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| **2023 Self-Study Report** | | | |
| **Instructions**: The following pages will guide your submission of your Academic Program Review Self-Study. Please type your responses directly into the document. The completed self-study instrument and all attachments must be submitted to the Academic Program Review Coordinator and your Academic Dean by **September 22, 2023.**    **March 3,** **2023 September 21,** **2023 October 25,** **2023**  **Nov-Dec 2023 Every Fall from 2024-2027** | | | |
| **Program Under Review** | | | |
| **Degree:** Medical Laboratory Technician AAS  **Certificates:** | **If the program has gone through accreditation in the past year, the information from the accreditation packet can be inserted into the corresponding areas on the self-study.** | **Contact Information for lead on**  **Self-Study**  **Name:** Bishop  **Campus: SPC**  **Phone: 520-494-5531**  **Email: jennifer.bishop@centralaz.edu**  **Date of APR Completion:** | **Peer Reviewers Name and Role** |
| Areas in **grey** are used by the peer review team to give feedback on your self-study and do not require your contribution. |

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| **I. Program Description, Mission, Vision, & Equity Statement** | | | | |
| **1. What is the description of the program as stated in the current CAC catalog:** (Should contain: description, program certifications, accreditations, awards, and skills attained.)  The Medical Laboratory Technician AAS prepares a graduate for employment in a clinical/medical laboratory. The graduate will perform routine lab testing for blood, urine, cultures, and other body fluids under the supervision of a medical laboratory scientist. Other responsibilities include performing test/instrument quality control and maintenance on a daily basis, as well as evaluating test results.  Accredited by National Accrediting Agency for Clinical Laboratory Science (NAACLS) | **Does the program description provide the following information? a) A synopsis of the program and curricular outcomes.** | | | **Peer Review Comments:** |
| Exemplary  3 | Adequate 2 | Opportunity for Improvement 1 |
| **Program certifications, accreditations, and awards.** | | |
| Exemplary  3 | Adequate2 | Opportunity for Improvement 1 |
| **The skills that graduate from the program will attain.** | | |
| Exemplary  3 | Adequate2 | Opportunity for Improvement 1 |
| **2. Does your program have a mission and/or a vision statement? If it does, please write them below and indicate where they appear.**  **MLT Student handbook page 6**  **MEDICAL LABORATORY TECHNICIAN PROGRAM MISSION, VISION,**  **Vision: Central Arizona’s premier choice in the education of Medical Laboratory Technicians.**  **Mission: The Central Arizona College Medical Laboratory Technician program’s mission is to educate the students with the knowledge and laboratory skills that allow them to be valuable and successful professionals in the field of Medical Laboratory Science.**  **Would like to update Mission to**  **Teaching evidence based collaborative practice for laboratory professionals**  **Reaching excellence through technology and skills training**  **Understanding the impact of laboratory results on the quality of patient care**  **Empowering students to become the future healthcare leaders of tomorrow.**  **And include the following values:**  **Accuracy**  **Confidence**  **Transform**  **Inspiring**  **Visionary**  **Advocate**  **Teamwork**  **Empathy** | **Does the program have a mission and/or a vision statement? If so, are the program’s mission or vision statements clear and reflective of the program?** | | |  |
| Exemplary 3 | Adequate2 | Opportunity for Improvement 1 |
| **3. Describe how the program’s description, mission and/or vision aligns with the College’s Mission and Vision:**  **CAC Vision and Mission Statements:**  **Vision:**  Central Arizona’s premier choice in education and career excellence.  **Mission:**  Central Arizona College serves as a TRUE Learning community by empowering our students and staff to succeed.  **Teaching. Reaching. Understanding. Empowering. Learning.**  **The MLT program's current and proposed vision and mission align with the goals of CAC.** | **Is the program aligned with the college’s mission, vision, and strategic goals?** | | |  |
| Exemplary 3 | Adequate2 | Opportunity for Improvement 1 |
| **4. Equity Statement and Evidence:** What efforts have been made to make the program more equitable? [**(Resources here)**](https://www.insidehighered.com/blogs/higher-ed-gamma/how-stand-equity-higher-education)  **Try to consider each student's background and work with them to be successful. For example, a student with transportation issues is given a Casa Grande clinical rotation over other student with reliable transportation.** | **Appropriate efforts have been made to make the program more equitable?** | | |  |
| Exemplary 3 | Adequate2 | Opportunity for Improvement 1 |

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| **II. Program Curriculum:** | | | | |
| **1. When reviewing the curriculum for the certificate and/or degree, are there any courses that need to be added, deleted, or modified?**  **MLT 275 needs to be split into another class. There is a lot of information and I feel I can create a new class that could potentially be offered in the summer for the items that do not have a physical lab with them. MLT 275 could be offered in the fall and retain the items that have a physical lab with them.**  **MLT 210 will be moved to the summer as it is an intro to MLT.** | **Was any information given as to possible revisions to the course description, articulation, additions, revisions, or deletions anticipated?** | | | **Peer Review Feedback:** |
| Exemplary  3 | Adequate  2 | Opportunity for Improvement 1 |

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| **III. Program Outcomes and Assessment** | | | | |
| **1. What are the Program Learning Outcomes (PLOs) for the program degree or certificate as currently indicated in ACRES? If this program contains multiple degrees and/or certificates, the learning outcomes should be provided for each one.**  **1.0 (Knowledge Level) Define the role of the medical laboratory technician in the healthcare delivery system as it relates to the point-of-care or clinical laboratory environment. (CSLO 1,3)** **2.0 (Application Level) Use common medical terminology. (CSLO 1,2,3)** **3.0 (Application Level) Demonstrate knowledge of infection control and safety practices. (CSLO 1,2)** **3.1 (Application Level) Demonstrate accepted practices for infection control, isolation techniques, aseptic techniques, and methods for disease prevention. (CSLO 1,2)** **3.2 (Synthesis Level) Incorporate the mandated regulations with federal, state, and local guidelines regarding all the safety practices required by NAACLS. (CSLO 2,3)** **3.2.1 (Application Level) Observe the OSHA bloodborne Pathogens Standard and Needle Safety Precaution Act. (CSLO 2)** **3.2.2 (Application Level) Use prescribed procedures to handle electrical, radiation, biological, and fire hazards. (CSLO 2)** **3.2.3 (Application Level) Use appropriate practices, as outlined in the OSHA Hazard Communication Standards, including the correct use of the Material Safety Data Sheet, as directed. (CSLO 2)** **4.0 (Application Level) Follow standard operating procedures to collect specimens. (CSLO 1,2)** **4.1 (Synthesis Level) Perform assigned specimen collection tasks incorporating knowledge of the circulatory, urinary, and other body systems. (CSLO 2,4)** **4.2 (Comprehension Level) Describe the difference between whole blood, serum, and plasma. (CSLO 2)** **4.3 (Application Level) Identify and use blood collection equipment. (CSLO 2)** **4.31 (Evaluation Level) Evaluate and identify the additive by the evacuated tube color. (CSLO 2)** **4.32 (Application Level) Identify and properly use equipment needed to collect blood by venipuncture and capillary (dermal) puncture. (CSLO 2)** **4.4 (Application Level) Collect blood specimens by venipuncture. (CSLO 2,4)** **4.5 (Application Level) Collect blood specimens by capillary (dermal) puncture. (CSLO 2,4)** **4.6 (Knowledge Level) Identify special precautions necessary during blood collections by venipuncture and capillary (dermal) puncture. (CSLO 2,4)** **4.7 (Application Level) List and apply the criteria that would lead to rejection or recollection of a patient sample. (CSLO 2,4)** **4.8 (Synthesis Level) Instruct patients in the proper collection and preservation for non-blood samples. (CSLO 1,2)** **5.0 (Application Level) Prepare blood and body fluid specimens for analysis according to standard operating procedures. (CSLO 2,4)** **5.1 (Application Level) Follow standard operating procedures for labeling, transporting, and processing of specimens, including transport to reference laboratories. (CSLO 2)** **5.2 (Synthesis Level) Follow the criteria for reporting specimens and test results that will be used as legal evidence. (CSLO 2,4)** **6.0 (Application Level) Prepare/reconstitute reagents, standards and controls according to standard operating procedure. (CSLO 2)** **6.1 (Analysis Level) Follow laboratory protocol for storage and suitability of reagents, standards, and controls. (CSLO 2)** **6.2 (Synthesis Level) Recognize and report contamination and/or deterioration in reagents, standards, and controls. (CSLO 2,4)** **7.0 (Synthesis Level) Perform appropriate tests at the medical laboratory technician level, according to standard operating procedures. (CSLO 2,4)** **7.1 (Synthesis Level) Identify and report potential pre-analytical errors that may occur during specimen collection, labeling, transporting, and processing. (CSLO 2,4)** **7.2 (Evaluation Level) Compare and evaluate test results to reference intervals. (CSLO 2,4)** **7.3 (Synthesis Level) Record results by manual method or computer according to laboratory protocol. (CSLO 2)** **7.4 (Synthesis Level) Report STAT results of completed tests according to laboratory protocol. (CSLO 2)** **7.5 (Synthesis Level) Recognize critical values and follow established protocol regarding reporting. (CSLO 2)** **7.6 (Application Level) Use and handle measurement equipment appropriately. (CSLO 2)** **9.0 (Comprehension Level) Follow established quality control protocols to include maintenance and calibration of equipment. (CSLO 2,4)** **9.1 (Synthesis Level) Perform quality control procedures. (CSLO 2)** **9.2 (Synthesis Level) Record quality control results. (CSLO 2)** **9.3 (Synthesis Level) Identify and report control results that do not meet pre-determined criteria. (CSLO 2,4)** **10.0 (Application Level) Communicate (verbally and nonverbally) effectively and appropriately in the workplace. (CSLO 1,3)** **10.1 (Application Level) Demonstrate confidentiality expectations of privileged information for individuals. (CSLO 1,2,3)** **10.2 (Evaluation Level) Evaluate and defend the value of diversity in the workplace. (CSLO 1,2)** **10.3 (Application Level) Demonstrate appropriate and professional interaction when working with other individuals. (CSLO 1,3)** **10.4 (Analysis Level) Examine and discuss the major points of the American Hospital Association Patients Bill of Rights and the Patients Bill of Rights from the institution. (CSLO 1,3)** **10.5 (Application Level) Demonstrate professional appearance and appropriate work behaviors. (CSLO 1,3)** **10.6 (Application Level) Apply written and verbal instructions in carrying out testing procedures. (CSLO 2,4)** **11.0 (Application Level) Use information systems necessary to accomplish job functions. (CSLO 2)** **12.0 (Synthesis Level) Record data using the appropriate form when documenting potential pre-analytical errors that may occur during specimen collection, labeling, transporting, and/or processing. (CSLO 4)** | **Are the Program Learning Outcomes (PLOs) for the program provided and are they relevant to the program’s goals?** | | | **Peer Review Feedback:** |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |
| **2. Are the outcomes from your program determined or influenced by any external organization, agency, or accreditor? If so, please explain. Are there any available accreditations which the program does not have, but may benefit from seeking?**  **The standards are based on the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS), Medical Laboratory Technician Standards for Compliance Core Module, pages 17-23.**  **NAACLS web site: http://www.naacls.org See Standard Compliance Guide** | **Are any of the program outcomes determined or influenced by any external organization, agency or accreditor identified and explained? If not, mark not applicable. (NA)** | | |  |
| Exemplary  3 | Adequate  2 | Opportunity for Improvement 1 |
| **3. Assessment Results: Use this Assessment Reporting Form to share your assessment results. Attach assessment data or rubrics as an appendix. (Click on the link to attach your Assessment Reporting Form)**  [**Medical Laboratory Technician Assessment Reporting Form**](https://centralaz.sharepoint.com/:w:/s/ProgramAssessment/Eav_IPcVQVtNmJ_zeQ5kxNABEudXYS1Bmbo_sp5bbfOwaw?e=js2XU1) | **The information in the Assessment Reporting Form should answer the following questions** | | |  |
| **A. What PLOs and/or MSLOs and CSLOs did you assess this year?** | **Are the PLO’s or MSLOs that were assessed identified and the department/program strategies for assessing learning outcomes described and information provided on how assessment results are collected, analyzed, and discussed?** | | |  |
| Exemplary  3 | Adequate  2 | Opportunity for Improvement 1 |
| **B. Describe the assessment method used and criteria for successful achievement of student learning outcomes. (e.g., rubrics, licensing exam, internship, portfolio, exam, research paper, performance exam, EAC, etc.)** | **Was the assessment method and criteria identified?** | | |  |
| Exemplary  3 | Adequate 2 | Opportunity for Improvement 1 |
| **c. How many students were proficient in the PLOs OR MSLOs and CSLOs and how many were not? What was determined to be proficient? (i.e., 70% = proficient)** | **Was data provided on assessment results on how many students were proficient?** | | |  |
| Exemplary  3 | Adequate 2 | Opportunity for Improvement 1 |
| **D. What changes/improvements were made or will be made in response to the outcomes of the assessment process?** | I**s an explanation provided on how MSLO and CSLO assessment results have facilitated changes/improvements to the outcomes of the assessment process?** | | |  |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |

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| **IV. Program Graduates** | | | | |
| **1. Discuss how the program supports current or future needs for the job market in Pinal County, the state of Arizona, and/or the United States.**  **From the market needs that I cited from the US Bureau of Labor Statistics, we see that technologists in the clinical laboratory is expected to grow 7% from 2021 to 2031 and that's about as fast as average for all occupations. There were 25,600 openings for clinical laboratory technologists and technicians each year. Many of those openings are expected to result from the need to replace workers who transfer to different occupations or exit the labor force such as retiring. I think we can all safely say, that since COVID we've had a lot of people leaving the profession altogether.** | **Was information given on how the program supports current or future needs for the job market in Pinal County, the state and/or the United States?** | | | **Peer Review Feedback:** |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |
| **2. For degree programs, identify any specific in-state baccalaureate programs into which this program is particularly suited for transfer.**  **Our program is not eligible to transfer students into the ASU program as they work with Phoenix College.** | **Are any of the program outcomes determined or influenced by any external organization, agency or accreditor identified and explained? If not, mark not applicable (NA)** | | |  |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |
| **3. Indicate if there are any articulation agreements in place for degree graduates.**  **There are no articulation agreements in place with any other colleges.** | **Are articulation agreements in place for degree graduates?** | | |  |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |
| **4. Discuss how the program gets feedback on its program and curriculum from external sources, such as advisory boards, employers, articulation task forces, accreditors, etc.**  Advisory board meetings are held every fall and include as many of our clinical partners as possible. | **Was information given on how the program gets feedback on its program and curriculum from external sources such as advisory boards, employers, articulation task forces, accreditors, etc.?** | | |  |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |

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| **V. Program Specific Resources:**  *In this section, please focus on program specific resources. You may, but do not have to, discuss resources available to the college at large such as Blackboard, the Learning Centers, Library, etc. However, if these resources are impacting your program in a positive or negative way which you would like to discuss, please do so.* | | | | |
| **1. Discuss the adequacy of the budgetary resources, human resources, technological resources, classrooms, labs and space, academic support for students (i.e.: learning center, library) and student support (i.e.: advising) available to the program over the past 5 years:** | **Was the adequacy of the budgetary resources, human resources, technological resources, classrooms, labs and space, academic support for students over the past 5 years evaluated?** | | | **Peer Review Feedback:** |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |
| **2. Does the program have sufficient resources to be effective and relevant? Explain:**  **We need a larger more functional laboratory classroom to be able to purchase more equipment for the students to work with. Also, a new classroom would allow for true clean area and dirty area for student safety.** | Sufficient Resources | Insufficient Resources | No Response |  |
| **3. What future goals does the program have? Will extra resources and funding be required to achieve it?**  **Incorporating more current technology into the program and interprofessional collaborative education. I would like to see a space where nursing students and laboratory students could work together in a collaborative** | **Were future goals identified along with the extra resources and funding that would be required to achieve them?** | | |  |
| Exemplary  3 | Adequate  2 | Opportunity for Improvement 1 |
| **4. Are there any anticipated budgetary needs within next 5 years that would support action plans for program improvement.** | Sufficient Resources | Insufficient Resources | No Response |  |

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| **VI. Program Alignment with Institutional Strategic Goals:** | | | | |
| **1. How is the program directly or indirectly helping the College achieve its current strategic goals? Consider each strategic goal and provide a brief comment or description on how the program works to achieve it.**     |  |  | | --- | --- | | **CAC Strategic Goals:** | **Aligned Program Goals:** | | **Student Success**  *Ensure student success through retention, persistence, completion, and transfer* |  | | **Access**  *Ensure all Pinal County residents and others have access to high quality innovative post-secondary opportunities* |  | | **Workforce**  *Ensure students acquire the skills necessary for job placement and that meet employer needs in Pinal County and Region* |  | | **Community**  *Ensure Pinal County residents have access to lifelong learning and cultural enrichment* |  | | **Environment**  *Ensure a safe, sustainable environment that promotes learning, communication, diversity and satisfaction among students and employees*. |  | | **Stewardship**  *Ensure optimization of fiscal resources through a balanced budget to support the needs and expectations of students and the community* |  | | **Infrastructure**  *Ensure a physical and technological infrastructure that supports changes in learning and working environment* |  | | **Was a description provided on how the program has directly or indirectly assisted the college in achieving its strategic goals.** | | | **Peer Review Feedback:** |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |

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| **VII. Program Effectiveness for Graduates** | | | | |
| **1. Describe how you measure the success of degree and certificate program graduates. For example, are graduate surveys conducted? Are surveys given to employers to determine satisfaction with program graduate employees?** | **Was information provided on how the program measures the success of the degree and certificate program graduates?** | | | **Peer Review Feedback:** |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |

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| **VIII. Program Improvement Efforts** | | | | |
| **1. Describe efforts made to improve the program during the past five years."** (For example, this can include professional development, curriculum revision, the purchase of equipment, using assessment to enhance instruction, etc.) | **Was a description provided of the ways the program has engaged in program improvement?** | | |  |
| Exemplary  3 | Adequate  2 | Opportunity for Improvement 1 |

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| **IX. Data and Trends** | | | | |
| **Leave this section Blank for now. It will be inputted by IR. You will be asked to comment on the trends and information indicated by the data.** [**(Click here for Data Package)**](https://centralaz.sharepoint.com/:x:/s/AcademicProgramReview/EfcXzbPZdq9Oh6--R_c_DnkBiw2Osr2Ua7Udt1yl9T5bqg?e=aWsKCS) | | | | |
| **1. Program enrollment data for the past 5 years**  A. Discuss and explain the factors influencing the enrollment trends:  B. How has the program typically recruited students and marketed the program: | **Has the program enrollment trends for the program increased, remained consistent or decreased?** | | | **Peer Review Feedback:** |
| Increasing 3 | Consistent 2 | Decreasing 1 |
| **Were the factors influencing enrollment trends discussed?** | | |
| Exemplary 3 | Adequate 2 | No information was given 1 |
| **Was information given on how the program typically recruits students and markets the program?** | | |
| Exemplary 3 | Adequate 2 | No information was given 1 |
| **2. Program graduation rate trends for the past 5 years**  **Award Count**  **AAS – Medical Assistant**: 2018 = 2, 2019 = 24, 2020 = 10, 2021 = 6, 2022 = 4  **Certificate – Medical Assistant:** 2018 = 1, 2019 = 1, 2020 = deactivated, 2021 = deactivated, 2022 = 1  A. Discuss and explain the graduation trends. What efforts has the program made to help students achieve completion? | **Have the graduation rates increased in the past 5 years?** | | |
| Increasing 3 | Consistent 2 | Decreasing 1 |
| **3. Students who enroll in a four-year college**  **4. Data on students who earn external certification or licensure.** | **Has the number of program enrollees or graduates who studied at an in-state baccalaureate-level institution during the past 5 years increased, stayed consistent or decreased?** | | |
| Increasing 3 | Consistent 2 | Decreasing 1 |
| **5. Average Salary for Students and Graduates and/or job placement information.** | **Were graduation trends and efforts to help students to achieve completion addressed?** | | |
| Exemplary 3 | Adequate 2 | No information was given 1 |
| **6. Data Summary:** Provide a summary of this section. Indicate trends observed in the data, identify areas of strengths, and areas for improvement. | **Was a summary of the Program Enrollment and Graduation Trends provided and was there a reflection of areas of strengths and improvement for the program**. | | |
| Exemplary 3 | Adequate 2 | No information was given 1 |

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| **X. Evaluation of Program Strengths, Viability and Areas for Improvement:** | | | | |
| **1. After completing the APR Self Study, identify areas of strength and areas for improvement in the program. Is the program still a viable program? Discuss the next steps for the program and Action Plan Ideas.** | **Were areas of strength and areas for improvement identified? Is an evaluation provided on whether the program is still viable? Were the next steps for the program and action plans identified?** | | | **Peer Review Feedback:** |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |

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| **XI. Overall Evaluation of the APR Self Study** | | | |
| **Are key findings that arose from the analysis and review process clearly presented?** | | | **Peer Review Feedback:** |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |
| **Does the review provide a clear direction and vision for the program moving forward?** | | |  |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |
| **Does the review present specific strategies and recommendations for moving the program forward?** | | |  |
| Exemplary 3 | Adequate 2 | Opportunity for Improvement 1 |

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| **Scoring Rubric**  **If all sections were applicable:** | | | |
| **Exemplary 99 - 84 (85% and above)** *If all sections were applicable:*  The program self-study fully addressed the core criteria in the self-study and review process. It discussed how goals and objectives are linked to the college mission and strategic goals. The program's student learning outcomes, curriculum comparison and assessment results have informed changes in curriculum, pedagogy, and instructional resources. Action Plans for improvement were identified based on the results of the self-study process. | **Good 83 - 69 (70 – 84%)**  *If all sections were applicable:*  The program self-study addressed the core criteria in their self-study and review process, but some information was missing. It discussed how goals and objectives are linked to the college mission and strategic goals, and included action plan strategies, but more data, statistics and specific goals could have been identified. The program's student learning outcomes, curriculum comparison and assessment were given but specific information on how it would affect pedagogy and instructional resources was not provided. | **Opportunity for Improvement 68 and less (69% and below)**  *If all sections were applicable:*  Not all the core criteria were addressed and there was information and statistics missing in many of the self-study areas. A reflection of how the self-study will lead to an Action Plan for improvement was not provided. | **Peer Review**  **Feedback:** |
| **If 2 of the sections were not applicable:** | | | |
| Exemplary 102 – 87 (85% and above) Same criteria as above | Good 86 - 71 (70 – 85%) Same criteria as above | Opportunity for Improvement 70 - Below (69% and below) Same criteria as above |  |

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| **Identified Strengths and Recommendation for Program Action Plan:** |
| **The reviewers noted the strengths of the program and would like to recommend the following actions to be considered when working with the dean to develop an action plan as a result of the Academic Program Review process.**  **Strengths:**  **Action Plan Recommendations:** |
| **Academic Review Process Insight Statement**  Take moment to reflect how this process has helped guide the direction of your program. |
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| **Instructions**: In this form, program directors along with the appropriate Dean should indicate any goals or action plans for program improvement over the next 5 years, which have been identified as a result of the academic program review process. | | |
| **Goal/Action 1: (**Type your goal here.)  Strategic Goals Associated: | | |
| Cost/Resource Implications: | Timeline for Achievement: | Measure of Success: |
| **Goal/Action 2:**  Strategic Goals Associated: | | |
| Cost/Resource Implications: | Timeline for Achievement: | Measure of Success: |
| **Goal/Action 3:**  Strategic Goals Associated: | | |
| Cost/Resource Implications: | Timeline for Achievement: | Measure of Success: |
| **Goal/Action 4:**  Strategic Goals Associated: | | |
| Cost/Resource Implications: | Timeline for Achievement: | Measure of Success: |
| **One Year Action Plan Update**  To be completed each December and submitted to appropriate Dean and Academic Program Review Coordinator | | |
| Discuss progress made toward Action Plan goals after one year:  Submitted by: Update by Fall 2023 | | |
| **Two Year Action Plan Update** | | |
| Discuss progress made toward Action Plan goals after one year:  Submitted by: Update by Fall 2024 | | |
| **Three Year Action Plan Update** | | |
| Discuss progress made toward Action Plan goals after one year:  Submitted by: Update by Fall 2025 | | |
| **Four Year Action Plan Update** | | |
| Discuss progress made toward Action Plan goals after one year:  Submitted by: Update by Fall 2026 | | |