

Student Services Program

What is Program Review?

Program review is a key element of integrated planning at VC. It provides programs with an opportunity for reflection and improvement. Programs analyze data on key metrics that are derived from the VC Educational Master Plan. Then, they identify successes and areas for improvement. They develop goals/initiatives for how they will improve, and if necessary, request resources that are necessary to meet those goals/initiatives.

What is not included in Program Review?

The following should not be requested through program review:

1. Day-to-day operational requests (e.g. routine maintenance requests, broken chairs, etc.).
2. Requests for ongoing, recurring expenses (e.g. requesting the same supplies that were purchased in previous years).
3. Requests that are not directly tied to VC's Educational Master Plan Goals.

Day-to-day and/or recurring maintenance and facilities requests should be made through the [Facilities, Maintenance & Operations Department](#).

Day-to-day and/or recurring requests for supplies should be made through the program's Division budget, in consultation with the Division Dean/Manager.

Ventura College Educational Master Plan Goals

Goal 1: Continuously improve educational programs and services to meet student, community, and workforce development needs.

Goal 2: Provide students with information and access to diverse and comprehensive support services that lead to their success.

Goal 3: Partner with local and regional organizations to achieve mutual goals and strengthen the College, the community and the area's economic vitality.

Goal 4: Continuously enhance institutional operations and effectiveness.

Goal 5: Implement the Ventura College East Campus Educational Plan.

2016-2017 Student Services Program Review

Section A – Service Usage and Student Demographics

Examine your service's usage and student demographic data.

1. How many total student contacts did your program have in the previous year?

| Semester | Total Student Contacts |
|-------------|------------------------|
| Summer 2015 | 3646 |
| Fall 2015 | 7475 |
| Spring 2016 | 5615 |
| Total | 16736 |

2. Briefly describe the trends in your service's usage data by semester, time of day, and day of the week (1,000 characters max).

A&R began to use Grades First, the official repository for data in August 2016. Therefore, there has been no student usage of A&R for the period of time in question.

3. Is there a difference between the percentage of students of each gender who used your service and in the college, as a whole?

Yes No undetermined

4. Is there a difference between the percentage of students of each ethnicity who used your service and in the college, as a whole?

Yes No undetermined

5. If you answered yes to question 3 or 4, briefly describe the differences, and the reason(s) for those differences (1,000 characters max).

see 2 above

2016-2017 Student Services Program Review

Based on your data analysis above, enter 1-2 initiatives below that describe how your program will increase its student usage and/or close any student demographic gaps between your program and the college, as a whole.

| Initiative | Data | | Resources Needed to Meet Initiatives | | | | | | |
|--|--|--|--|---|---|---------------|---|--|------------------------|
| | Which metric(s) will this initiative improve? | How many students will this initiative directly impact? | Do you need additional resources to meet this initiative? | If yes, what type of resources? | Brief description of resources needed | Cost Estimate | Source of Cost Estimate | Has this request been made in a prior year? | If yes, which year(s)? |
| Continue to use Grades First to collect student usage data so baseline information can be gathered to meet the new measurement standard. | <input checked="" type="checkbox"/> Student usage <input checked="" type="checkbox"/> Demographic gaps <input type="checkbox"/> Six Success Factors <input checked="" type="checkbox"/> SUO's | All students who have contact with A&R during the 2016-17 year | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input checked="" type="checkbox"/> Professional Development <input checked="" type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | Resources will be needed to complete the additional work created by logging each student transaction. | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| | <input type="checkbox"/> Student usage <input type="checkbox"/> Demographic gaps <input type="checkbox"/> Six Success Factors <input type="checkbox"/> SUO's | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

2016-2017 Student Services Program Review

Section B – Services Offered

Please describe the type of services that your program offers. It is not necessary to fill in every line of the table.

| Service Offered (200 characters max per line) | Offered Face to Face (Day) | Offered Face to Face (Evening) | Offered Online | Estimated % of Students Served who Used this Service in the Past Year |
|--|---|---|---|--|
| Enrollment and Registration Support | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Change of Residency Procedures | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Transcript Requests | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Special Admission Processing | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Petition Processing | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

2016-2017 Student Services Program Review

Section C – Six Success Factors

Please examine the Six Success Factors survey results for your service.

1. Which of the Six Success Factors received the highest score for your service?

Directed Focused Nurtured Connected Valued

2. Which of the Six Success Factors received the lowest score for your service?

Directed Focused Nurtured Connected Valued

3. Briefly describe any trends or interesting patterns in your service's survey results (1,000 characters max).

The results of the survey did not correspond with the information being sought. The group surveyed was not large enough to make any assessment of the success of the service offered by A&R.

2016-2017 Student Services Program Review

Based on your data analysis above, enter 1-2 initiatives below that describe how your program will improve upon the results of the Six Success Factors survey.

| Initiative | Data | | Resources Needed to Meet Initiatives | | | | | | |
|--|---|---|--|--|--|---------------|-------------------------|--|------------------------|
| What will your program do to improve upon the results of the Six Success Factors survey? | Which metric(s) will this initiative improve? | How many students will this initiative directly impact? | Do you need additional resources to meet this initiative? | If yes, what type of resources? | Brief description of resources needed | Cost Estimate | Source of Cost Estimate | Has this request been made in a prior year? | If yes, which year(s)? |
| Develop survey questions relevant to the outcomes being sought | <input checked="" type="checkbox"/> Student usage <input checked="" type="checkbox"/> Demographic gaps <input checked="" type="checkbox"/> Six Success Factors <input type="checkbox"/> SUO's | All students participating in the survey for A&R | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input checked="" type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | Consultation on the best practices for developing and administering a survey to gather relevant data from a majority of students using our service | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Administer the survey more frequently or on a continual basis | <input checked="" type="checkbox"/> Student usage <input checked="" type="checkbox"/> Demographic gaps <input checked="" type="checkbox"/> Six Success Factors <input checked="" type="checkbox"/> SUO's | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | kiosks to encourage the student to complete the survey at the time of service | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

2016-2017 Student Services Program Review

Section D – Service Unit Outcomes

1. Please enter the following SUO information for your program.

| Service Unit Outcome | Date/Semester of Most Recent Assessment | Brief Description of Assessment Results | Changes Made as Result of Assessment | Date/Semester of Next Assessment |
|---|---|--|--|----------------------------------|
| Students will receive timely service from A&R staff | Spring 16 | findings included inefficiencies in business processes | training materials are in the review process; seeking ways to reduce the number of visits for student transactions | Fall 16 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

2. How does your program facilitate the achievement of the college's ISUO's or ISLO's (1,000 characters max)

Business processes will be continually reviewed to ensure institutional accountability and effectiveness for student outcomes.

3. How many department/program meetings have you held in the previous year in which SUO's have been discussed?

4 meetings

2016-2017 Student Services Program Review

Based on your data analysis above, enter 1-2 initiatives below that describe how your program will improve its SUO results.

| Initiative | Data | | Resources Needed to Meet Initiatives | | | | | | |
|---|--|---|--|--|--|---------------|-------------------------|--|------------------------|
| What will your program do to improve its SUO results? | Which metric(s) will this initiative improve? | How many students will this initiative directly impact? | Do you need additional resources to meet this initiative? | If yes, what type of resources? | Brief description of resources needed | Cost Estimate | Source of Cost Estimate | Has this request been made in a prior year? | If yes, which year(s)? |
| Explore Graduation Application processing times | <input type="checkbox"/> Student usage <input type="checkbox"/> Demographic gaps <input type="checkbox"/> Six Success Factors <input checked="" type="checkbox"/> SUO's | 3500 students applying for graduation | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input checked="" type="checkbox"/> Technology <input type="checkbox"/> Facilities <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | Programming would be needed to facilitate a transition from our current graduation application process | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| | <input type="checkbox"/> Student usage <input type="checkbox"/> Demographic gaps <input type="checkbox"/> Six Success Factors <input type="checkbox"/> SUO's | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Section E - Previous Year Initiatives

[Click here to view previous year initiatives.](#)

2016-2017 Student Services Program Review

Section F – 2016-2017 Program Initiative Prioritization

Initiatives from the sections above will automatically populate the table below. Please prioritize them to indicate which initiatives are the top priorities for your program.

| Initiative | | Data | | Resources Required to Meet Initiative | | | | | | |
|------------|--|---|---|---|---|---------------------------------------|---------------|-------------------------|---|------------------------|
| Priority | What will your program do to improve student achievement and learning? | Which metric(s) will this initiative improve? | How many students will this initiative directly impact? | Do you need additional resources to meet this initiative? | If yes, what type of resources? | Brief description of resources needed | Cost Estimate | Source of Cost Estimate | Has this request been made in a prior year? | If yes, which year(s)? |
| | | <input type="checkbox"/> Student usage <input type="checkbox"/> Demographic gaps <input type="checkbox"/> Six Success Factors <input type="checkbox"/> SUO's | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | <input type="checkbox"/> Student usage <input type="checkbox"/> Demographic gaps <input type="checkbox"/> Six Success Factors <input type="checkbox"/> SUO's | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

2016-2017 Student Services Program Review



| Initiative | | Data | | Resources Required to Meet Initiative | | | | | | |
|------------|--|---|---|---|---|---------------------------------------|---------------|-------------------------|---|------------------------|
| Priority | What will your program do to improve student achievement and learning? | Which metric(s) will this initiative improve? | How many students will this initiative directly impact? | Do you need additional resources to meet this initiative? | If yes, what type of resources? | Brief description of resources needed | Cost Estimate | Source of Cost Estimate | Has this request been made in a prior year? | If yes, which year(s)? |
| | | <input type="checkbox"/> Student usage <input type="checkbox"/> Demographic gaps <input type="checkbox"/> Six Success Factors <input type="checkbox"/> SUO's | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | <input type="checkbox"/> Student usage <input type="checkbox"/> Demographic gaps <input type="checkbox"/> Six Success Factors <input type="checkbox"/> SUO's | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

2016-2017 Student Services Program Review



| Initiative | | Data | | Resources Required to Meet Initiative | | | | | | |
|------------|--|---|---|---|---|---------------------------------------|---------------|-------------------------|---|------------------------|
| Priority | What will your program do to improve student achievement and learning? | Which metric(s) will this initiative improve? | How many students will this initiative directly impact? | Do you need additional resources to meet this initiative? | If yes, what type of resources? | Brief description of resources needed | Cost Estimate | Source of Cost Estimate | Has this request been made in a prior year? | If yes, which year(s)? |
| | | <input type="checkbox"/> Student usage <input type="checkbox"/> Demographic gaps <input type="checkbox"/> Six Success Factors <input type="checkbox"/> SUO's | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | <input type="checkbox"/> Student usage <input type="checkbox"/> Demographic gaps <input type="checkbox"/> Six Success Factors <input type="checkbox"/> SUO's | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <input type="checkbox"/> Technology <input type="checkbox"/> Facilities <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Workers <i>*Use page 13 for faculty/staff hiring requests</i> | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Section G - Full-Time Faculty Hire Requests

| Priority | Request Type | Discipline/Program | Brief Description | Has this position been requested in a past year? | If so, which year(s)? |
|----------|--------------|--------------------|-------------------|--|-----------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |

Section H - Classified Hire Requests

| Priority | Request Type | Position | Full-Time or Part-Time | Brief Description | Salary and Benefits Cost | Has this position been requested in a past year? | If so, which year(s)? |
|----------|--------------|----------|------------------------|-------------------|--------------------------|--|-----------------------|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |

2016-2017 Student Services Program Review

Section I – Process Assessment

How have the changes in the program review process this year worked for your area?

How would you improve the program review process based on this experience?

Appeals

After the program review process is complete, your program has the right to appeal the ranking of initiatives (i.e. initiatives that should have been ranked high but were not, initiatives that were ranked high but should not have been), the division's decision to support/not support program discontinuance, or the process (either within the department/program or the division) itself.

If you choose to appeal, please complete the Appeals form (Appendix E) that explains and supports your position. Forms are located at the Program Review VC website.

The appeal will be handled at the next higher level of the program review process.

Section J – Submission Verification

Preparer:

Dates met (include email discussions):

List of Faculty who participated in the program Review Process:

Preparer Verification:

Arlene Reed; Registrar

I verify that this program document was completed in accordance with the program review process.

Dean Verification:

I verify that I have reviewed this program review document and find it complete. *The dean may also provide comments (optional):*