



Open Pathway Quality Initiative Report

Institutional Template

The enclosed Quality Initiative Report represents the work that the institution has undertaken to fulfill the Improvement Process of the Open Pathway.

A handwritten signature in black ink that reads "Thomas K. Ries".

8/29/2017

Signature of Institution's President or Chancellor

Date

Rev. Dr. Thomas Ries

Printed/Typed Name and Title

Concordia University, St. Paul

Name of Institution

St. Paul, MN

City and State

The institution uses the template below to complete its Quality Initiative Report. The institution may include a report it has prepared for other purposes if it addresses many of the questions below and replaces portions of the narrative in the template. This template may be used both for reports on initiatives that have been completed and for initiatives that will continue and for which this report serves as a milestone of accomplishments thus far. The complete report should be no more than 6,000 words.

Quality Initiative Reports are to be submitted by August 31 of Year 9. HLC recommends that institutions with comprehensive evaluations in the first half of Year 10 submit their report at least six months prior to their Assurance System lock date. Submit the report as a PDF file to pathways@hlcommission.org with a file name that follows this format: QI Report No Name University MN. The file name must include the institution's name (or an identifiable portion thereof) and state.

Date: August 29, 2017

Contact Person for Report: Dr. Miriam Luebke

Contact Person's Email Address: luebke@csp.edu

Report Categories

Overview of the Quality Initiative

1. Provide a one-page executive summary that describes the Quality Initiative, summarizes what was accomplished and explains any changes made to the initiative over the time period.

Description

As its Quality Initiative project, Concordia University, St. Paul (CSP) developed an ongoing, systematic, institution-wide process for academic program review, integrated with assessment of learning, departmental and curricular planning, and resource allocation. The process consists of a comprehensive program review (CPR) conducted by each program/ department every three to five years. In addition, each year programs/departments complete a simpler and briefer Annual Review. The cycle was initiated with a college-by-college professional development event – an Innovation Workshop – designed to promote a strategic thinking mindset and promote the creativity and innovation to focus department planning on the future.

Accomplishments

Resources and examples of program review were gathered from conference presentations and materials shared by other institutions.

The Innovation Workshops were conducted for each college and resulted in strategies and tactics used by departments to recommend directions for the future.

All but one academic department completed the annual report the first year (2016) and every department completed it the second year (2017). College deans reviewed the reports for their college and provided feedback to their departments on each report's data analysis and stated goals for the upcoming year.

Five academic departments completed the CPR and three completed a comprehensive visit by the professional accreditor for their field. The other 15 departments are scheduled to complete their CPRs between October 2017 and June 2018. The Academic Cabinet* is in the process of reviewing and approving the departmental action steps that came out of each CPR and accreditor visit, and making final recommendations for each program.

Throughout the development of the program review process, faculty participants were surveyed for their suggestions to the project. After the initial annual reports were completed in 2016, department chairs responded to a survey about the format and content of that review. Based on their feedback, the format for the annual report was changed for 2017. Prior to the initial CPR, in fall of 2015, faculty were asked for input on the proposed model for the CPR and for their perspectives on quality indicators. Faculty response affirmed that the model and indicators proposed for the CPR were reasonable. After the first CPRs were completed in 2017, a third survey went out to faculty on their experience with the new program review processes. The Academic Cabinet reviewed those survey responses and made changes to timelines for the CPR and clarified the response procedures from the administration to departments.

Changes Made

Given the time demands and complexity of the comprehensive program review, the CPR cycle will be lengthened to every five years instead of every three. Programs that may need further monitoring may be reviewed again after three years.

*Academic Cabinet: vice president for academic affairs, provost, four college deans, associate vice president for graduate studies, vice president and associate vice president of enrollment management, director of continuing studies, chair of faculty senate, and associate vice president for assessment and accreditation.

Scope and Impact of the Initiative

2. Explain in more detail what was accomplished in the Quality Initiative in relation to its purposes and goals. (If applicable, explain the initiative's hypotheses and findings.)

The CSP Quality Initiative focused on three major outcomes: 1) faculty development to prepare department members for the kind of strategic and innovative thinking required for future planning; 2) a systematic annual program review; and 3) a systematic comprehensive periodic program review.

Faculty Development: Innovation-Strategic Thinking Workshops

The full-time faculty of the Colleges of Arts and Letters, Education and Science, and Business and Technology (these three colleges have since been restructured into four colleges) each met on a separate day led by Dr. Richard Brynteson, CSP MBA faculty with scholarship in the area innovation. Dr. Brynteson and Dr. Marilyn Reineck planned the workshops in collaboration with college deans, Dr. Kevin Hall, Dr. David Lumpp, and Prof. Lonn Maly. Dr. Brynteson designed a 5 step strategic thinking process for the workshop and, along with college faculty and deans, provided reading materials on innovative practices in areas relevant to each college. All faculty participated in these strategic thinking workshops during spring semester 2016.

In each workshop, small groups of faculty conducted an analysis of themes from the readings, then a gap analysis of their own programs in light of these themes. Each group addressed these questions: 1) Based on what you read, how would you teach? and 2) How would you structure courses/programs around the ideas presented?

Using the matrix below, each group generated ideas for gap-filling measures and formulated action plans for concrete steps their programs could take to address identified gaps.

Strategic Thinking Process

Step	Comments
Step #1 Read and absorb	
Step #2 Discuss, sift, pull out themes	
Step #3 Gap Analysis: Now vs. where we want to be	
Step #4 Brainstorming; Gap filling	
Step #5: Action Plan - What, who, when	

Workshop preparation included gathering a variety of materials—articles, books, pictures, statistics, job projects, exemplars, predication about future trends and needs, etc.. Faculty were asked to read or review the materials prior to the workshop, and copies of key articles were available on group tables at the workshop. The following areas were chosen for the four colleges:

- College of Business and Technology: Data Analytics (February 17, 2016)
- College of Education and Science, Group A: Teacher Education (March 9, 2016)
- College of Education and Science Group B: Healthcare (April 5, 2016)
- College of Arts and Letters: Liberal Arts Education (March 30, 2016)

The notes and action steps generated in each of the groups were collated and shared across each college. Departments were instructed to use these action steps as a foundation for their discussion and future planning in program reviews they would be conducting later that spring.

Annual Report Process: Academic departments have been completing an Annual Assessment Report, where they analyze assessment of learning outcome results and plan improvements, since 1997. The new Annual Report would add an administrative data component, where departments review key performance indicators and other data measuring program health and efficiency. The Academic Cabinet held extensive discussions about the kind of

administrative data to be analyzed that would serve as key performance indicators for an annual review. Some of the data desired could not be accurately extracted with current reporting capabilities, so the annual analysis focused on enrollment, class size, delivery, and graduation data. The Academic Cabinet also added a brief SWOT analysis and goal-building section, and a section where the department could highlight specific faculty, student, and alumni achievements. The Annual Assessment Reports retained their focus and format, but were made part of the new Annual Report.

The first version of the Annual Report was completed by all but one department between summer and fall 2016. The QI coordinator surveyed the department chairs and program coordinators in fall 2016 on their experience completing the first Annual Report. Some users reported that the electronic format for the 2016 version was problematic (couldn't save drafts, etc.) so a different format was chosen for the 2017 report. In addition, the 2016 version required the department to provide their analysis in two different forms, one for their assessment of learning report and one for their performance indicator analysis report. A majority of responses on the survey showed a preference for completing only one report annually. Therefore, the 2017 report was completed as one report in one electronic location, combining the assessment report and the administrative report.

The 2016 report format did not include a section for the dean's feedback, so deans were asked to provide their feedback to department chairs in individual meetings and compile their summaries on a separate spreadsheet. Needless to say, the deans found this method unwieldy, and the 2017 report format included a section for the deans' feedback to the department within their Annual Report.

Comprehensive Program Review (CPR) Process: Examples of outlines and forms used by other institutions for program review, including several shared at the Higher Learning Commission conference, were considered by the Academic Cabinet. The model chosen was adapted from Robert Dickeson's work, *Prioritizing Academic Programs and Services: Reallocating Academic Resources to Achieve Strategic Balance* (Dickeson, R., 2010). Then, in fall 2015, the outline was shared with faculty by means of an online survey for their input. In addition, the survey asked faculty for their perspective on the following:

Issues of Quality

- What are some of the indicators of a quality academic program in your academic discipline? (e.g., Faculty scholarship? External accreditation/validation? Number of students? Achievement of graduates? Facilities? Etc.)
- What are some indicators of quality online programs? Traditional programs? Graduate programs?

Innovation

- What does innovation in higher education mean to you?
- Describe something innovative you've seen or heard/read about in higher education.

The Process

- What role might you see in the program review process for an external reviewer for your programs (i.e., someone from your field)?
- Who should review the program review report (e.g., your dean, other administrators, panel of faculty and administrators, etc.)?
- What would you see as some possible outcomes of a program review process?
- Comprehensive program reviews for many institutions follow a cycle, e.g., a certain proportion of departments undertake a review every three, five, seven years, and so on. Some have different time cycles for new programs, old programs, types of programs, etc. What time cycle would be the most useful to your department to support quality improvement and growth?

The survey on the proposed CPR process did not generate changes to the content of the review but it did indicate a strong interest in including an external reviewer as part of the process. There were more specific refinements made to the CPR template during a meeting with the department and program chairs who volunteered to be the first to conduct the new CPR. Their suggestions led to a more detailed timeline for the review panel, the development of qualifications for an external reviewer, direct access to full- and part-time faculty CVs, and the embedding of links to resources on program and employment demand, the syllabus evaluation rubric, and the instructions for viewing aggregate instructor/course evaluations.

Once the first five departments had started the CPR, further refinements were made in the wording of some of the prompts to clarify meaning. When the target due date arrived in December 2016, none of the five departments had completed reviews. The target due date was changed to March 2017. By July 2017 all five final CPR reports were submitted. Completed CPRs include a report from the panel of reviewers in the form of a rubric responding to specific elements of the review.

The next step in the process is the use of the data for decision-making regarding programs. In August 2017, the Academic Cabinet outlined the steps that follow the completion of the CPR:

1. The departments write a response to any concerns of the review panel and draw up a set of action plans that derive from the work of the review and the panel's input.
 2. The dean writes a response to the department plans and makes recommendations for each program as to maintaining, increasing, monitoring, or suspending the program.
 3. The Academic Cabinet reviews the dean's response and makes final recommendations. This is the stage the QI is in at present.
3. Evaluate the impact of the initiative, including any changes in processes, policies, technology, curricula, programs, student learning and success that are now in place in consequence of the initiative.

The most significant impact is the incorporation of systematic program review into the role of every academic administrator, including department chairs, deans, vice-presidents, provost, and computing staff. The regular, periodic look-back coupled with intentional scans of the higher education, market, and industry environments affirms what programs are doing well, investigates problematic areas, and explores areas for potential growth. Deans reported that they learned much more detail about the quality and functioning of programs in their college.

The collaboration brought to bear on the review process has strengthened department communication and effectiveness. For example, one respondent to the 2017 survey on the new review processes noted that the CPR provided the opportunity for: "Utilizing best practices from other departments to share throughout the college;" Another supplied: "This was a great opportunity to engage with other colleagues in examining our own program data, and have rich discussions on what the data means for our program enhancements. Another great opportunity that resulted from this process was to learn how other departments organize and utilize their data, and use this information to enhance our program reviews."

Another significant impact of the regular program review is the establishment of trend line data that can inform planning and decision-making. The data reports created by academic computing for the Annual Reports can be used from year to year, and the requirement that departments analyze data from the same sources allows for comparison of indicators across departments. The demand for useful data for program review also brings refinement of CSP's data analytics across the university.

4. Explain any tools, data or other information that resulted from the work of the initiative.

In the course of developing a consistent program review process, several standard forms and rubrics were developed. The CPR form went through a few versions based on input from the users. After all departments have completed their CPRs, another review of the form will determine whether any further revisions would be valuable.

The CPR process for the first cycle participants also generated some benchmark comparisons that the department can use going forward for planning and goal-setting. These may change over time, but can provide a starting point for the next cycle of comprehensive reviews.

The Annual Report form was created for the annual program review and will be used going forward, with appropriate revisions determined by the value of the data available. Data reports were built by academic computing staff to provide longitudinal administrative data, which will be used for future annual reviews.

A syllabus evaluation rubric was created for evaluating the effectiveness of syllabi in communicating a learner-centered approach. This tool can also be used on an ongoing basis by departments with new courses and for orienting new instructors. A rubric was also created for the review panels to use to provide consistency of focus and quality measures.

5. Describe the biggest challenges and opportunities encountered in implementing the initiative.

In the 2017 survey of participants in the new program review processes, several challenges were noted. With regard to the CPR, the most frequently cited challenge was the time required, especially without the freeing up of time from teaching or other administrative tasks: “Sheer amount of time it takes;” “One challenge was keeping the process on schedule as faculty are very busy;” “Working on it during the teaching term;” “Finding the large blocks of uninterrupted time need to complete the report. Coordinating schedules with department members and outside reviewers to meet together to work on the review;” and “Time is always a challenge, but by making this process a priority it helps make the process a reality.”

Several noted that it was challenging to find the data to respond to some of the questions, for example, regarding program demand and job outlook, especially in programs not directly leading to a specific job: “Knowing where to find data.”

Another challenge had to do with ongoing record-keeping by departments: “A lack of detailed record keeping.” Some information from the past was filed in paper form while other data is in digital formats. Going forward, having departments use common, digital storage formats will make access and review easier, as will setting expectations for the types of data and materials to retain.

As is to be expected perhaps, there were some initial challenges with technology in building electronic forms, and creating and accessing data reports. Once those problems were addressed, clearer instructions helped participants use the software and data tools they needed.

Some survey respondents found the open-ended review questions quite challenging. A second version of the CPR template sought to clarify those items using some examples, and that version was reported to be more helpful.

The opportunities encountered by the program review process that were reported in the survey were largely in the form of providing the focus and priority for making necessary improvements that might not otherwise have occurred if the review process had not taken place. The fact that an entire department is involved in the review also provided an opportunity for collaboration and reflection that may not otherwise have occurred in the normal course of things. “This was a great opportunity to engage with other colleagues in examining our own program data, and have rich discussions on what the data means for our program enhancements. Another great opportunity that resulted from this process was to learn how other departments organize and utilize their data, and use this information to enhance our program reviews.”

Several especially appreciated the opportunity the review afforded to collaborate with new colleagues and get to know them and the talents they bring: “the opportunity to work closely with colleagues on the review opened the door to a new and positive collegiality. In working with all in the department, but especially the new faculty, this work gave me a very positive and solid understanding of my fellows' strengths and areas of expertise--some that I had not previously been apprised of. I foresee the opportunity for new partnerships and collaboration on future projects.” Others noted the opportunities that having hands-on data provided: “Opportunity to make decisions with data instead of hunches.” and “Getting more data in the hands of those who can/should use it.”

The review also provided the opportunity for strategic thinking and innovative idea-generating. Participants noted that their review uncovered several new opportunities for growth in programs and partnerships and for outreach to students and the community: “The discussion and data analysis that took place sparked new ideas for programs and partnerships.” and “The review processes provide a platform for collaborative goal setting that can feed into college strategic planning.” and “The ability to look at the programs with fresh eyes and an innovative spirit.”

Commitment to and Engagement in the Quality Initiative

6. Describe the individuals and groups involved at stages throughout the initiative and their perceptions of its worth and impact.

The people involved in the program review initiative were department chairs, department faculty, college deans, executive administration, and administrative computing staff. The associate vice-president for assessment and accreditation coordinated the process. The 2017 survey that followed the completion of the first CPRs asked these individuals about their perceptions of the new program review process. Some had only participated in the annual

review (Annual Report) and others were the first to conduct the comprehensive program review (CPR). Here are their responses:

Question: In your role in the program review processes (e.g., as dean, department chair, faculty, etc.), what do you see as the biggest value and impact coming from the regular program review process?

Opportunity to provide a short, mid and long term view of the program in order to adjust and add quality to the coursework.
The pulling together of all the data helped the department to assess its current circumstance, affirmed its efforts, and identified the challenges before us.
Time spent with colleagues reviewing our past and planning for the future.
It gives the opportunity to concentrate on past progress and analyze, in an objective way, strategies for future improvement. It "forces" the opportunity to be taken, otherwise many other pressing details take priority. It also takes into account not just an internal review, but external examination as well. This results in continuous improvement.
As Chair of a program that does not operate in traditional academic cycles the best value comes from a regular and clear time to review and build in future improvements.
The ability for continued development and improvement of programs and courses
It gave our department a chance to work collaboratively and come to consensus on our strengths and opportunities.
The program review processes gives departments (programs) a chance to communicate their strengths and needs to the administration. Departments have an opportunities to review what is working well in their program, what needs revision, and where growth may occur.
The program review looks at market conditions as well as fiscal viability of the program so as not to put a fiscal drain on other programs.
Being able to quantitatively and qualitatively describe and prove the high value and excellent work of our department.
Getting everyone in the department to think innovatively and making bold changes that really impact student learning.
Future planning
Comparative data with other programs is very helpful, and also seeing through internal/historical data what the needs are in our department.
Work done in the comprehensive review process allows time to critically reflect on and evaluate my role in the bigger picture--how what I do contributes to the goals and objectives of the university and its students.
Dedicated time for faculty to examine future trends and to design curriculum that is relevant to student needs.
Concrete goal development to improve programs were discussed and developed between faculty, chairs, and dean.
Making chairs and deans more aware of the reality of how many students are in their programs. Giving them facts instead of relying on supposition.
1) Utilizing data to inform decisions. For example, if an outcome is not being met, departments should utilize this data to strengthen the curriculum in order to more intentionally focus on that particular outcome. 2) It demonstrates a commitment to ongoing evaluation in a systematic manner. Assessment is important and this process demonstrates the university's commitment to ensuring it occurs. 3) It emphasizes continuous improvement. This relates to 1 and 2, yet is slightly different because it encourages continuous conversation and continuous planning in order to focus on desired outcomes.
This process has been long and arduous for all involved. I am proud of the three departments who led the way. I think the greatest benefit derived from this process is the accumulation of data which can provide both encouragement (for things they are already doing well) and guidance for improvement. Departments may see that they are not as robust or involved in certain areas, such as contact with alumni or consulting best teaching practices in their field.

As a faculty member, i see the largest impact coming from the analysis of our program reviews, where we identify program strengths and challenges.
To review and codify all that is currently being accomplished by the department to benefit students in the department and throughout the university.
The process is important in that it encourages the collection of data and a review beyond the day to day operations.
The process allowed for review and reflection on what our current processes are and started discussions on if those processes are working. In some instances this process lead to updates and improvements.
ongoing quality improvement of teaching and student learning

7. Describe the most important points learned by those involved in the initiative.

Members of the Academic Cabinet, in discussing their reflections on the program review process, noted the importance of clarifying benchmarks in evaluating program performance and communicating how the results would be used. They concluded that honest assessment of quality, including problem areas, requires a transparent process that focuses on improvement.

Because of the amount of time and effort a high-quality comprehensive program review requires, the Academic Cabinet determined after the first round of completions that the CPR cycle would be lengthened from every three years to every five years.

In the 2017 survey to program review participants, respondents were asked to list the most important points they learned from their role in the program review process; their responses are included below.

I learned that doing the review well required much more time and effort than I anticipated. I learned that my departmental colleagues do high quality work and did so within the constraints with which we were working. They always came through in a timely way. I didn't learn anything new about the department. Rather the process brought into focus and gave clearer articulation to my less-than-formal insights.
The feedback we received from our reviewers supports our feelings about our offerings.
Deeper reflection on the areas being assessed; gaining input from internal and external populations.
I think first and foremost I find so much affirming about our program. The most important learning point I learned is to double my efforts to make sure consistency of delivery and expectations run the program duration. The external reviewer of the comprehensive report made some excellent comments. Had we not conducted this review.....I have to honestly say I don't think I would have asked for such extensive feedback.
Reviewing the history of where our programs have been
My most valuable take-away from the program review process has been a deep respect for the colleagues in our department and gratefulness that we have a good collegial relationships among the members of the department.
The review process gave us data on how our department functions relative to competitor departments regionally. It also gave us data on how efficiently our department functions relative to national programs. It also reinforced my awareness of the excellence of our faculty.
giving insight in the early stages so that a program does not get too far down the path if it is not a good fit against the 5 gates
That we are extraordinarily efficient in comparison to other music programs (95th percentile compared to peer group in ratio of revenue generated to budgeted funding).
Implementing a good idea takes time. Time has to be allotted to planning, organizing, and carrying out a new initiative, or it won't be done well.
Giving feedback, sharing insights
I found it helpful to refine my own teaching. Reinforcement of the department's thoughts from outside sources was important as well.

I gained a better understanding of how the courses I teach fit with the broader goals and objectives of the department and the college in which I teach. This analysis and reflection gives direction to future curricular work.

I had the opportunity to consider how linking the learning objectives for my general education classes supported the foundations of students' general education. Such analysis will strengthen assessment work in the future.

Most of all, I appreciated the time I had to engage in meaningful discussions with my department colleagues, especially about what we do as a department and why our work matters.

One point is that definitions must be clear and that faculty perceive a standardized playing field in terms of the data that is used. Introducing innovation processes early in the review is also important.

Feedback is most appreciated that provides concrete value and links well to college strategic initiatives.

Finding out what the review panel members wanted to see with regard to statistics and getting a clear definition.

-It is important to have data inform action. For example, one department noted an outcome was not being met, yet their follow-up did not link their activities to this data. It allows me the ability to support the department in the continuous improvement process through the review process (department to dean).

-It is important to know that we have resources on campus and departments that are completing high quality assessment work. Leveraging more of these examples to share with others could help strengthen all departments, all programs, and the entire assessment process.

I learned new things about the unique characteristics of, demands on, and practices within individual departments. I learned that I have an important role to play in helping departments question their own assumptions about problems they are having and the ways they might seek to mitigate them. By the same token, I have enjoyed seeing the tremendous amount of success they and their students have enjoyed. Ongoing encouragement is important.

I learned about areas of improvement for our department when reviewing our program. When reviewing another program, I also learned how other departments conduct their own "checks and balances" and use input and feedback from students to review and enhance their courses, and make program changes.

The department is educating many students throughout the university through its ensembles and general ed courses. Often the assumption is that a music department is a financial drain to a University, but at Concordia that is not the case, the department is paying its way and "making" money for the University.

I am encouraged at the breadth of information collected and the opportunity for feedback.

I think that reviewing the process lead to many insights. Then through feedback to areas the insights could be reviewed and change possibly implemented but without the review process nothing would change or be uplifted as working.

faculty are better informed with quantitative data in order to make decisions

Resource Provision

8. Explain the human, financial, physical and technological resources that supported the initiative.

The most significant resource by far that has supported this initiative is the human one. Extensive time on the part of the QI coordinator and VPAA was spent in reviewing practices from other institutions, seeking input from deans and faculty users, creating clear, unambiguous templates, training deans and department chairs in how to navigate the review process, designing and administering feedback surveys, and responding to questions and requests for data from departments. The two staff members of the academic computing department spent time creating specific data reports for use in the annual and comprehensive reviews. Deans and review panels contributed time to evaluate results and give feedback to departments.

The innovation workshops included expenditures for a stipend for the developer/presenter, Dr. Brynteson, and for hospitality and materials for participants. The comprehensive program review process includes a review panel with an external evaluator from outside the institution. The external evaluators receive an honorarium of \$500.

Plans for the Future (or Future Milestones of a Continuing Initiative)

9. Describe plans for ongoing work related to or as a result of the initiative.

Survey responders provided lots of ideas for preparing for upcoming tasks related to program review, especially the collection and organization of data and documentation. Strategies for effective management of information will become part of the training and preparation of program and department chairs. Their statements are below:

Of greatest value was the gathering a data and materials into repositories. We will be well prepared for future reviews, if we can keep such repositories current. We will also plan to provide a year to get the work done, rather than trying to compress the work into four to six months. In the meantime, we hope to see greater evidence that such report preparation actually matters in university operations and decision making.
Finding more efficient ways of collecting data from an ever growing constituency. Also, finding ways to differentiate data received. For example, how do general education students view our offerings differently than students in our math program or computer science program? Will we continue to be a value added to science and business programs?
Plan and schedule time for the process; ask for input from stakeholders on a more frequent basis
Knowing what to expect next time will go a long way. I plan on tracking the elements from the program review as best I can so I can spend more time on the analysis of the data and less on the retrieving of it. I also will make plans to know when to expect it and the exact due date and make sure to get it done. Often my best intentions to work on it were ruined by the urgency of the moment.
Better record keeping
Formalizing time for all the programs to do it so that it gets accomplished. Several key programs have not given it the attention that they should.
Make sure that more decisions are documented and filed.
Set up a more concrete schedule earlier on in the process, as there are so many different steps to cover.
if the program review in the next cycle requests similar data and the process remains substantially unchanged, it would be beneficial to collect data, observations, etc. throughout the semesters. In that case, comparisons could be made to data from this review, considering this year's work as a base line. This would allow more time for trend analysis in any future review process.
As mentioned above, I would definitely utilize our digital storage options, such as eLumen and Google Drive, so the data will be easily accessed when it comes time to conduct program reviews.
Document along the way and always have a mindset for program review.
ongoing systematic data collection

Others emphasized the importance of knowing how the results of their significant efforts would be used outside the department: "I would want to know that our work on the program review would be used by the administration in strategic planning for the future" and "Before we start the process, it would be helpful for us to know how the CPR will be used and who will eventually be looking at it, and for what purpose. If we have a sense that it will be used for strategic planning, it could help to properly prioritize this task in our work schedule." Given this desire for greater clarity, the Academic Cabinet is working to make a more transparent link between program review outcomes and planning and resource allocation. It will also be important to help departments to link their own review outcomes and departmental goals to the institution's strategic goals.

In order to continue the focus on innovation and strategic thinking, the revised CPR forms will include a specific reference to the action plans generated during the spring 2017 innovation workshops and ask departments how they plan to address innovation on an ongoing basis.

10. Describe any practices or artifacts from the initiative that other institutions might find meaningful or useful and please indicate if you would be willing to share this information.

CSP has learned a great deal from this Quality Initiative process and would gladly share our experience building a program review process. The tools and forms we developed, such as the surveys of participants, the report templates, the evaluation rubrics, and the administration response forms, could be valuable for other institutions embarking on a similar effort. The innovation workshops provided a valuable collaborative activity to promote and model the kind of future-oriented thinking and planning that we want to see occur in a program review. Other institutions might find it helpful to learn how those workshops came about and what outcomes resulted from them.