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**Policy, Procedures, and Guidelines for the Periodic Review of   
Academic Programs**

**I. Introduction and Overview**

Periodic program reviews provide a mechanism for faculty to evaluate the effectiveness, progress, and status of their academic programs on a continuous basis. It is an opportunity for the department (or program) to evaluate its strengths and weaknesses within the context of the mission of the university and of current and emerging directions in the discipline. For the purposes of program review, a program is defined as a course of study leading to a degree. Academic programs are reviewed at least once every five to seven years. Except for special instances (e.g., interdisciplinary programs), program reviews include evaluation of all undergraduate and graduate programs offered by the unit.

The primary purpose of program review is to improve the program by thoroughly and candidly evaluating:

* Response to action plan/previous recommendations
* Program mission and goals and their relation to the mission and strategic priorities of the institution,
* Status of the curriculum, including changes in the discipline,
* Level of involvement in the assessment of student learning outcomes and plans for future assessment activities, and program improvement based on assessment results,
* Range and quality of research and creative activities,
* Quantity, quality, and diversity of faculty and staff,
* Activities related to student success including advising, retention, and graduation rates,
* Condition of physical facilities, and
* Involvement in outreach and service to the community.

These reviews provide an opportunity for faculty to highlight program strengths and achievements, to identify needed improvements, and to address these needs through long-range plans that will endure through short-term administrative changes or budget crises. Program reviews are integral to planning, resource allocation, and other decision-making within the university. Regular program reviews also allow the university to account publicly for its use of public resources and to develop support among its various constituencies.

At California State University, Fresno, the Dean of the Division of Research and Graduate Studies, or designee, serves as the review officer for graduate programs and the Dean of Undergraduate Studies, or designee, as the review officer for undergraduate programs.

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In order to allow for reflection and input, the program review process is long and involved. The department prepares a self-study for each program under review. A review panel examines the self-study, visits the program, and prepares a report. The department and dean are afforded the opportunity to comment on the review panel’s report. The report and comments are forwarded to the appropriate university-level committee for review. After receiving committee recommendations, the department writes a plan that describes actions to be taken in response to recommendations coming out of the reviews. An action plan meeting is held in which the department, dean, and central administration agree upon priorities and resources for a final action plan.

Refer to "[PROGRAM REVIEW: Procedures & Guidelines for Review of Academic Programs](https://academics.fresnostate.edu/documents/curriculum/Procedures%20and%20Guidelines%20for%20Review%20of%20Academic%20Programs%2012.08.22.pdf)" for further details. All changes made in the procedures & guidelines for program review must be done in consultation with the appropriate program review committee (Undergraduate Program Review Subcommittee or University Graduate Committee) and the revised procedures & guidelines must be sent to the Academic Senate Executive Committee for review (though their formal approval is not required).

**The Self Study**

The self-study examines the current status of the academic program based on its activities and achievements since its last program review. The document should identify strengths and weaknesses in curriculum and instruction; student performance; student learning outcomes activities over the period since the prior review and a student outcomes assessment plan (SOAP) for the period until the next review; faculty contributions in teaching, research/creative activities, and service; resource availability and needs; and special features or services provided by the department. It should serve as a vehicle by which the department, in conjunction with the university, can plan for the future. Goals for program improvement, an action plan to

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achieve those goals, and strategies for measuring progress towards goal achievement should be included. Thus, the self-study should include mechanisms for solving current problems and avoiding projected problems, for building on existing strengths, and for maximizing opportunities that are likely to develop within the discipline in the near future. The allocation of resources is an important matter to all programs.

A self-study coordinator, selected from the department faculty by the department faculty, will oversee preparation of the report. Where a department is undergoing both a graduate and an undergraduate program review, separate self-study coordinators should be selected. All program faculty members should be involved in preparation of the self-study and consulted prior to the preparation of the final draft. Since the department chair is responsible for the content, accuracy, and completeness of the self-study, the chair should continually and actively oversee the preparation of the report. It is the responsibility of the self-study coordinator to meet periodically with the college/school dean to review progress on the self-study, to share the content of the self-study as it develops, and to report to the department faculty the comments and recommendations of the dean.

**IV. Site Visit and Report by a Panel of External Evaluators**



The site visit will be conducted by a team of at least three consultants including an external expert in the discipline under review who has experience with student outcomes assessment in that discipline, a faculty member from within the school or college of the department, and a faculty member from the campus but outside the school or college of the department. The department may elect to include a fourth member of the team representing the alumni, community members, or other accreditation experts. The chair of the academic department, in consultation with the department faculty and the appropriate dean, submits to the program review officer a list of three potential external consultants in each category.

1. **Responses to the Review Panel Report**

The self-study coordinator and chair work together with the faculty to complete a written response to the review panel’s report. The departmental response should be a good faith effort to address each of the issues raised in the report and may also discuss significant changes or developments that have taken place in the program subsequent to the self-study. The departmental response is to be submitted to the college/school dean and the review officer(s) within two weeks after receipt of the visiting panel’s report.

The college/school dean should address the issues raised in the review panel report and the chair’s response. The dean’s response shall be submitted within one week to the chair and to the review officer(s), and distributed for review by the departmental faculty.

1. **University Committee Review**

The campus program review committees will examine the review panel’s report and the departmental and dean’s responses. The program review committees will then interview representatives of the program and the administration as appropriate, and provide one of the following recommendations based on the reports provided:

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| 1. **Recommendation to Approve a Program with Notation of Exceptional Quality**   Approval is recommended without reservation and with a notation of specific areas of program promise and excellence. Programs recommended in this category may be considered for an award for program excellence. These are programs that exhibit special strength in all aspects of the review process and reflect the very best attributes of commitment, quality, and promise.   1. **Recommendation to Approve a Program of Quality and Promise**   Program approval is recommended with identification of specific areas that need to be further developed, and a notation of specific areas of achievement. These programs meet all evaluative measures of quality, but nonetheless could improve in substantial ways (e.g., absence of a strong student recruitment plan.)   1. **Recommendation to Approve a Program for Conditional Continuation**   Conditional approval is recommended with identification of specific areas requiring significant improvement, including the conditions and a reasonable time frame for such conditions to be met in achieving unconditional approval. Conditional continuation is appropriate for a program that fails to meet expected quality standards and for which additional time and/or implementation of planned actions to address these weaknesses could be expected to eliminate such deficiencies without impairing student progress (e.g., the need to obtain space or equipment.)   1. **Recommendation to Suspend a Program**   A recommendation for suspension of a program is appropriate upon receipt of a conditional continuation in the most recent program review and when two conditions occur: (1) when the program fails to meet established standards of quality that insure an appropriate academic experience for students and (2) when there is evidence that these deficiencies may be corrected over a specified period of time. Those standards of quality include but are not limited to a minimum critical number of faculty, a minimum critical number of students, adequacy and frequency of required courses, adequate library holdings, and appropriate physical facilities. Please note that a recommendation to suspend a program could lead to administrative action. Administrative action to suspend a program: (1) places a moratorium on new student admissions; (2) requires students currently in the program be accommodated so that they may complete the program; (3) places a moratorium on reappointment of faculty to graduate faculty status, if pertinent to a graduate program; and (4) removes program catalog copy. The degree title may be retained on the trustee-approved campus Academic Plan. If evidence suggests that the program may be successfully reconstituted at a later date, then conditions to be fulfilled in order to fully reopen the program should be identified along with a process to support the removal of a recommendation for suspension. Note that discontinuation may result if the program is unable to satisfy the conditions for successful reconstitution as identified.   1. **Recommendation to Discontinue a Program**   A recommendation to discontinue a program is appropriate upon receipt of a conditional continuation in the most recent program review and when the program fails to meet established standards of quality that insure an appropriate academic experience for students, and at the same time when there is no evidence that deficiencies have been corrected over a specified period of time. Please note that a recommendation to discontinue a program could lead to administrative action. Administrative action to discontinue a program: (1) places a moratorium on new student admissions; (2) requires students currently in the program be accommodated so that they may complete the program; (3) places a moratorium on reappointment of faculty to graduate faculty status, if pertinent; and (4) removes program catalog copy. A separate process for review of the implications of program termination is implemented. This second and separate level of review follows University policy and includes an assessment of the implications for the University and its service area, faculty, facilities, students, and resources if the program is discontinued. |

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**VII. The Action Plan**

In consultation with the dean, the department chair and/or program coordinator will draft an action plan, providing the following for each issue identified during the review: (1) Proposed action and expected outcome, (2) Cost/resource implications, (3) Source of funds or resources, and (4) Timeline for accomplishing the proposed action. This document will be discussed at a Planning and Implementation Meeting called by the provost or designee and including the chair, college/school dean, review officer(s) and a representative from the site visit team (if requested by the department) to consider all recommendations and comments. The purpose of this meeting is to prioritize the action plan and obtain commitments for any resources needed to achieve the high priority goals. The dean and the provost may propose additional action items. The department may be requested to revise the action plan and another action plan meeting may be called if needed. The finalized action plan is signed by the chair, the dean, and the provost. Each year, a progress report on the items in the action plan will be included in the Department Chair’s Annual Report to the Provost.

**VIII. Abbreviated Campus Program Review of Nationally Accredited Programs**

Programs that complete the national accreditation process through an official accrediting organization, inclusive of a site visit, may undergo an abbreviated campus program review.

The Abbreviated Campus Program Review recognizes the high standards of national accreditation bodies, as well as the extensive work required from program faculty in preparation for the accreditation process. However, it still requires programs to evaluate its strengths and weaknesses within the context of the mission of the university specifically.

Procedure for submission of Abbreviated Campus Program Review

Once the program receives the official letter from the accrediting organization granting national accreditation, the program Chair will notify the Program Review Coordinator. Upon receipt of notification, the Program Review Coordinator will request from the program the documents listed below, to be submitted electronically by the date specified by the Program Review Coordinator, which shall be no later than 6 months after receipt of the letter from the accrediting body granting national accreditation.

The documents to be submitted include:

1. evidence of national accreditation;
2. a copy of the Site Visit Report completed by the accrediting body;
3. a memo pointing to where APM 220 expectations are addressed in the national accreditation documents;
4. an up-to-date SOAP;
5. and a five-year analysis of enrollment trends, graduation rates, and achievement gaps using the latest OIE program review data set as a reference.

Review Process

Upon receipt of the above materials, the Program Review Coordinator will review the documents for content and forward them to the appropriate University Committee (the Undergraduate Academic Program Review Subcommittee or ~~appropriate University Committee (the Undergraduate Academic Program Review Subcommitte~~e ~~or~~ University Graduate Committee). The UAPRS or UGC will review the materials and provide one of the five recommendations in Section VI. Should committee members have any questions about the program, the committee chair will follow up with program representatives. If any issues or concerns remain, the committee will issue recommendations to be considered for implementation in the program’s subsequent five-year action plan, as described in section VII above. Should there be a discrepancy between the recommendations of the outside accrediting agency, the respective University committee, and the department or program, the department or program has the right to formally respond as outlined in other parts of this policy.