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PEPPERDINE
UNIVERSITY

ADVANCEMENT OF
STUDENT LEARNING
COUNCIL (ASLC)

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PROGRAM REVIEW GUIDEBOOK

For Academic Departments

*Improving Educational Programs for
Effective Student Learning*

Academic year 2015-2016

*Portions adapted from the
WASC 2013 Handbook of Accreditation*

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PROGRAM REVIEW: INTRODUCTION

A program review is a systematic process for evaluating and improving academic programs. It is conducted through self-evaluation and peer evaluation by external reviewers, with an emphasis on assessing the quality and degree of student learning within the program. The comprehensive analysis which the review provides and the resulting Memorandum of Understanding are used to stimulate curriculum and programmatic changes and to inform planning and budgeting processes at various levels. The program review cycle occurs every five years.

Program review is a required element in WASC Senior College and University Commission (WSCUC) accreditation and has been a part of Pepperdine's assessment cycle since 2003. While data provides the foundation for effective program review, assessment of student learning, and other quality improvement strategies, the data must be turned into evidence and communicated in useful formats. The program review does this.

When implemented effectively and followed up deliberately, program review is a powerful means for engaging faculty, staff, and administrators in evaluating and improving programs to enhance student learning. The review process is an opportunity to refine a program to meet the changing needs of student learning, retention, curriculum in various disciplines, and student support services. It is also a purposeful opportunity to link decision-making, planning, and budgeting with evidence.

This guidebook provides a framework and resources to help with the review.

GUIDING PRINCIPLES

The process is intended to be meaningful, foremost, for the department and its enhancement of student learning. As a result, the process is flexible in order to serve the needs of both small and large programs as well as academic, co-curricular, and student support programs. The review should be a collaborative process involving faculty, staff, administrators, and students in order to align more effectively the college or department with institutional goals and objectives.

Two guiding principles are embedded in this *Guidebook* and are consistent with WASC Senior College and University Commission (WSCUC) standards:

- ***Ongoing Evaluation of What Students Learn:***
Evidence-based program review includes: a review of program learning outcomes; evaluation of the methods employed to assess achievement of the outcomes; and analysis and reflection on learning results, retention/graduation rates, core competencies, and other outcomes data over a multi-year period.
- ***Quality Assurance, Planning, and Budgeting Decisions Based on Evidence:***
The results of the program review are to be used for follow-up planning and budgeting at various decision-making levels.

PREPARATION FOR PROGRAM REVIEW

The program chair is responsible for the planning of the review. An internal committee or working group should be developed to allocate responsibilities for writing the program review including data collection, writing, and use of resources. It is recommended that a meeting occur between the committee and the Office of Institutional Effectiveness (OIE) to review data needs.

PROGRAM ALIGNMENT WITH THE UNIVERSITY, MISSION, AND INSTITUTIONAL OUTCOMES

Program reviews focus on the meaning, quality, and integrity of a program as it relates to student learning and the mission of Pepperdine:

Pepperdine University is a Christian university committed to the highest standards of academic excellence and Christian values, where students are strengthened for lives of purpose, service, and leadership.

Each department carries out the University mission and institutional learning outcomes (ILOs). The ILOs are formed by two components:

- *Core commitments: knowledge and scholarship, faith and heritage, and community and global understanding*
- *Institutional values: purpose, service, and leadership*

Each basic commitment is seen through the lens of three essential institutional values drawn from the University mission statement: purpose, service, and leadership. These basic commitments should link to measurable objectives as stated in the student learning outcomes (SLOs).

INSTITUTIONAL LEARNING OUTCOMES: STUDENT LEARNING

KNOWLEDGE & SCHOLARSHIP	FAITH & HERITAGE	COMMUNITY & GLOBAL UNDERSTANDING
PURPOSE		
1 Demonstrate expertise in an academic or professional discipline, display proficiency in the discipline, and engage in the process of academic discovery	2 Appreciate the complex relationship between faith, learning, and practice	3 Develop and enact a compelling personal and professional vision that values diversity
SERVICE		
4 Apply knowledge to real-world challenges	5 Respond to the call to serve others	6 Demonstrate commitment to service and civic engagement
LEADERSHIP		
7 Think critically and creatively, communicate clearly, and act with integrity	8 Practice responsible conduct and allow decisions and directions to be informed by a value-centered life	9 Use global and local leadership opportunities in pursuit of justice

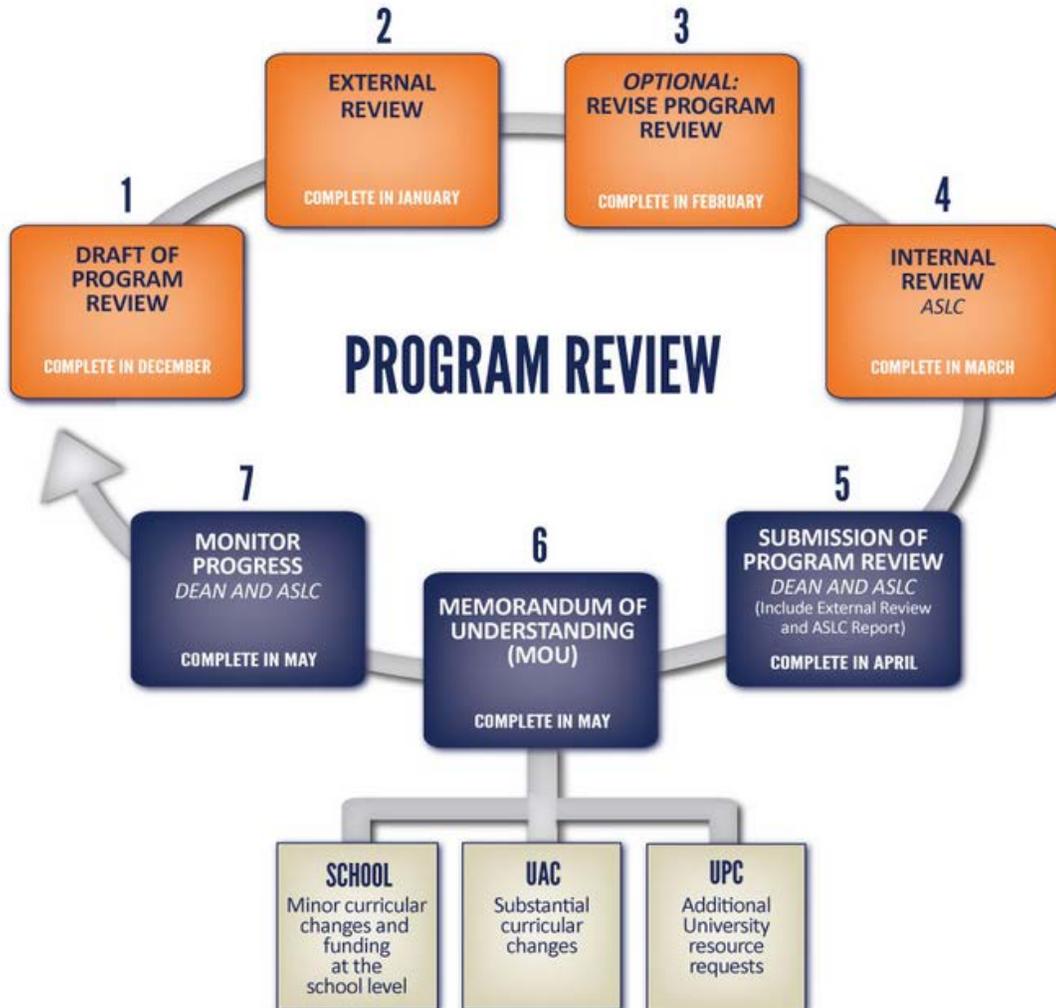
INSTITUTIONAL LEARNING OUTCOMES: LEARNING ENVIRONMENT

KNOWLEDGE & SCHOLARSHIP	FAITH & HERITAGE	COMMUNITY & GLOBAL UNDERSTANDING
PURPOSE		
1 Promote a vibrant, intellectual life that cherishes the liberal arts & graduate/professional education & which exhibits intellectual rigor and practical relevance	2 Focus on the students and their whole development, educating the heart, soul, and mind, consistent with the University's mission and values	3 Integrate principles that embrace human diversity in responding to pressing, real-world problems
SERVICE		
4 Celebrate all forms of scholarship (Boyer 1990), including discovery, teaching, integration, and application	5 Honor God and our heritage by welcoming and serving people from diverse religious, ethnic, and socioeconomic communities	6 Recruit and retain diverse faculty, staff and student body, and reflect the communities served by the university and out of which the university emerges
LEADERSHIP		
7 Provide curricula and co-curricula that are rigorous and relevant to the evolving needs of students	8 Promote strong and meaningful ties with our religious heritage and maintain fidelity to the Christian mission	9 Facilitate dialogue, action, and opportunities for local and global leadership

PROGRAM REVIEW OVERVIEW

STEP	DESCRIPTION
1. DRAFT OF PROGRAM REVIEW Data driven process based on annual assessment and EEIs	The first component of the five-year program review is referred to as a self-study and is conducted by the faculty and/or staff who are directly involved with the program. This process is data driven with the annual assessments serving as the foundation for the program review, as well as retention and enrollment data, and educational effectiveness indicators (EEIs).
2. EXTERNAL REVIEW Peer evaluation	Each program must undergo an external review by distinguished colleagues outside the University who are familiar with the field, discipline, or profession undergoing a program review.
3. REVISE PROGRAM REVIEW Optional	Revisions can be made to the program review at this time based on feedback from the external review team.
4. INTERNAL REVIEW ASLC reviews all program reviews	The internal review process is conducted by the ASLC, a panel of University colleagues, who review and offer feedback on the assessment of learning outcomes. ASLC provides recommendations for program improvement that surface from the program's self-study and the input of the external review team.
5. SUBMISSION OF THE PROGRAM REVIEW	The program review, including the external reviewer team's report and the Quality Improvement Plan, goes both to the Dean and ASLC.
6. MEMORANDUM OF UNDERSTANDING Composed by the Dean Signed by all parties	The Dean and program faculty negotiate a MOU that delineates the agreed up recommendations, plan of action, and timeline for meeting the program needs. The Dean is the primary source for monitoring the agreement. ASLC may request a progress report, prior to the next program review, on the assessment of student learning.
7. MONITOR PROGRESS	The University Planning Committee (UPC) and the President's Cabinet set priorities for planning and budgeting with the Deans. When the program review results in budgetary requests that cannot be funded at the school level, a proposal will then go to UPC for their consideration. If curricular changes are the result of the program review, they must be approved at the school level and then by the University Academic Committee (UAC).

MAJOR COMPONENTS OF THE PROGRAM REVIEW

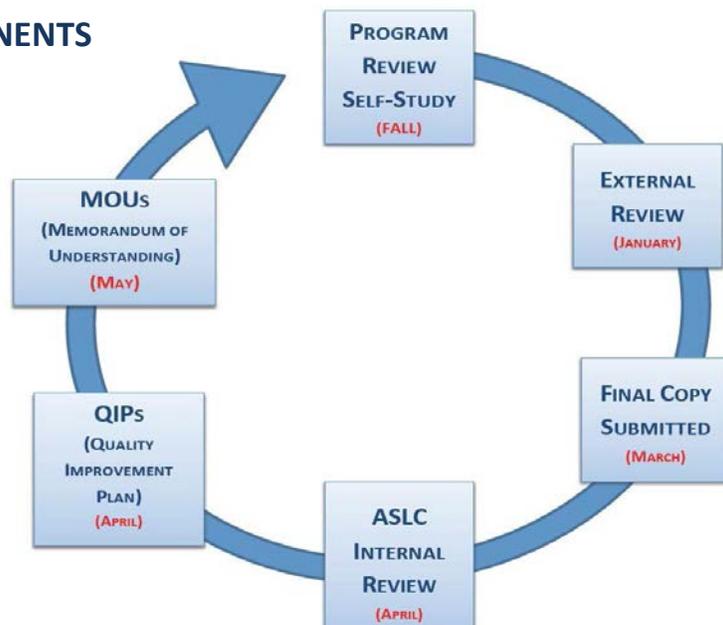


I. OVERVIEW OF PROGRAM REVIEW COMPONENTS

Program review at Pepperdine University is conducted on a five-year review cycle that involves three main components and six steps (see diagram below):

- **SELF STUDY:**
 - An in-depth, internal analysis written by program faculty/staff
 - Department faculty or program staff (for co-curricular and student support services) conduct a departmental self-study within guidelines provided in the *Guidebook*. This portion of the review identifies program strengths and limitations, and suggests solutions to identified problems.
- **EXTERNAL & INTERNAL REVIEWS:**
 - An external review conducted by an outside expert in the field or discipline
 - The *Guidebook* describes how to secure qualified, objective external reviewers, including those with understanding and experience in addressing student learning outcomes assessment. Once the self-study is completed, the external review is organized.
 - An internal review by the Advancement of Student Learning Council (ASLC)
- **CLOSING THE LOOP:**
 - A Quality Improvement Plan (QIP) developed by the department
 - A Memorandum of Understanding (MOU) developed by the dean
 - “Closing the Loop” is used to describe the act of making decisions based on evidence. The most important product of a program review is the advancement of student learning. Therefore, the program review cycle ends by identifying evidence-based changes in the QIP, and then the MOU explains how the plan will be supported and carried out over the next five years.

PROGRAM REVIEW COMPONENTS AND “CLOSING THE LOOP” CYCLE



A. SELF-STUDY

I. INTRODUCTION

Reviews begin with an introduction that provides a context for the review. In contrast to the rest of the self-study report, this portion is primarily descriptive and should reflect the Strategic Plans of the University and of the respective schools. It can include:

A) **THE INTERNAL CONTEXT**

This begins with an overview of the program describing (as appropriate) where the program is situated (school/division), degrees granted, concentrations available, programs offered, and any substantive changes that have occurred as the result of the WASC Senior College and University Commission review. A brief history of the program should follow; this should include a description of changes made in the program since the last review. In this connection, an analysis of course credits should occur. Each course should follow the University's Credit Hour Policy.

Please see page 10.

B) **THE EXTERNAL CONTEXT**

This should explain how the program responds to the needs of the area in which it serves: this can include the community, region, field, or discipline.

C) **MISSION, PURPOSES, GOALS, AND OUTCOMES**

A key component in providing the context for the review is a description of the program's mission (if applicable), purpose, goals, and outcomes.

- There should be a general explanation of why the program exists, what it hopes to achieve in the future, and the program's essential nature, its values, and its work.
- Goals are general statements of what the program wants to achieve.
- Outcomes are the specific results that should be observed if the goals are being met. The program's purpose, goals, and outcomes should relate to and align with the mission and goals of the college and of the University. **See APPENDIX A for aligning course, program, and school/college learning outcomes to the Pepperdine student learning outcomes.**

D) **PEPPERDINE UNIVERSITY CREDIT HOUR POLICY (see next page)**

PEPPERDINE UNIVERSITY'S CREDIT HOUR POLICY



For all Pepperdine programs, including but not limited to the undergraduate, master's, juris doctor, and doctoral levels, for each credit hour (unit) granted, students must have successfully met the academic requirements with an amount of work represented in intended learning outcomes and verified by evidence of student achievement that reasonably approximates not less than:

1. One hour of classroom or direct faculty instruction and a minimum of two hours of out of class student work each week for approximately fifteen weeks for one semester or trimester or the equivalent amount of work over a different amount of time; or
2. At least an equivalent amount of work as required in paragraph (1) of this definition for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours..

The above policy is applicable to all courses offered, regardless of the mode of delivery and/or session length (e.g. full term-length, weekend mode, abbreviated term, face-to-face, hybrid, online, etc.).

*Approved by the University Academic Council
May 2012*

PROCEDURE FOR CHECKING CREDIT HOURS

- Credit hours will be examined for compliance by Department, by School, and by the Registrar prior to the start of each term.
- Official credit hour approval occurs via UAC during new program proposals, changes to programs, changes to courses, and during program review (via UAC and ASLC).
- Exceptions such as Independent Studies and Internships are checked on an ongoing basis by faculty, Division Chair and/or Associate Dean, and Registrar.

University Credit Hour Policy Example Table:

Course #	Course Name	Credits	Hours
Psyc 200	Introduction Psychology	4.00	3.66

II. ANALYSIS OF EVIDENCE

Annual assessment of program outcomes is the primary source of data. This should be supported by indirect data such as surveys of students, alumni, and employers. OIE develops relevant annual data reports on student retention, enrollment, graduation, and indirect assessments from student surveys that are housed both on their website and on **Seaver College's Sakai/Courses Assessment Site**.

Additionally, departments may request further data from OIE.

Program-specific outcomes are assessed annually by analyzing data or evidence of student learning. OIE offers many online assessment resources for both annual assessments and program review: OIE.pepperdine.edu

The WASC Senior College and University Commission Redesign of 2013 has streamlined its Institutional Review Process (IRP) in order to focus "more specifically on improving student learning and issues specific to the institution." Program reviews will continue to focus on student learning and will incorporate the WASC categories of:

- **Student Success: Student Learning, Retention and Graduation**
- **Degree Programs: Meaning, quality, and integrity of degree programs**
- **Sustainability: Financial Viability; Preparing for Changing Higher Education Environment**
- **Core Competencies : undergraduate and graduate degrees**

A) **STUDENT SUCCESS**

In this category, the program is asked to provide data and analysis on graduation and retention data disaggregated for sub populations for the past five years. What is the profile of students in the program and how does the profile relate to or enhance the purpose and goals of the program?

- Data in this category might include students' gender, ethnicity, age, GPA, standardized test scores, and employment status.
- The specific list of indicators in this category will depend on the goals and nature of the program. Evidence should include student retention and graduation rate trends (disaggregated by different demographic categories like race, gender, first-generation students, etc.). OIE provides this data annually and houses the reports on the OIE website. For Seaver College the data is also housed in Seaver College's Sakai/Courses Assessment Site.

B) **MEANING, QUALITY, AND INTEGRITY OF THE DEGREE**

The university is required to define and ensure a distinctive and coherent educational experience for each of its degree programs. The findings from the program assessment and analysis process should explain "how effectively courses, curricula, the co-curriculum, and other experiences are structured, sequenced, and delivered so that students achieve learning outcomes at the expected levels of performance in core competencies in their majors or fields of specialization, in general education, and in areas distinctive to the institution. It means ensuring alignment among all these elements, and maintaining an assessment infrastructure that enables the institution to diagnose problems and make

improvements when needed.

Not least of all, it means developing the language to communicate clearly about the degree—what it demands and what it offers—to internal and external audiences” (2013 WSCUC Accreditation Handbook.)

1. *Meaning of the Degree:*

Describe how the program ensures a holistic experience by answering the following questions about the coherence and alignment within the program:

- What are the learning outcomes, curricular maps, and general education outcomes?
- How does the degree support the institutional mission and institutional learning outcomes?
- How does the degree embody the distinct values, basic commitment, and traditions of the institution? These are embodied in the Pepperdine mission.
- How do these outcomes flow from the mission?
- Is there a coherent, aligned sequence of learning opportunities?
- Does the degree offer sufficient breadth and depth of learning for this particular major or program?
- How current is the program curriculum?
- How does the program ensure that graduates meet the five core competencies of the WASC standards and other general education requirements? (Seaver)

Evidence in this category should include:

- a. A description of how the curriculum has changed (if at all) over the last five years including the reasons for the change (e.g., the result of a learning outcome assessment) and evidence used as a basis for change.
- b. A comparison of the program’s curriculum with curricula at selected other institutions and with national disciplinary or professional standards if available. Also consult the Lumina Degree Qualifications Profile. This comparison should occur in the form of benchmarking.
- c. Measures of effectiveness (e.g., course evaluations, peer evaluations of teaching or implementing, scholarship on issues of teaching and learning, formative discussions of pedagogy among faculty, survey measures, participation rates, and student satisfaction surveys).

2. *Quality and Integrity of the Degree:*

In meaning of the degree (#1) student learning outcomes and curriculum matrixes

were used to define the degree. Now please describe the processes used to ensure the quality and rigor of the program.

- Describe the practices which enrich the learning experiences such as co-curricular experiences including service learning, research opportunities, internships, and other high-impact practices.
- How intentional are the co-curricular experiences which are provided and how are they integrated into the curricular plan? How are these assessed? How challenging are the standards for assessment?
- What are the explicit expectations of performance for the graduates?
- Are the graduates achieving those outcomes at the expected level of learning, and how is the expected level determined? What level of proficiency is expected?
- Is there assurance that students consistently meet the standards of performance that the major has established? What happens to students that don't meet the standards?
- How do you know your expectations are appropriate? Do you use comparisons based on national standards or benchmarking.
- How have your assessment findings supported this?
- Also consider how well the data regarding student learning is communicated to both internal and external audiences?

Evidence in this category should include:

- a. Direct student learning examination of how well students are meeting the program learning outcomes which should come from the past four years of annual assessments.
- b. Indirect assessments of student learning in the program which could be a combination of quantitative and qualitative measures. OIE will provide annual reports on national surveys of student attitudes and perceptions
- c. Ongoing efforts by the program to "close the loop" by using assessment results for changes to curriculum and pedagogy which should include proposals submitted to the University Academic Council.
- d. Placement of graduates into graduate schools or jobs.
- e. Graduating student satisfaction surveys (and/or alumni satisfaction surveys). Refer to OIE's website.
- f. Student/Alumni achievements (e.g., community service, research and publications, awards and recognition, professional

accomplishments)

In summary please explain how, through the findings in the annual assessments, the program has achieved a holistic evaluation of the educational experience that is supported through benchmarking. (Has the program been reviewed by external stakeholders, such as practitioners in the field, or compared with other similar institutions, or national standards?)

C) FACULTY AND STAFF

What are the qualifications and achievements of the faculty/staff in the program in relation to the program purpose and goals? How do faculty/staff members' backgrounds, expertise, research, and other professional work contribute to the quality of the program?

Evidence in this category should include:

- a. Proportion of faculty with terminal degrees
- b. List of faculty/staff specialties within discipline (and how those specialties align with the program curriculum)
- c. Record of scholarship for each faculty member, professional presentations for staff members
- d. Faculty/staff participation in development opportunities related to teaching, learning, and/or assessment
- e. External funding awarded to faculty/staff
- f. Distribution of faculty across ranks (or staff years at institution)
- g. Diversity of faculty/staff

D) SUSTAINABILITY: EVIDENCE OF PROGRAM VIABILITY

With the rapid changes in the higher education environment, the University needs to demonstrate how financial viability and planning their long-term stability are ensured. In order to demonstrate this, each program should address questions about the level of student demand for the program and the degree to which resources are allocated appropriately so they are sufficient to maintain program quality.

1. *Demand for the Program:*

What are the trends in numbers of students who are admitted into the program and the numbers of students who graduate in the program?

What is happening within the profession, local community, or society generally that identifies an anticipated need for this program in the future? (If appropriate include market research.)

2. *Allocation of Resources:*

Faculty/Staff – Are there sufficient numbers of faculty/staff to maintain program quality? Do program faculty/staff have the support they need to do their work?

- a. Number of full-time faculty (ratio of full-time faculty to part-time faculty)

- b. Student-faculty ratio
- c. Faculty workload
- d. Faculty review and evaluation processes
- e. Mentoring processes
- f. Professional development opportunities and resources (including travel and research funds)
- g. Sufficient time for research, program development

3. Student Support and Co-curricular Experiences:

(Comment as appropriate on the extent to which these co-curricular or student support services are used to support the program learning outcomes.) Be sure to consider data that OIE can provide regarding programs in Student Affairs.

- a. Academic and career advising programs and resources
- b. Tutoring, supplemental instruction, and teaching assistants
- c. Orientation and transition programs
- d. Financial support for obtaining scholarships, fellowships, teaching assistantships, etc.
- e. Support for engagement in the campus community
- f. Support for emotional and psychological variables of success
- g. Support for research or for engagement in the community beyond the campus, such as fieldwork or internships
- h. Attention to legal and ethical issues (FERPA, HIPAA, etc.)
- i. Spiritual development programs and opportunities
- j. Multicultural opportunities which support diversity
- k. Plays, musicals, art exhibits, and lectures
- l. Service opportunities
- m. Internships
- n. the Sophomore Experience
- o. Study Abroad

4. Facilities:

- a. Classroom space
- b. Laboratories
- c. Office space
- d. Programming venues
- e. Student study spaces

5. Financial resources:

Operational budget (revenues and expenditures) and trends over a 3-5 year period

E) WASC CORE COMPETENCIES (REQUIRED FOR SEAVER COLLEGE)

General Education:

- How do the students in the program meet the learning outcomes of the general education program including the WASC Core Competencies?

This should include the standards of student performance expected for a Pepperdine University student at graduation. Although it is not required, programs would benefit from external perspectives and collaboration with other institutions through benchmarking or use of comparative data.

III. SUMMARY AND REFLECTIONS

A) Preliminary Quality Improvement Plan: Goals, Actions, and Plans Based on Initial Self-Study

Self-study reports conclude with a section devoted to future planning and improvements (action items). Findings from all prior sections of the report serve as evidence for the action item so to strengthen the program. This section should address goals for the next few years and how the program will achieve the goals through planning and evaluation. Consideration should be given to resource-neutral ways or re-allocation of resources for improving the program as well as a review of current internal resources and improvements that could only be addressed through additional resources.

This portion of the self-study report interprets the significance of the findings in the above analysis of program evidence. Its purpose is to determine a program's strengths, weaknesses, and opportunities for improvement. This section should include WASC Exhibit 7.1/5.1 (see **APPENDIX B**).

Conclusions drawn in this section could answer some or all of the following questions:

- Are the curriculum, practices, processes, and resources properly aligned with the goals of the program?
- Are department/program outcomes aligned with the institutional learning outcomes (ILO's)?
- Is the level of program quality aligned with the school/University's acceptable level of program quality? Aligned with the constituents' acceptable level of quality?
- Are program goals being achieved?
- Are student learning outcomes being achieved at the established standard of achievement? What are you using for comparison/benchmarking?

This section will serve as the foundation for the program's Quality Improvement Plan (QIP) after the

external review and internal reviews have been completed

B. THE EXTERNAL REVIEW

I. GUIDELINES FOR ORGANIZING THE EXTERNAL REVIEW

The external review typically occurs after a program or department completes its self-study report, but the selection and invitation of external reviewers can occur during the self-study process to ensure the availability of the best reviewers. However, programs with concurrent accreditation (e.g., AACSB, APA, ABA) can use the visiting team for that discipline-specific accreditation as the external review. The report from the site visitors should be included in the final report. For an illustration of potential areas for the reviewers to consider, see **APPENDIX C**.

II. CHOOSING REVIEWERS

The size and composition of the review team can vary, depending on the size of the program under review. Usually, the team involves one or two people. At the time a department or program is notified that it will be conducting a program review, appropriate individuals should submit a list of names of possible reviewers. These reviewers should be external to the school/University. External reviewers should be distinguished scholars/teachers/practitioners in the field and be familiar with campuses that are similar to Pepperdine University and the program undergoing review. It is also helpful for external reviewers to have had experience with program administration and with program assessment. At least one of the reviewers should be experienced with student learning outcomes assessment in order to review and analyze the program's assessment processes and results.

III. MATERIALS FOR THE EXTERNAL REVIEW TEAM

At least 30 days prior to the scheduled department visit, the information from the program self-study and appropriate additional materials are sent to each member of the external review team. An identical information package should be provided to appropriate members of the administrators overseeing the program. The reviewers should compile a report that includes observations, strengths, weaknesses, and recommendations based on evidence.

IV. CATEGORIES FOR EVALUATION

- Curriculum
- Faculty
- Resources
- Viability

V. EXTERNAL REVIEW TEAM VISIT AND REPORT

The review team visit typically lasts for two days, during which time the review committee members meet with department faculty, academic advisors, students, and select administrators. The review team typically takes part in an exit interview just prior to concluding its departmental visit.

The team is expected to submit its written evaluation to the campus program review committee as soon as possible after the visit. The written evaluation should include a review of strengths and challenges, resource allocation, and program viability as well as suggestions for policy and resources. Upon submission of the report, off-campus reviewers receive a previously agreed upon stipend and travel

expense reimbursement (to be determined by the department under review).

As soon as the program receives the report from the external review team, it is distributed to the appropriate individuals. The department is typically asked to review the report (within a brief time period) for factual inaccuracies and misperceptions. To maximize the effectiveness of program review, the findings and resulting decisions should be shared with all of the stakeholder groups. Such sharing of findings generates buy-in to the program's and/or institution's goals. To facilitate and track the implementation of improvement plans, each year the relevant faculty members should review the progress of programs reviewed in previous years. If the department/program was not successful in implementing all aspects of the plan, they may follow up with their appropriate administrative unit regarding resource allocation or other barriers involved in preventing successful implementation.

C. THE INTERNAL REVIEW

After the completion of the self-study, external review, and preliminary QIP, the Assessment of Student Learning Council (ASLC) evaluates the report for overall quality. Feedback for improvement is given using the following criteria:

- a. mission and learning outcomes alignment
- b. quality of student learning outcomes, and educational effectiveness indicators
- c. quality of evaluation methods
- d. degree to which evidence is used to inform conclusions (**APPENDIX D**).

D. FINAL REPORT: QUALITY IMPROVEMENT PLAN (QIP)

For the Quality Improvement Plan, the program should extract from the "preliminary quality improvement goals and action plan" of the self-study (section A.III) as well as from both the external and internal review recommendations.

The following prompts may be helpful in considering your QIP:

- a. How have the results of program review been used to inform decision-making and improve instruction and student learning outcomes?
- b. What was identified in the process of examining the institution's program review process that may require deeper reflection, changes, and/or restructuring? What will be done as a result? What resources will be required?
- c. What have the reviewers learned as they carried out assessments of student learning? How have assessment protocols, faculty development, choices of instruments, or other aspects of assessment changed as a result?

Many of the changes that occur following program review are related to curricular adjustments that are, in essence, resource neutral. Program faculty or staff should make note of the ways that they used data to make decisions. Changes that are outside the control of the program or need additional support should be noted and reviewed by the dean in the final section, the Memorandum of Understanding (MOU).

E. CLOSING THE LOOP: MEMORANDUM OF UNDERSTANDING

The Memorandum of Understanding (MOU) should establish the guidelines, expectations, and plans for program improvement over the next five years. The dean should use the data and evidence in the entire report to develop an MOU which will serve as an agreement between the program reviewers and the dean regarding future actions that will occur as a result of the review. This MOU will be signed by representatives from the program and the dean.

Depending on the identified needs, one of five actions might occur:

- a. if the program and dean determine that more data are required prior to proposing a plan of action, the particular action item may remain in the school;
- b. in cases where the dean has sufficient funds to address program-related issues and such actions do not involve substantial curricular changes, again, the action item may remain in the school;
- c. for major curricular changes that are resource-neutral, the action item will require UAC review and approval;
- d. for major curricular changes that require resources, the action item would be sent to both the UAC and UPC for review and proposal; and
- e. for program related issues that require additional resources but do not involve substantial curricular changes, the action item would be sent to the UPC for review and approval. Faculty and staff track progress and report back to the dean. In the event the action item requires UAC or UPC review, the dean would be required to provide an annual progress report to the appropriate council/committee.

Copies of the final program review report should be organized in a single electronic copy and sent to OIE for archiving.

F. UNIVERSITY ACADEMIC COUNCIL REPORT

Programs should submit to UAC:

- a. The major strengths and weaknesses identified in the Program Review's Quality Improvement Plan (QIP). Please identify and cite the evidence that supports your answer.
- b. A list of the program goals established for the next five years (please list in order of priority, the most important goal first). Please cite the evidence that

supports your answer.

Other documentation available to the UAC:

1. Program Reviews: found on the OIE web site
2. QIP: Upon Request
3. External Reviewers Report: Upon Request
4. MOU: Upon Request

G. GLOSSARY OF TERMS

Alignment – The alignment process connects dimensions of the University that support achievement of goals: Student Learning Outcomes reflect and advance Program Learning Outcomes which reflect and advance Institutional Learning Outcomes.

Advancement of Student Learning Council (ASLC) – the University-wide group which oversees the assessment process for the entire University; there is one representative from each school. The Associate Provost for Assessment and Institutional Effectiveness serves as an *ad hoc* member.

Assessment Plan – The assessment plan is a schedule for examining the PLOs, including the type of evidence and who is responsible for conducting the review and closing the loop. A program should rotate through assessment of all of its PLOs in a 5-year cycle.

Authentic Evidence – Authentic evidence refers to assessment which measures a student's ability to apply his or her knowledge in real world applications and involves having experts outside the University evaluating the student's knowledge--as in an internship--rather than using an academic construct such as a test. See: <http://jfmuller.faculty.noctrl.edu/toolbox/whatisit.htm#definitions>.

Benchmarking – This involves using comparisons to make meaning of empirical data. When you're benchmarking, you don't just look at a given number, say, 68% graduation within 6 years; you look at it *in comparison* to some standard that helps you to decide how good or bad your number is: say, in comparison to your in-house goal of 85% graduation in 6 years, or the 75% graduation rate of peer institutions. A benchmark is a point of reference.

Capstone – The capstone is a culminating project or experience that generally takes place in the student's final year of study and requires review, synthesis, and application of what has been learned over the course of the student's college experience. The result may be original research, an innovative design, an art exhibit, or a performance. The capstone can provide evidence of assessment of a range of outcomes.

Closing the Loop – This is an iterative ongoing four-step process: 1. defining learning outcomes, 2. choosing a method or approach and using it to gather evidence of learning, 3. analyzing and interpreting the evidence, 4. using this information to improve student learning. The cycle must be completed and repeated to see whether the changes have produced the desired result.

Core Competencies – Graduating students should demonstrate mastery in five areas: written and oral communication, quantitative reasoning, critical thinking, and information literacy.

Curriculum Map – This is a map outlining the Program Learning Outcomes promoted by each course in the discipline. “**I**” indicates courses that *introduce* the PLO, “**D**” indicates courses that *develop* the PLO, and “**M**” indicates courses that result in a *mastery* of the PLO.

Direct Evidence – Evidence gathered from a performance-based observation or sampling of student work. *Example:* using a rubric to evaluate the quality of student papers. Direct evidence may include locally-developed tests, performance appraisal, oral examinations, simulations, behavioral observations, portfolios, external examinations of student work, and other course activities assessed with rubrics.

Diversity – Diversity involves multiple perspectives and the representation and recognition of people of different backgrounds and points of view in the various constituencies of the university: students, faculty, staff, and administration.

Educational Effectiveness Indicators – EEs are also known as educational performance indicators and are a list of direct and indirect ways in which the University examines student learning.

External Review – The review of the program which is conducted by an outside expert in the field or discipline. The external reviewer is selected by the program reviewers.

High-Impact Practices (HIPs) – HIPs include first-year seminars, writing-intensive courses, collaborative assignments, undergraduate research, service learning, internships, capstones, and international programs.

Indirect Evidence – Evidence that assesses the perceptions of students or faculty. This evidence may be collected through student surveys, questionnaires, focus groups, archival records, interviews, and other indirect methods. *Example:* using a survey to assess how students perceive the quality of your discipline’s writing curriculum.

Institutional Learning Outcomes (ILOs) – The specific knowledge or skills students should actually acquire/develop through their educational experience *while at Pepperdine University*. These should be broad and general so that a wide variety of Program Outcomes can relate to each.

Internal Review – The review of each program review report which is conducted by the Advance of Student Learning Council (ASLC).

Inter-rater Reliability – This is a group activity used to calibrate or norm a rubric; this means that each member of the group applies the rubric to evaluate a product or behavior; then the members of the group compare judgments and discuss the basis of the judgments; the goal is to achieve consistency in applying standards.

Memorandum of Understanding (MOU) – The MOU is developed by the dean as a part of “Closing the Loop” and outlines the guidelines, expectations, and plans for program improvement over the next five years.

National Survey of Student Engagement (NSSE) – This is a nationally normed, widely administered survey that asks students about their behaviors: how often they ask questions in class, use the library, consult a professor outside of class, and how many hours they study. This does not assess learning directly.

Norming – In assessment of student learning norming is a process of training rater to use rubrics to evaluate student products and performances consistently.

Numerical Expectations – A quantitative measure used to indicate whether student work exceeded, met, or fell below expectations. This expectation is set prior to the assessment and used to evaluate the results in the findings section. *Example:* stating in the introduction that the discipline expects to see 85% of its students writing at a level of “satisfactory” or above.

Program Learning Outcomes (PLOs) – The specific knowledge or skills students actually acquire/develop through their educational experience in *a particular disciplinary program or major*. These should align with the Institutional Learning Outcomes and the Student Learning Outcomes should align with them.

Quality Improvement Plan (QIP) – is developed by the program which is being reviewed and is based on the evidence-based changes which grow out of the review including the recommendations of both the external and internal reviewers.

Rubric – A rubric is a simple assessment tool for measuring student work by classifying statements or behaviors into categories along a continuum. It is a scoring guide that evaluates a student's performance based on a full range of criteria rather than a single numerical score. When administering rubrics, it is ideal to use multiple raters and to establish inter-rater reliability among raters. For sample rubrics and a rubric generator go to: [WASC Rubrics](#).

Student Learning Outcomes (SLOs) – The specific knowledge or skills students actually acquire/develop through their educational experience in *a particular course*. These appear on the syllabi and should be aligned with the Program Learning Outcomes.

University Academic Council (UAC) – The UAC is the chief policy-making body for academic procedures, policies, and requirements in the schools. It reviews proposals submitted by the academic council of a particular school for changes or additions to the curriculum, graduation requirements, and general academic policies.

University Planning Committee (UPC) – The UPC is the body responsible for coordinating university-level assessment, planning, program review, and resource allocation processes.

H. REFERENCES

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WASC WSCUC Redesign of 2013 Lumina Degree Qualifications Profile

Lumina Degree Qualifications Profile Document

APPENDIX A

Sample Alignment Map for Academic Departments

School: _____

Program: _____

Institutional Values	Core Commitments	Institutional Learning Outcomes (ILOs)	School/ Division Learning Outcomes	Program Learning Outcomes (PLOs)	Course Name and Number	Course Outcomes
Purpose	Knowledge and Scholarship	Demonstrate expertise in an academic or professional discipline, display proficiency in the discipline and engage in the process of academic discovery.				
	Faith & Heritage	Appreciate the complex relationship between faith, learning and practice.				
	Community & Global Understanding	Develop and enact a compelling personal and professional vision that values diversity.				
Service	Knowledge & Scholarship	Apply knowledge to real- world challenges.				
	Faith & Heritage	Respond to the call to serve others.				
	Community & Global Understanding	Demonstrate commitment to service and civic engagement.				
Leadership	Knowledge & Scholarship	Think critically and creatively communicate clearly, and act with integrity.				
	Faith & Heritage	Practice responsible conduct and allow decisions and directions to be informed by a value-centered life.				
	Community & Global Understanding	Use global and local leadership opportunities in pursuit of justice.				

APPENDIX B

WASC Table 7.1/5.1 Educational Effectiveness Indicators

(1) What are the formal learning outcomes?	(2) Where are these learning outcomes published? (Please specify)	(3) Other than GPA, what data/evidence is used to determine that graduates have achieved stated outcomes for the degree? (e.g., capstone course, portfolio review, licensure examination)	(4) Who interprets the evidence? What is the process?	(5) How are the findings used?	(6) Date of last program review for this degree program

APPENDIX C

Pepperdine University-External Review Summary Sheet					
Program:		Date of Review:			
School:					
<p>Instructions: Please complete this summary sheet at the end of your site visit and submit it to the Chairperson or the Director before the exit interview. The summary sheet will assist you in identifying key areas (strengths and improvements needed) to address in your final report.</p> <p>Please rate the following program review criteria using the following: E= Exemplary S= Satisfactory N= Needs Improvement U= Unclear/need more information</p>					
1. PROGRAM LEARNING OUTCOMES		E	S	N	U
1.1 The program student learning outcomes reflect the most important skills, knowledge, and values of the discipline/profession.					
1.2 The criteria and standards of achievement for the program student learning outcomes adequately match disciplinary and professional standards.					
1.3 Based on your review of student work samples and annual learning results reports, student achievement of the program student learning outcomes is adequate for the degree and discipline.					
1.4 The assessment plan is appropriate and the assessment practices are yielding the needed information to determine how well students are learning the program student learning outcomes.					
1.5 Do you recommend any changes to enhance student achievement or program assessment of the PLO's? If so, please explain and advise.					
2. CURRICULUM		E	S	N	U
2.1 The current curriculum content is appropriate to the level and purpose of the program.					
2.2 The design of the curriculum is adequate (required depth and breadth of study, flow of courses, frequency of course offerings, overall coherence, alignment with desired learning outcomes, etc.) to enable students to develop the skills and attain the outcomes needed for graduates of this program.					
2.3 The program clearly outlines program requirements and offers courses regularly to ensure timely completion of the program.					
2.4 Do you recommend any changes to enhance the curriculum (content, design, course availability, etc.)? If so, please explain and advise.					
3. STUDENT EXPERIENCES AND LEARNING ENVIRONMENT		E	S	N	U
3.1 Students are satisfied with the overall quality of their learning experience.					
3.2 Students are adequately supported through the curriculum and advising to ensure their learning success.					
3.3 Class size levels are appropriate to enable student learning.					
3.4 The program provides adequate opportunities for internships, field experiences and undergraduate research, as appropriate.					
3.5 Student support services are adequate and supportive.					
3.6 Do you recommend any changes to improve student experiences and learning					

environment? If so, please explain and advise.				
4. FACULTY QUALITY	E	S	N	U
4.1 Faculty competencies/credentials are appropriate for the discipline and degree.				
4.2 Faculty specialties correspond to program needs and to the concentrations in which they teach.				
4.3 The system for evaluating teaching practices facilitates continuous improvement of teaching and learning throughout the program.				
4.4 Faculty are adequately supported and engaged in ongoing professional development necessary for staying current in their field and continuously updating their courses/curriculum.				
4.5 Do you recommend faculty changes (qualifications, expertise, teaching practices, professional development, etc.) to enhance program quality and student learning? If so, please explain and advise.				
5. DIVERSITY	E	S	N	U
5.1 The program demonstrates a commitment to diversity in its curriculum, student and faculty composition.				
5.2 Do you recommend changes to the commitment of diversity? If so, please explain and advise.				
6. PROGRAM ADMINISTRATION SUPPORT	E	S	N	U
6.1 The library and student support resources are current and adequate to meet student and faculty needs.				
6.2 The laboratory facilities and support are adequate to meet student and faculty needs.				
6.3 The program has accurately identified and prioritized the program's most pressing resource needs.				
6.4 The program's student recruitment and retention processes are adequate.				
6.5 Overall program administration is efficient, effective and meets professional standards.				
6.6 Do you recommend any changes to strengthen the program's current administration, support, and resources (including possible reallocations of resources from current program operations to fund new budgetary needs)?				
7. PROPOSED CHANGES	E	S	N	U
7.1 The proposed changes are responsive to the program's most important needs.				
7.2 The program makes use of assessment results, institutional research data, and other information obtained from students/alumni/employers as the basis of its proposed improvements.				
7.3 Do you recommend changes to the program's proposed changes (Part C #11)? If so, please explain and advise.				
8. OVERALL PROGRAM SUMMARY	E	S	N	U
8.1 What are the major strengths and weaknesses of the program? In your formal report, please identify and cite the evidence that supports your answer.				
8.2 What goals would you suggest the program set for the next five years (please list in order of priority, the most important goal first) and how do these comport with those identified in the self study? In your formal report, please identify and cite the evidence that supports your answer.				
8.3 What are the most realistic and important strategies the program can use to achieve the highest priority goals?				
8.4 What goals would require additional resources? What level of resources would these goals require? How might the program secure these resources?				

APPENDIX D

ASLC Internal Review Checklist for Academic Programs			
School:			
___ Graziadio ___ GSEP ___ School of Law ___ Seaver ___ SPP			
Criteria	Yes	No	NA
Introduction			
1. Is there a clear and adequate overview of where the program is situated and a description of the type and number of degrees granted?			
2. Is there an adequate explanation of how the program meets the criteria established from the last MOU/program review?			
Mission			
3. Does the program (Department, Division) mission clearly link to the University's mission statement?			
Curriculum and Learning Outcomes			
4. Do the Program SLOs align with the School's learning outcomes and the University ILOs?			
5. Is there adequate demonstration of degree alignment and coherence in the curriculum? Do the program, course, and school learning outcomes all align? Is there a curriculum matrix that demonstrates this?			
6. Do the program learning outcomes demonstrate standards of performance required at graduation?			
7. Is there a five year assessment plan in place to assess the entire student learning outcomes in each program/major?			
8. Seaver Only: Do students in the program meet established standards of performance in the GE requirements and WASC's five core competencies?			
9. Does the program make use of external constituencies? e.g. students serving on committees, advisory committee, specialized accreditation			
10. Is there an Inventory of Educational Effectiveness Indicators?			
Evaluation Methods and Implementation of Assessment			
11. Are the assessment methods comprehensive allowing for a triangulation of data using primarily direct student data supported by indirect student data?			
12. Are the assessment methods and tools quantified and robust enough to assess student learning?			
13. Are the expectations for standards of performance based on sound findings and trends? (not arbitrarily decided) Is it established that students are consistently meeting these standards?			
14. Are benchmarks used for comparisons? (these can be longitudinal, national standards or comparisons made against peer institutions)			
15. Is there adequate assessment of student success data? (enrollment with sub populations, GPA, graduation rates)			
16. Do the methods of assessment yield information that is suitable for making decisions about program improvement?			

17. Are methods of assessment consistent with the best practices in the particular field, discipline, or profession?			
Results			
18. Was the student sample used for assessment adequate in size and representative of the student population?			
19. Do the assessment results allow for the ability to make sound decisions about teaching, learning, and curriculum?			
20. Were the data disaggregated for gender, ethnicity, first generation, SES, and GPA?			
Decisions and Recommendations			
21. Does a plan of action exist for "closing the loop" e.g. putting the results into action?			
22. Are decisions and/or recommendations adequately explained?			
23. Do the decisions and/or recommendations clearly align with the SLOs assessed?			
24. Are the decisions based on the assessment results?			
25. Does the plan of action have timelines for completion and identified responsible parties?			