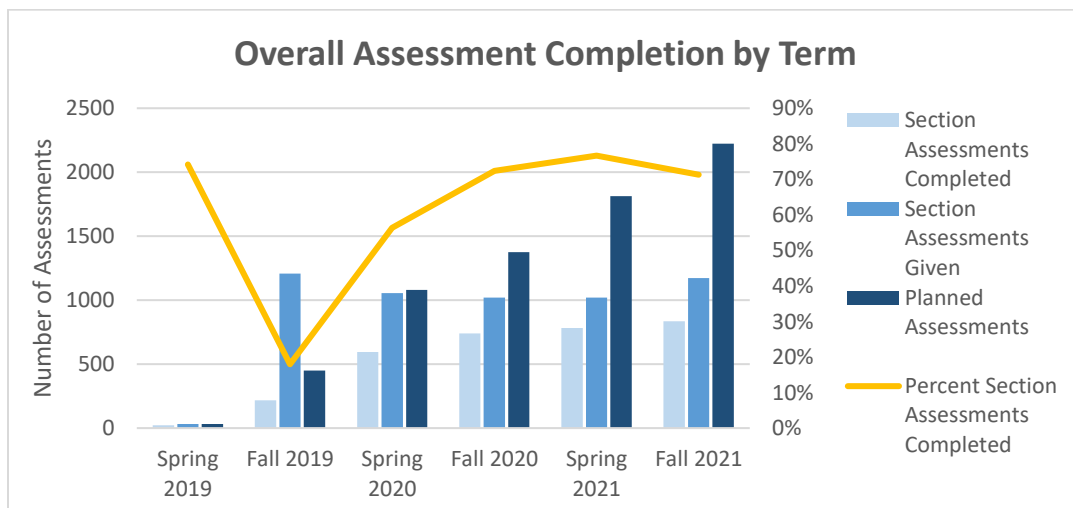
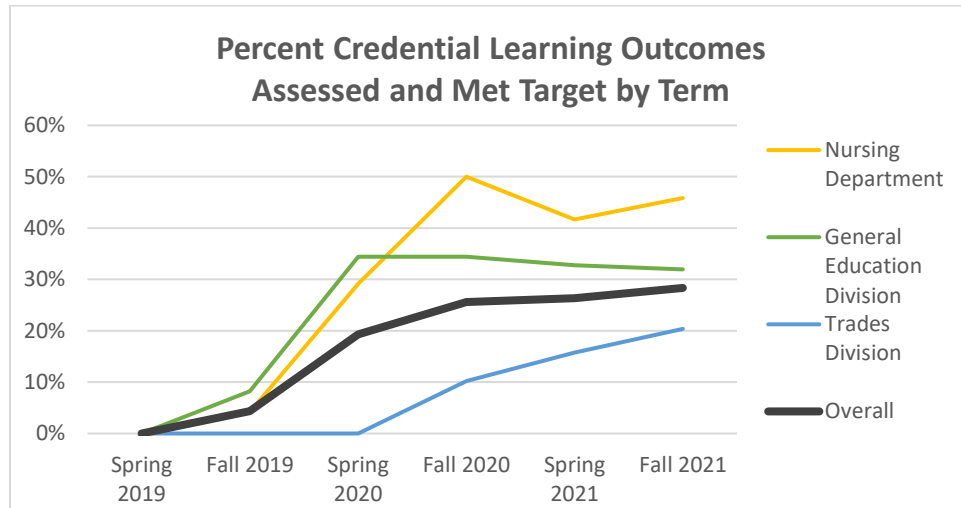


Figure 5 shows the percentage of credential outcomes achieved by students each term, disaggregated by academic division. This metric had been used as a core theme indicator in measuring mission fulfillment, and will likely continue to be a key performance indicator under the new strategic plan. In our 2020 Mission Fulfillment Progress report, the target was 70% of credential outcomes achieved by students in an academic year. Determining an accurate method of measuring this continues to be a

challenge, as some courses are only offered once per academic year, while others are offered every semester.

Figure 5 – Percent credential learning outcomes assessed and met target, by term



During the fall 2021 interviews with faculty, the CAO/ALO used the meeting time not only to understand the credential outcome mapping process, but also to ensure faculty had an understanding of usage expectations, review reports to be included in evaluation process, and discuss benefits of documenting course-level outcome assessments. Faculty indicated they are generally supportive of the process. Faculty found the most value in the ability to review data on student achievement soon after delivering material, while still at the top of their mind, and document needed changes to improve results.

The final level of assessment of student learning is at the institutional level. Helena College has adopted three institutional competencies: diversity, information literacy, and technology literacy. Appendix H provides full definition of each of these. Instructors are able to indicate assessment of these outcomes in two ways. First, an individual planned activity in a course can be marked to indicate that it is also used as assessment of an institutional competency. Alternately, a credential-level outcome can be mapped to an institutional competency. Reporting and analysis of institutional competency assessment is still in development.

The College has made significant strides in documenting assessment of student learning and using that information to improve student learning outcomes, though there is more work to be done. As previously mentioned, the outcome mapping matrix is still in development. In addition to combining data from two terms to populate the matrix, mapping still needs to be done from related instruction courses, such as writing and math, to credential learning outcomes for trades and technical programs. An essential part of the assessment process is using the assessment data to inform academic and learning-support planning. Faculty can document planned changes for an assessment, but the procedure for following up on those has not been completed yet. Adjunct faculty currently do not have access to the database. They will soon be able to contribute their data by completing a form, which will allow support staff to enter information into the database on their behalf. Finally, the College has yet to examine the degree to which institutional competencies are taught and assessed in each program. This is planned for the next academic year.

CONCLUSION

Helena College continues to make improvements to the institutional assessment plan at all levels. Both academic and non-academic departments complete annual plans and program reviews, and methods for measuring mission fulfillment are thoughtfully connected to these efforts. The implementation of an assessment database has provided the tools necessary to produce evidence of review of student learning.

APPENDIX A – DRAFT STRATEGIC PLAN 2022-2027



STRATEGIC PLAN
2022-2027

MISSION STATEMENT

Helena College supports our diverse community by providing the paths and tools necessary to assist learners in achieving their educational and career goals.

VISION STATEMENT

Helena College aspires to empower our students through impactful, affordable, lifelong education that is responsive to the needs of our community in ways that are enriching, collaborative, and equitable.

GUIDING PRINCIPLES

EFFECTIVENESS

We maintain/advance/strengthen institutional effectiveness.

- Maintain and systematically assess a strategic enrollment plan that supports the mission of the college
- Demonstrate that students have learned requisite knowledge and skills relevant to their educational goals
- Promote a culture of collaboration and communication that ensures the College meets its mission
- Utilize research and assessment data to make evidence-based decisions regarding curriculum, instruction, and programming
- Devise and implement performance metrics for assessing institutional progress toward identified goals

Success Targets for 2027

- Target One
- Target Two

STEWARDSHIP

We are good stewards of our resources.

- Procure and allocate resources to support the mission of the college
- Support and encourage professional development in all employees
- Maintain a transparent process for resource prioritization and allocation
- Provide meaningful and rewarding career opportunities and a safe working environment for our employees
- Partner with the Helena College Foundation and other organizations to provide support for our students and our operations
- (Environmental impact?)

Success Targets for 2027

- Target One
- Target Two

IMPACT

We provide impactful educational opportunities that support students and our community

- Construct and maintain academic pathways that enable seamless career transition or postsecondary educational transfer
- Provide relevant and enriching academic programs that address the evolving job market and changing landscape of our diverse communities/students/learners..? Or, just for our students?
- Provide work-based learning and other real-world educational experiences
- Evaluate and respond to ongoing and emerging community educational and workforce needs
- Partner with k12 to provide quality dual enrollment and early college opportunities for high school students
- Promote & Facilitate critical thinking, inquiry, and problem solving.

Success Targets for 2027

- Target One
- Target Two

EQUITY

We focus on providing an equitable environment

- Provide educational access and support for our diverse student population
- Utilize instructional delivery methods that provide access to a wide audience
- Deliver professional development and other trainings to support the increased cultural competency of students and employees
- Foster collaborative partnerships with business, industry, and the broader community
- Ensure hiring practices and student recruitment promote equity and inclusion
- Maintain policies and procedures to provide a school-and-work learning and working environment that is safe and free from harassment
- Pedagogical commitment to ...
- Promote meaningful interactions between students from different cultures and backgrounds.

Success Targets for 2027

- Target One
- Target Two

APPENDIX B –EXAMPLE ANNUAL WORK PLAN REPORT

Annual Work Plans

AY 2020-2021 | Initial Plans

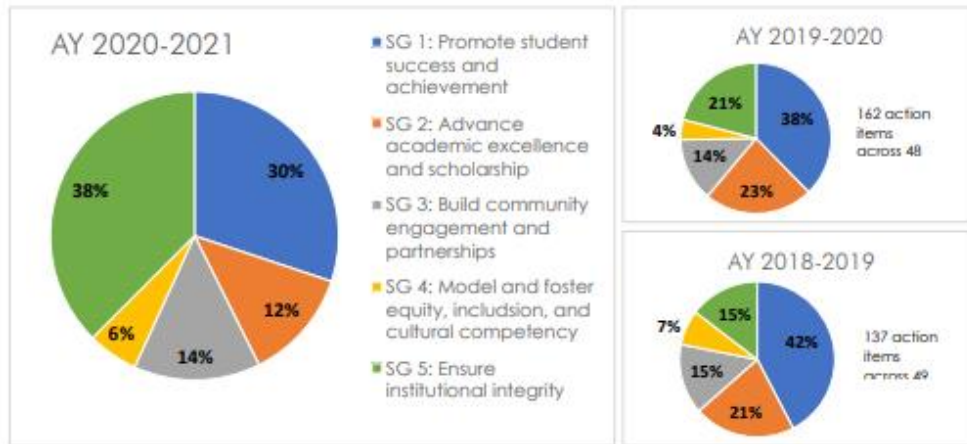


Action Items by Strategic Goal

175 total action items across 51 plans

This year there is a greater focus on strategic goal 5, complemented by a smaller focus on strategic goals 1 and 2. The percentage of plans focusing on strategic goals 3 and 4 has remained relatively consistent. This balance may change as plan developers receive feedback and make adjustments to their selected strategic goals. The shift away from strategic goal 1 may be due to a change in database functionality, which removed strategic goal 1 as the default option, forcing plan developers to open the menu and choose a goal.

Most plans have three action items (average: 3.4).



Annual Work Plans

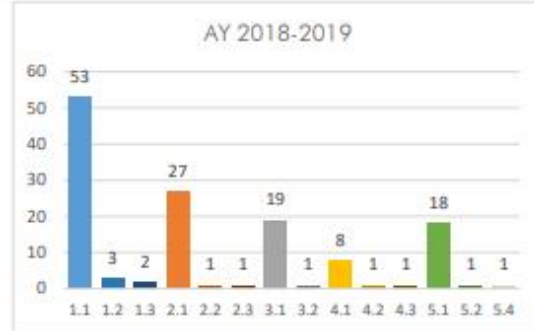
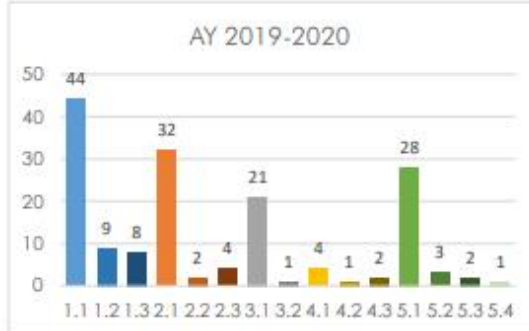
AY 2020-2021 | Initial Plans



Action Items by Strategic Goal Objective

The distribution of selected strategic goal objectives looks very different this year. This is likely partially due to the change in database functionality mentioned in the previous section. After spending a great deal of time suggesting more appropriate objectives to which goals could be aligned in the first two years, the committee spent much less time doing the same task in this year’s review. The committee feels that this year’s distribution is a more accurate representation of the work being carried out at Helena College.

See page 3 for a list of strategic goal objectives.



Cabinet identified the following strategic goal objectives as priorities for AY 2020-2021:

- 2.2
- 2.3
- 3.1
- 3.2
- 3.3
- 5.3
- 5.4

There was a small but noticeable increase in action items focused on these strategic goal objectives.

Annual Work Plans

AY 2020-2021 | Initial Plans



Helena College Strategic Goals

STRATEGIC GOAL #1 – PROMOTE STUDENT SUCCESS AND ACHIEVEMENT

1. Construct academic pathways for undergraduate education that enable seamless career transition or postsecondary educational transfer.
2. Increase educational access and support for a diverse student population through community efforts and collaboration.
3. Promote a culture of collaboration and communication that ensures that the college meets its mission.

STRATEGIC GOAL #2 – ADVANCE ACADEMIC EXCELLENCE AND SCHOLARSHIP

1. Provide relevant and enriching instruction and academic programs that address the evolving job market and global community.
2. Utilize research and assessment data to make evidence-based decisions regarding curriculum, instruction, and programming.
3. Demonstrate that students have learned requisite knowledge and skills relevant to their educational goals.

STRATEGIC GOAL #3 – BUILD COMMUNITY ENGAGEMENT AND PARTNERSHIPS

1. Foster collaborative partnerships with business, industry, and the broader community to enhance workforce development and lifelong learning.
2. Evaluate and respond to on-going and emerging community educational and workforce needs.
3. Expand civic engagement opportunities through work-based learning and other real-world educational experiences.

STRATEGIC GOAL #4 – MODEL AND FOSTER EQUITY, INCLUSION, AND CULTURAL COMPETENCY

1. Ensure that recruitment and hiring practices promote equity and inclusion.
2. Develop a diversity and inclusion action plan with measurable outcomes and ongoing assessment.
3. Deliver professional development and other training to support the increased cultural competency of students and employees.

STRATEGIC GOAL #5 – ENSURE INSTITUTIONAL INTEGRITY

1. Maintain and enhance a transparent process for resource prioritization and allocation that fosters efficient, effective and equitable use of fiscal resources.
2. Procure and allocate resources to support the mission of Helena College.
3. Devise and implement performance metrics for assessing institutional progress towards identified goals.
4. Maintain and systematically assess a strategic enrollment plan that supports the mission of Helena College.



APPENDIX C – ACADEMIC PROGRAM REVIEW PROCESS**ACADEMIC PROGRAM REVIEW**

2021-2026

PROGRAM REVIEW OVERVIEW

- 5-year cycle uses data, annual work plans, and assessment database reports to examine state of program and set goals for upcoming five years
- 2-3 programs reviewed each year
- Program review is an essential function of assessment process and is led by faculty of each academic program with support from various offices on campus
 - Also required for [accreditation by NWCCU](#)
- Reviewers complete report for Academic Program Review Committee (APRC), which is composed of faculty and key employees
- Committee oversees program review process, provides support and training, and evaluates the program reviews
 - Committee proposes a recommendation to (1) continue the program, (2) continue the program with suggested modifications, or (3) discontinue the program.
 - This recommendation is supported by rationale (less than 1 page summary of program review) and submitted to the Board of Regents ([BOR Policy 303.3](#)).
 - Committee also passes determination and rationale Dean's Cabinet for final approval, identifying positions or departments responsible for responding to any requests or recommendations by the program.
- Dean's Cabinet indicates whether or not they agree with APRC determination, providing any necessary feedback.
 - Dean's Cabinet may also provide feedback on recommendations, including responsible parties and strategy.
- IDEA Committee reads program reviews and provides any relevant feedback for faculty to incorporate into final draft.

ACADEMIC PROGRAM REVIEW COMMITTEE (APRC)

Standing committee of Faculty Senate.

- Oversees program review process throughout the year, ensures trainings and data are provided in a timely manner.
- Provides training and support throughout program review.
- Reads program reviews and proposes recommendations to Cabinet. Recommendations include (1) Decision regarding future of program (continue, continue with modifications, or discontinue) and (2) Rationale for decision.
 - In the event a committee member is also scheduled to complete a program review, the committee member will recuse themselves from the recommendation regarding the program's future.

COMMITTEE MEMBERS

- Institutional Researcher
- Director of Business Services
- Executive Director of Enrollment
- Two faculty who participated in program review previous year



ACADEMIC PROGRAM REVIEW

2021-2026

- Determined by volunteers. In the absence of volunteers, faculty will be selected by ECOS of Faculty Senate
- Additional 2 faculty to serve rotating two-year terms
 - Selected by Faculty Senate

TIMELINE

- 6 months to write review (part of fall semester, winter, and part of spring), no faculty involvement over summer, dates are approximate

Date	Event
October 1	Programs notified of upcoming program review
October 15	Faculty complete training with APRC – discuss process, timeline, and content of review
November 1	Deadline for all programs to receive supplemental reports: <ul style="list-style-type: none"> • Annual Work Plan 5-Year Summary (Institutional Research) • Assessment Database Reports (Bryon Steinwand) • Program Snapshot (Institutional Research) • 5-Year Budget Summary (Director of Business Services) • Vector Solutions PD Report (Faculty Development)
February 1	APRC Check-In with Program Reviewers. Deadline for program review authors to schedule and meet with each of the report providers
April 1	Program reviews submitted to APRC
May 1	APRC recommendation and rationale completed.
May 1 to Sept 1	IDEA Committee reads program reviews and provides feedback. Cabinet reads program reviews, indicates agreement with APRC determination, and provides any additional rationale.
September 1	If necessary, Cabinet and faculty reviewers discuss and finalize implementation strategies and responsible parties.
October 15 (approximate)	Final program review report due. Annual Academic Program Review Report (final determination and rationale) submitted to MUS Board of Regents.

REPORT

To be completed within Assessment Database.

- 1) Mission, goals, and objectives
 - a. Program mission statement: will be automatically added to database.
 - b. Describe how the program’s mission aligns with the Helena College mission statement.
 - c. Upload the 3-year annual work plan summary and reflect on the last 3 years of annual work plan goals, including their status and alignment to the strategic plan. Connect any related annual work plan goals and recommendations from your previous program review report.
 - i. AY 2021-22 reviews: last 3 years



ACADEMIC PROGRAM REVIEW

2021-2026

- d. Identify resource needs – including but not limited to, financial, physical, human, or professional development/training. There will be an opportunity to expand on needed resources in Section 5.
- 5) Recommendations
 - a. Recommendation: Based on your program review, identify recommendations and/or goals for the next five years. Use the dropdown menu at the top of the section to add more than one goal.
 - b. Rationale: Elaborate on the supporting rationale for this recommendation. Refer to previous sections of the program review, or to best practices or research, where applicable.
 - c. Success Indicators/Targets: Define your indicators and/or targets for success in accomplishing this goal.
 - d. Needed Resources: Identify human, fiscal, and physical resources needed to implement recommendations, clearly noting which resources your program is currently lacking.
 - e. APRC Response: Academic Program Review Committee will suggest responsible parties and suggest additional strategies for addressing needed resources and accomplishing goals.
 - i. Primary responsible party (required): Select a department.
 - ii. Individual (optional): Enter individual's name.
 - iii. Recommendations will appear in annual work plan for responsible parties.
 - f. Strategy: Outline a preliminary strategy for accomplishing this goal. When necessary, this section may be finalized in collaboration with Dean's Cabinet.
- 6) APRC Committee Determination & Rationale (a & b are for the BOR Program Review submitted in the fall)
 - a. Continue, Continue with Modification, or Discontinue Program
 - b. Supporting rationale for decision
 - c. Any other relevant feedback for the program reviewers, Cabinet, and/or the IDEA Committee
- 7) Dean's Cabinet Feedback
 - a. Approval of APRC Determination
 - b. Conditional if no approval: Rationale for disagreement
- 8) Final determination for BOR Report
 - a. Final determination
 - b. Supporting rationale
 - c. Conditional: if continue with mod or discontinue – determine next steps and responsible party

APPENDIX D – NON-ACADEMIC PROGRAM REVIEW PROCESS



NON-ACADEMIC PROGRAM REVIEW

2021-2024

PROGRAM REVIEW OVERVIEW

- Program review is an essential function of assessment process and is led by directors of programs with support from various offices on campus, also highly encouraged [by NWCCU](#)
- 3-year rotation for completion and review of reports
- Reviewed by peers and IDEA Committee, final report submitted to Cabinet, recommendations are discussed and strategy is finalized collaboratively between program review authors and Cabinet

TIMELINE

12-month process, dates for AY 2021-22

Date	Event
May 1	Programs notified of upcoming program review
May - November	Professional development and workshops
December 3	Draft of Program Review Report submitted for peer review
January 7	Peer review completed
February 4	Second draft of Program Review report incorporating peer review feedback submitted for IDEA review
March 4	IDEA Committee review completed
April 1	Final draft of Program Review Report incorporating IDEA feedback submitted to Cabinet
May 4 (Wed) – May 11	Cabinet meetings with program review authors to finalize strategies for recommendations and identify responsible parties.

REPORT

To be completed within Assessment Database.

- 1) Mission, Goals, Objectives: Using the last 3 years’ annual plans and previous program review report, if available:
 - a. Mission statement: Provide your department’s mission statement and note its alignment to the institution’s mission statement
 - b. Recommendations: Provide a status update for each of the recommendations submitted in your previous program review report
 - c. Narrative: Provide any relevant context to support the discussion of strategic goals.
 - d. Strategic goals: Looking back at your defined goals for the past 3 years, provide a narrative of action items completed and ongoing (tied back to the Helena College Strategic Plan). Please limit your narrative to 300 words and attach annual plan report provided by IDEA committee
 - e. Successes/Strengths: Please highlight successes and strengths for your department for the past 3 years.
 - f. Challenges: Please describe the greatest challenges faced by your department over the past 3 years.
- 2) Procedure for Operation



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- a. Procedures: Please describe any written procedures or other resources that guide the operations of your department. Include resources for both internal and external use. Is there an established timeline or plan for updating these procedures? Have you identified any resources that need to be developed?
- 3) Staff Profile
 - a. Current Staffing: Area staff complete staff profile including name, position/title, FTE, years in position, highest education level
 - b. Changes in Staffing/Staffing Needs: Describe any changes in staffing over the past 3-years, future plans for staffing and critical staffing needs.
 - c. Professional Development: Each employee will complete this section of their staff profile with notable activities in the last three years.
- 4) Organization Context and Impact
 - a. Collaborations and Dependencies: Describe any collaborations and/or dependencies your department has that involve other College personnel, departments, or divisions. Discuss any changes you'd like to see in the nature of these relationships.
 - b. New collaboration: Discuss any relationships that do not currently exist but that would be helpful in reaching your department's goals and objectives.
- 5) Stakeholders, Data, and Assessment
 - a. Primary customers/stakeholders: Who are your primary customers/stakeholders (internal and external)?
 - b. Service to stakeholders: How do you assess your department's effectiveness in fulfilling its mission in relationship to your stakeholders?
 - c. Decision Making Support: Please describe quantitative or qualitative data collected to support decision-making. What data still needs to be collected?
- 6) Budget and Efficiencies
 - a. Provide 3-year budget comparison for program
 - b. Changes in revenue and expenses: Please explain any changes in revenue and expenses over the past 3 years.
 - c. Improved efficiency: How has your department improved its efficiency? What are the impacts of these efforts?
 - d. Resource needs: If your department currently needs particular resources (such as space, equipment, additional funds, etc.), please provide an explanation
- 7) Recommendations and Preliminary Implementation Plan: As a result of this program review, identify 1-5 recommendations for quality improvement or innovation within your department. You will be expected to address these recommendations in your annual work plans.
 - a. Describe the proposed recommendation(s) resulting from this 3-year program review process.
 - b. Success Target/Indicator(s): What will be the successful outcome of this recommendation? Include any measurable targets, where applicable.
 - c. Success Resources: What human, fiscal, and physical resources are needed to implement recommendations?
 - d. Success Strategy: What strategies need to be employed to achieve recommendations and targets? This will be finalized during Cabinet review.
 - e. Primary Responsible Party (required) and Individual (optional):



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NOTES

- Non-Academic Program Committee: Made up of the programs who completed the review process the year prior, as well as the Institutional Researcher, and 2 additional/consistent people to serve 3-year terms.
- Programs selected for the review process will participate in regular professional development/workshops to look something like this:
 - June: Presentation of the Program Review process
 - July: Meeting with Institutional Researcher to brainstorm data needs
 - August: Shared read on data/assessment, evaluating a Mission Statement
 - September: Q&A with Institutional Researcher or any others with assessment background regarding assessment
 - October: Cohort draft/revision exercise
 - November: Group share of draft reports



NON-ACADEMIC PROGRAM REVIEW

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ROTATION

15 programs over a 3-year rotation: Programs are grouped into related areas in an effort to promote meaningful collaboration throughout process.

	Year 1	Year 2	Year 3
Programs Participating in Review	<ul style="list-style-type: none"> • Marketing & Communication • Enrollment Services (Admissions & Records, Recruitment, Advising) • Institutional Research • Financial Aid & Veterans Services • K-12 Partnerships 	<ul style="list-style-type: none"> • Retail Services • Facilities • Business Office • Human Resources • IT Services 	<ul style="list-style-type: none"> • E-Learning and Faculty Development • Library Learning Hub • TRIO (& Retention Initiatives) • Student Life (Includes Disability Resources and Wellness & Counseling) • Community Education Center
Programs with a year off	<ul style="list-style-type: none"> • Retail Services • Facilities • Business Office • Human Resources • IT Services 	<ul style="list-style-type: none"> • E-Learning and Faculty Development • Library Learning Hub • TRIO (& Retention Initiatives) • Student Life (Includes Disability Resources and Wellness & Counseling) • Community Education Center 	<ul style="list-style-type: none"> • Marketing & Communication • Enrollment Services (Admissions & Records, Recruitment, Advising) • Institutional Research • Financial Aid & Veterans Services • K-12 Partnerships
Programs Reading and Evaluating	<ul style="list-style-type: none"> • E-Learning and Faculty Development • Library Learning Hub • TRIO (& Retention Initiatives) • Student Life (Includes Disability Resources and Wellness & Counseling) • Community Education Center 	<ul style="list-style-type: none"> • Marketing & Communication • Enrollment Services (Admissions & Records, Recruitment, Advising) • Institutional Research • Financial Aid & Veterans Services • K-12 Partnerships 	<ul style="list-style-type: none"> • Retail Services • Facilities • Business Office • Human Resources • IT Services

APPENDIX E – MAPPING REPORT: NUMBER OF CONNECTIONS FROM COURSE OUTCOMES TO CREDENTIAL

ShortName	Course	Count Mappings
NRSG135	PHARMACOLOGY FOR PRACTICAL NURSES	0
NRSG136	PHARMACOLOGY FOR PRACTICAL NURSES LAB	6
NRSG140	ADULT HEALTH NURSING	14
NRSG141	ADULT HEALTH NURSING CLINICAL	8
NRSG220	FOUNDATIONS OF ETHICAL NURSING	0
NRSG230	NURSING PHARMACOLOGY	9
NRSG231	NURSING PHARMACOLOGY LAB	7
NRSG244	ADULT NURSING II	10
NRSG245	ADULT NURSING II CLINICAL	11
NRSG256	PATHOPHYSIOLOGY	4
NRSG259	ADULT NURSING III	14
NRSG261	ADULT NURSING III CLINICAL	16

APPENDIX F – OVERALL ASSESSMENT COMPLETION REPORT BY FACULTY MEMBER

Term	Count Courses All Assesments Complete	Count Different Courses	Percent Complete for Term
201970	2	8	25
202030	1	6	16.6667
202070	6	8	75
202130	5	5	100
202130	5	5	100

APPENDIX G – DETAIL ASSESSMENT COMPLETION REPORT BY FACULTY MEMBER

Term	Area	Course	Section	Count Section	Count Section Assessment Met	Count Section Assessment Complete	Section Assessment	Section Assessment Percent Met Target
201970	Nursing	NRSG230	1	4	4	4	100	100
201970	Nursing	NRSG231	1	3	0	0	0	0
201970	Nursing	NRSG231	2	3	0	0	0	0
201970	Nursing	NRSG244	1	3	0	0	0	0
201970	Nursing	NRSG245	1	3	0	0	0	0
201970	Nursing	NRSG256	1	4	0	0	0	0
201970	Nursing	NRSG259	1	4	4	4	100	100
201970	Nursing	NRSG261	1	5	4	4	80	80
202030	Nursing	NRSG135	1	4	0	0	0	0
202030	Nursing	NRSG136	1	2	0	0	0	0
202030	Nursing	NRSG230	1	4	0	0	0	0
202030	Nursing	NRSG244	1	3	0	0	0	0
202030	Nursing	NRSG245	1	3	0	0	0	0
202030	Nursing	NRSG256	1	3	3	3	100	100
202070	Nursing	NRSG140	1	6	3	5	83.3333	50
202070	Nursing	NRSG141	1	5	2	3	60	40
202070	Nursing	NRSG230	1	4	3	4	100	75
202070	Nursing	NRSG231	1	3	3	3	100	100
202070	Nursing	NRSG231	2	3	3	3	100	100
202070	Nursing	NRSG244	1	3	3	3	100	100
202070	Nursing	NRSG245	1	3	3	3	100	100
202070	Nursing	NRSG256	1	3	3	3	100	100
202130	Nursing	NRSG230	1	4	4	4	100	100
202130	Nursing	NRSG231	1	3	3	3	100	100
202130	Nursing	NRSG244	1	3	2	3	100	66.6667
202130	Nursing	NRSG245	1	3	3	3	100	100
202130	Nursing	NRSG256	1	3	2	3	100	66.6667
202150	Nursing	NRSG220	0	6	0	0	0	0

APPENDIX H – INSTITUTIONAL LEARNING OUTCOMES**Helena College Institutional Competencies****Diversity**

The student will learn to recognize and value individual, group and cultural differences from and within local, national and global perspectives and contexts.

- Critically examine the cultural, historical, social, economic, and/or political circumstances that produce and shape different social/cultural systems and communities either nationally and/or globally.
- Identify processes by which identities and notions of difference are constructed, reinforced, and change over time.
- Examine how power structures, oppressions, and privilege shape the conditions of one or more underrepresented groups as well as various strategies and tools for empowerment, equity, social justice, and inclusion.

Information Literacy

The student will learn to locate needed information, managing and evaluating the extracted information and using it critically and ethically.

- Pursue critical inquiry by using authentic questions, curiosity, and a willingness to challenge previously held beliefs in order to make new discoveries.
- Demonstrate persistence, flexibility, and patience in a strategic search for information, while recognizing that it may vary greatly in format, perspective, and value.
- Evaluate content among varied and conflicting perspectives in order to identify authoritative sources.
- Participate actively in scholarly or professional conversation by properly citing past research and accurately representing creators' intended meaning.

Technology Literacy

The student will use appropriate technology to access, manage, integrate, or create information, and/or use technology to effectively accomplish a given task.

- Internet and email: web search, web navigation, send and receive email, email attachments, security, messaging.
- Operating system operations: locating and executing programs, booting, login, updates.
- File management: navigation in OS, create files, folders, copy, delete, rename and upload files, Zip and unzip files, access Flash drive.
- Word processing software basics.
- Presentation software basics.
- Spread Sheet software basics.

Approved by the IDEA Committee – 4/12/2019