



TEXAS A&M UNIVERSITY  
Division of  
Student Affairs

## Comprehensive Program Review Guidelines 2024

Office of the Vice President for Student Affairs  
Texas A&M University

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## INTRODUCTION

### History of Comprehensive Program Review in the Division of Student Affairs

The purpose of this manual is to provide a framework for departments who are continuing their journey of continuous improvement through self-assessment. The journey began in the Division of Student Affairs (DSA) in the fall of 1997 when comprehensive program review (CPR) was introduced into the division and piloted by the Department of Student Life. (See Appendix A for the department timelines.)

Every department in the Division of Student Affairs at Texas A&M University wants to satisfy its students and stakeholders, and every department wants to achieve state-of-the-art results. Achieving both requires an organization that can perform consistently, is aligned throughout the organization, can be innovative, and can react quickly to a changing environment. It also requires a motivated, well trained, committed, and passionate staff. Continuous improvement becomes a way of life.

CPR was the first step for the Division of Student Affairs and its departments in becoming a continuously improving future-focused organization. Understanding what our departments do was the first step in improving what we do. CPR is built on self-assessment as a team-based tool, not a top-down evaluation. Top-level commitment from departmental leadership and division leadership is imperative to follow through with the actions that come out of self-assessment.

The DSA CPR is based on professional standards from the Malcolm Baldrige National Quality Award (MBNQA) Education Criteria for Performance Excellence and the Council for the Advancement of Standards (CAS) in Higher Education. In addition, iterations of CPR build on the outcomes of a department's previous CPR and moves from description extensive to evaluation extensive processes and outcomes. This CPR leads to planning and implementing incremental actions and cycles of improvements that contribute to the division's vision of being high-performing division.

Beginning in 2014, departments who have been through the second iteration of CPR are allowed to use the Council for the Advancement of Standards in Higher Education (CAS) guidelines. The process still includes a self-study, external review, and strategic response. The CAS self-assessment allows departments to benchmark programs and services based on generally accepted professional criteria (Yancey Gulley, Dean, & Dean, 2017).

## **Purpose, Goals and Principles**

### Purpose

Comprehensive program review (CPR) in the Division of Student Affairs at Texas A&M University is a formal and meaningful assessment of how well a department achieves its stated mission, goals and outcomes, and the identification of ways to sustain and create program excellence. It is a process of purposeful, reflective self-study, external review, and action planning. It should help departments identify how they can be an excellent department at Texas A&M and among their peers.

### Goals

- Provide evidence of quality by confirming the effectiveness of a department's programs, activities, services, and operations
- Encourage strategic thinking about a department's future
- Shape short- and long-term planning efforts that coordinate with the department's own operational and strategic planning processes
- Assist with a department's resource allocation decisions by providing evidence of need and effectiveness
- Provide understanding of the department's overall contribution to the mission and goals of the Division of Student Affairs and Texas A&M University
- Support the expectations of Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) standards for institutional effectiveness
- Evaluate the extent to which a unit has successfully established student learning and program outcomes and provided evidence of attainment
- Utilize the university's assessment plan process for outcomes assessment

### Principles

All student affairs units contribute to the work of the division and therefore will be a part of the program review process.

What is gained from the process of program review is as important for attaining program quality and effectiveness as is the self-study report or conclusions derived from the external review process. Broad faculty, staff, and student participation in the reviews is essential to gain important insights and ideas for improvement as well as a broad recognition and understanding of the department under review.

While this manual provides structure, Comprehensive Program Review is a flexible process to meet the individual needs of each department and the Office of the Vice President.

See Appendix B for a glossary of key terms used in this manual.

## LOGISTICS Responsibilities

Comprehensive program reviews are most successful when all participants in the process understand and carry out their respective responsibilities completely and in a timely manner. This section outlines the suggested duties and timelines of the reporting associate/assistant vice president (AVP), Student Affairs Planning, Assessment & Research (SAPAR), the department under review, and the external review team (ERT) leader.

### Responsibilities and Timeline

		SAPAR	Department CPR Coordinator	Department Director	Reporting AVP	External Review Team Leader
<b>Time Before External Review Team Visit</b>						
11 months	Initiate meeting with SAPAR director, department director, and AVP to review process and expectations	x				
10 months	Identify the departmental CPR coordinator and self-study team			x	with	
10 months	Schedule department workshops or CAS survey	with	x			
9 months	Orient self-study team	x				
9 months	Self-study team begins regular meetings and works on department profile		x			
9 months	Send departmental profile to SAPAR for feedback		x			
9 months	SAPAR provides feedback on departmental profile	x				
9 months	Make the department profile available to all department staff		x			
8 months	Provide departmental staff the self-study or CAS questions one week before the department workshop or CAS survey sent	x				
8 months	Hold department workshop/ CAS survey	x	x			

		SAPAR	Department CPR Coordinator	Department Director	Reporting AVP	External Review Team Leader
8 months	Identify focus areas for external review. Brainstorm external review team leader (AVP will make final selection)			x	x	
8 months	Select dates for the external review team visit	with	x	x		
7 months	Begin writing self-study report		x			
7 months	Decide how the director staff/senior leadership will edit self-study category reports		with	x		
7 months	Decide how all staff will be able to see draft self-study report		x			
6 months	Send draft self-study category reports to SAPAR for feedback as they are done		x			
6 months	Provide feedback on draft self-study category reports	x				
6 months	Invite external review team leader (invitation from AVP and SAPAR director)	with			x	
5 months	Initiate contract process and W-9 form for the external review team leader	x				
5 months	Send contract to Contracts Administration				x	
5 months	Decide on payment process for all expenses	x	x			
4 months	Invite external review team members (DSA director, faculty, etc.)				x	
4 months	Send welcome letter from AVP and SAPAR director with manual, expectations, and report template	x			x	
3 months	Brainstorm stakeholder groups that external review team should meet with		x	x	x	
3 months	Initiate progress meeting with SAPAR director, department director, and AVP to review process and expectations	x				
3 months	Draft external review team schedule (AVP review)		x	x	x	

		SAPAR	Department CPR Coordinator	Department Director	Reporting AVP	External Review Team Leader
3 months	Working with the administrative staff in the OVPSA, schedule VPSA meetings (reporting AVP for the first/overview session, VP/AVPs interview as a group, VP/AVPs in the exit interview)		x	x		
3 months	Schedule meeting with division directors		x	x		
3 months	Invite stakeholders to appropriate interviews—provide explanation of the purpose of the interview		x	x		
3 months	Schedule travel and lodging for external review team leader		x			
3 months	Finalize self-study report through department director and senior leadership team		x	x		
3 months	If using an editor, complete report goes to editor		x			
2 months	Create Teams/Google Drive for schedule, self-study report, supporting documents, etc. and share access with external review team (if needed)	x				
2 months	Send external review team and SAPAR director the schedule of the visit	x	x			
2 months	<b>Send self-study report to external review team and SAPAR director</b>	x	x			
2 months	External review team leader contacts external review team for (electronic) introductions and expectations					x
2 months	Brief staff on progress of self-study report, external review team selection, and timeline			x		
2 months	Make self-study report available to entire department		x			
1 month	Order food for external review team visit (check on dietary restrictions)		x			



		SAPAR	Department CPR Coordinator	Department Director	Reporting AVP	External Review Team Leader
1 month	Request guest user account for internet access, if needed		x			
1 month	Create a plan to disseminate themes from the external review team with the department and develop an action plan from the final external review team report		x	x		
1 month	External review team leader contacts team to get initial thoughts and brainstorm questions for each interview					x
2 weeks	Prepare department staff on external review team visit (purpose, types of questions, outcome, etc.)		x	x		
1 week	Send reminders to stakeholders about meeting times		x			
1 week	Print nameplates for all meeting attendees, including external review team		x			
1 week	Prepare thank you notes and gifts (if applicable) for external review team		x			
1 week	Purchase (healthy) snacks and beverages for ERT		x			
	<b>EXTERNAL REVIEW TEAM VISIT</b>					
<b>Time After External Review Team Visit</b>						
1 week	Send thank you notes to self-study team			x		
1 week	Celebrate the process and product with all staff		x	x		
1 month	Send draft report to SAPAR director					x
1 month	Review draft report for completeness	x				
1 month	Send draft report to reporting AVP	x				
1 month	Send draft report to external review team leader with	x				

		SAPAR	Department CPR Coordinator	Department Director	Reporting AVP	External Review Team Leader
	corrections or questions using track changes					
1 month	Make edits as needed					x
1 month	Send final report to reporting AVP and SAPAR director					x
1 month	Meet to review/share report			x	x	
1 month	Process payment for external review team leader	x				
2 months	Submit action planning report to AVP, could include strategic plan with timelines and responsible parties			x		
1 year	Director meets with AVP and SAPAR director to review progress	x		x	x	
2 years	Director meets with AVP and SAPAR director to review progress	x		x	x	

## Budget

Each department has been allotted a maximum amount \$8,000 for the entire CPR process. AVPs and department directors have some flexibility on how to budget for this process. Prior approval must be granted by the reporting AVP if departments want to exceed the \$2,000 team leader stipend.

### Sample Expenses:

External Team Leader(s) Stipend	\$2000
External Team Leader(s) Travel/Lodging/Parking	\$1000
Meeting Room Rental	\$600
Food during Self-Study Workshops	\$1500
Food during External Review Visit	\$1000
Editor/Designer (not typical)	\$2400
Scribe (optional)	\$500

The Office of the Vice President provides financial support for the external review process and has delegated this responsibility to Student Affairs Planning, Assessment & Research. Any questions about the accounting process may be referred to the director of Student Affairs Planning, Assessment & Research or Student Affairs Business Services.

The stipend will be supported by a Texas A&M Services Agreement (see Appendix C). The stipend will be paid upon receipt of the acceptable first draft of the written external review team report. The external review team leader will need to submit a W-9 form for payment.

Expenses incurred as the department implements the CPR process can be charged directly to the Student Affairs Planning, Assessment & Research CPR account for your department, provided to you early in the process. Documentation and originals of all receipts must be forwarded to Student Affairs Planning, Assessment & Research. All charges made should follow the Student Affairs Business Services processes, including submitting receipts through the Goods & Services forms. *The CPR coordinator should meet with the departmental business person and/or DSA business staff to review the purchasing and allocating processes. In addition, the CPR coordinator should be in contact with Student Affairs Planning, Assessment & Research before charges are incurred.*

Travel, meals, and lodging costs should be within reason. For example, the flight should be coach class, the team dinners should not be at the most expensive restaurants, and the hotel room does not need to be a suite. No alcohol may be purchased from this account. Gifts for the external review team are the responsibility of the department and should not be charged to Student Affairs Planning, Assessment & Research.

## **THE SELF-STUDY**

### **Goals of the Self-Study**

The department's self-study process and report provide the basis for the entire review process. The department makes a candid assessment of its strengths, opportunities for improvement and future directions toward the next level of excellence. The categories are intended to provide a structure for the review and should be augmented by results as the department deems necessary to create an effective self-assessment. For departments following the CAS Standards, the self-study will follow the functional area(s) Self-Assessment Guide.

In general, the purpose of the self-study process and report should be to address how well the department performs in relation to its mission, outcomes, and institutional and divisional goals and strategic initiatives. It provides evidence of the excellence and effectiveness of the department's programs, activities, services, and operations, primarily within existing resources.

### **Components of the Self-Study**

The self-study process is comprised of the following:

- Orientation for Self-Study Team—Student Affairs Planning, Assessment & Research will review the purpose, goals and processes for the CPR process and the specific components of the self-study process.
- Departmental Profile—The self-study team will write the brief department profile (Appendix D) and share with the department before the staff workshop.
- Data Collection for Department—In the DSA model, the (all day) workshop will consist of brainstorming the responses to most of the self-study report questions. In the CAS model, the meeting will consist of an overview of the CAS criterion measures, practice responding to questions to develop consistency, and brainstorming available evidence.
- Self-Study Report—In the DSA model, the report will be answers to all the questions (Appendix E), summaries for each category (strengths, opportunities, actions), major findings and recommendations, and supporting material. In the CAS model, the report will consist of the summary responses to the qualitative and quantitative questions, any areas of unresolved discrepancy, and evidence and documentation. Under both models, there will be a findings and recommendations section (Appendix F).

### **Selecting the Self-Study Team**

The department director should select a self-study team to represent all units and levels of the organization. The team should be a manageable size (usually four to six people depending on department size and scope) and have time to devote to the process, including attending meetings and contributing to the writing. The CPR coordinator will be responsible for overall logistics, scheduling

meetings, writing/editing the self-study report, and communicating with the external review team about logistics.

## **SELF-STUDY REPORT FRAMEWORK**

Regardless of the model used, the self-study report is a structured document that provides a comprehensive look at the department, its functions, and areas that could be improved. The report should be concise, but thorough in the analysis. The appendices can provide supporting material and context to keep the actual report manageable.

### **Departmental Profile Overview (10 pages or less)**

The departmental profile (Appendix D) sets the context for the way the department operates. The environment, key working relationships, strategic challenges, and previous recommendations and follow through from the last comprehensive program review serve as an overarching guide for the departmental performance management system.

The departmental profile is critically important because:

- It helps everyone understand what is most relevant and important to the department and its performance both now and since the last CPR.
- It helps identify potential gaps in key information, key outcomes, and results.
- It also may be used by itself for an initial self-assessment prior to initiating a full comprehensive program review. Topics for which conflicting, little, or no information is available, can be used for action planning.

The departmental profile should be completed by the self-study team and reviewed by Student Affairs Planning, Assessment & Research before the departmental workshops/meetings. All departmental staff should have the opportunity to read the profile before the departmental data collection occurs (usually by posting it in a shared drive). Because the self-study will be read by people without previous knowledge of the department or functional area, it is helpful to avoid jargon/acronyms or at least include a glossary of terms.

### **Departmental Performance Evaluation**

For departments using the traditional Division of Student Affairs model, the categories will be:

- Category 1. Functions and Services for Students and Other Stakeholders
- Category 2. Human Resources/Staff
- Category 3. Financial Resources
- Category 4. Facilities, Equipment, and Technology
- Category 5. Legal, Ethical, and Risk Responsibility
- Category 6. Assessment and Evaluation

- Category 7. Planning
- Category 8. Leadership
- Category 9. Outreach and Engagement
- Category 10. Process Management (optional)

The report will provide answers to the questions (See Appendix E) and then articulate 3-4 strengths, opportunities for improvement, and actions for improvement. Each category should be sent to Student Affairs Planning, Assessment & Research for review as it is completed. The total length should be about **40 pages**. As much as possible, each category should be self-contained. When responses in one category can reinforce those in another, refer to other responses rather than repeat the information.

Use tables, graphs, flowcharts, and bullets to present information concisely while still maintaining reader friendliness. All graphs, tables and charts should be labeled for easy interpretation.

For departments using the CAS model, the categories will be:

- Part 1. Mission
- Part 2. Program and Services
- Part 3. Student Learning, Development, and Success
- Part 4. Assessment
- Part 5. Access, Diversity, Equity, Inclusion, and Justice (adapted)
- Part 6. Leadership
- Part 7. Human Resources
- Part 8. Collaboration and Communication
- Part 9. Ethics, Law, and Policy
- Part 10. Financial Resources
- Part 11. Technology
- Part 12. Facilities and Infrastructure

For each CAS area, each staff member will respond individually to rating scale and open-ended questions (usually through a web-based survey; consult Student Affairs Planning, Assessment & Research for assistance), including the rationale and evidence for the rating. The self-study team will then review the findings, resolve the rating discrepancies, and identify strengths, areas for improvement, and action plans.

Contact Student Affairs Planning, Assessment & Research for the CAS Standards Self-Assessment Guides for the functional area(s) addressed.

### **Major Findings and Recommendations (4 pages or less)**

Discuss major findings and recommendations (Appendix F) and identify overarching themes and preliminary suggestions for (prioritized) action plans, which could include timelines. This section should be sent to Student Affairs Planning, Assessment & Research for review before the final document is submitted.

## **Appendices**

- A. Organizational charts (university, division, and department)
- B. Staff profile and staff involvement forms (See Appendix G of this document)
- C. Other pertinent information (University strategic plan, division strategic plan, department assessment plan, department strategic plan, department business continuity plan, etc.)

The self-study report should be shared with all staff in the department and should represent consensus, or it should state the nature of differences in viewpoints before it is submitted as a final report.

The final report should be sent electronically to Student Affairs Planning, Assessment & Research and the department's supervisor in the Office of the Vice President for Student Affairs for review for completeness before it is sent to the external review team.

## **EXTERNAL REVIEW**

### **Goals of External Reviews**

External reviews provide a professional and neutral evaluation, analysis, and recommendation to improve the quality of the department's programs and/or services. External reviews bring new perspective, fresh insight, and new ideas to the department's self-discovery that occurs during the self-study process. In addition, the external review offers the opportunity for the department to be examined in the context of national trends and standards.

Specifically, the external review team is asked to consider:

- How well the department carries out its mission and how successfully it serves students and other stakeholders
- The department's potential to serve students and stakeholders with future services and programs
- The adequacy of student learning and development opportunities in current programming and services
- If the department has adequate processes to evaluate the effectiveness of its student and program outcomes and if that feedback is applied to practice
- If staff, programs, services, and activities are appropriate given the human and physical resources
- If the activities address institutional, community and state/regional/national needs and trends
- The major limiting factors in quality improvement and the future growth and development of the department. What changes could raise the department to the next level of excellence?
- Specific needs that the reporting AVP or director wish to include

Along with the department's self-study report, the external review team report provides the department suggestions for future, long term planning, and the report is integrated into the department's final action planning document.

### **Components of the External Review**

The external review process is comprised of the following:

- An off-site document review of the self-study report
- On-site review visit (see Appendix H for sample schedule)
- A preliminary presentation of findings while on-site
- A written report delivered within four weeks of the on-site review



## Selecting the External Review Team

Based on the goals of the CPR, the reporting AVP will determine the external review team leader and members in consultation with the department director six to eight months prior to the planned on-site visit.

The external review team leader should lead or have led exemplary divisions/departments of similar size and scope of the Division of Student Affairs department. The external review team leader, as an expert in the field/profession, is encouraged to evaluate the department in its national context and provide insight and feedback on issues and trends particular to the department under review. See Appendix I for communication examples.

In addition to the team leader, the review team is comprised of a faculty member and/or academic administrator and a student affairs department director. It is helpful for the faculty/administrator to have had some time at Texas A&M for context and history. Students (undergraduate and graduate) may be on the team, although they are expected to not miss class. Additional/different external or internal members with specific expertise or relevance to the department will be considered as appropriate (e.g., alumni, community members, or another external expert).

## External Review Team Responsibilities and Expectations

The department undergoing comprehensive program review (CPR) relies heavily on the expertise of the external review team leader and team members to provide insightful recommendations to move the department forward in its programs and services. The team leader will quickly build a cohesive team to engage stakeholders in interviews and to write a comprehensive report.

### Prior to the Site Visit

The team leader will contact the team for (electronic) introductions and any initial expectations and thoughts about the process. The department CPR coordinator/director should ensure that the self-study report is sent to the external review team in plenty of time before the actual visit: **ideally at least two months before the visit, definitely at least one month prior**. Upon the receipt of the self-study report and the schedule, the external review team leader will follow up with the team about initial questions and approaches to the visit. It is helpful to brainstorm initial questions for each interview before the review starts. Team members are expected to read the self-study report and supporting documentation. The team may also recommend additional interviews.

### During the Site Visit

During the site visit, the external review team will participate in the following activities:

- Welcome and orientation
- Planning time for the team to finalize interview questions, formulate a plan for the interviews, and strategize how to process the information (facilitator, note-taker, timekeeper, etc.)
- Meeting with the vice president for student affairs, department supervisor (AVP), and division leadership

- Interviews with department staff at all levels
- Interviews with users and stakeholders of the department
- Processing time for the team to identify and discuss major findings and approaches to the written report
- An exit interview with the OVPSA the director of Student Affairs Planning, Assessment & Research, the department director and/or department leadership, and/or the self-study team
- A brief exit interview with the director of Student Affairs Planning, Assessment & Research about the CPR process

The external review team will be provided a room in which to conduct the interviews and have time to meet as a team. If the team should need anything during the visit, the CPR coordinator or the student affairs representative on the external review team will assist.

At the beginning of each interview time, the external review team leader should introduce the group and state the purpose of the meeting. Supervisors, staff hosts, and the department director should not be there, so that the participants feel free to discuss important issues openly. Team members should take notes during the interviews to capture responses and ideas to contribute to the report. (The department may choose to hire a scribe/note taker to capture interview responses.) The external review team may wish to hand out index cards for participants to also write down their answers anonymously, especially if it is a large group with a limited time. (If the cards are going to be collected and included in the report, be sure that participants know how the information will be documented.)

At the exit interview, the external review team will have the opportunity to verbally share preliminary findings and recommendations. There is not a set format for the exit interview.

### **Following the Site Visit**

Utilizing the agreed upon template, team members will contribute to the final report. Team members are responsible for contributing to and reviewing the written report, although the team leader is ultimately responsible for the completion of the report. The external review team leader should provide all external review team members an opportunity to review and comment on the report draft.

Within four weeks of the visit, the external review team leader will email the draft report as a Word document to the Student Affairs Planning, Assessment & Research (SAPAR) director who will share it with the AVP. Feedback on areas of fact or clarification will be sent back to external review team leader who will incorporate the comments as deemed appropriate. The final report is sent to the Student Affairs Planning, Assessment & Research director and the reporting AVP within two weeks after feedback has been given. The reporting AVP will share the final report with the director of the department.

## **Roles**

Specific roles and responsibilities are described below for each member, as applicable.

### Team Leader

- Read the self-study report in preparation for the external review team (ERT) visit
- Convene and provide leadership at all meetings of the ERT prior to and during site review
- Use your professional experience, skills, insight, and expertise and that of the team in the development of questions, in the interactions in the interviews, in the discussions, and in the ERT deliberations
- Facilitate communication among and between team members
- Facilitate team work to make appropriate progress in each element of the CPR external review and of the entire CPR external review
- Ensure engagement and involvement of each team member
- Ensure that interview groups remain on task and focused
- Ensure that ERT members remain focused on collecting quality information and observations to shape the final report
- In the exit interview, highlight both areas of strength and initial observations that may become recommendations
- Collaborate with the ERT to produce a well-written final report with observations and recommendations that contain the required elements of the report as described in the ERT report guidelines

### TAMU Faculty/Administrator

- Read the self-study report in preparation for the external review team (ERT) visit
- Use your professional experience, skills, insight, and expertise in the development of questions, in the interactions and discussion in the interviews, and in the deliberations
- Bring the unique perspective of the faculty/staff to the ERT and the subsequent report
- Be familiar with the members of the ERT and their respective roles on the team
- Attend every interview and meeting prior to and during the external review team visit
- Assist in the writing and editing of the report as requested by the ERT leader

### Student Affairs Director

- Read the self-study report in preparation for the external review team (ERT) visit
- Use your professional experience, skills, insight, and expertise in the development of questions, in the interactions and discussion in the interviews, and in the deliberations
- Bring the unique perspective of a student affairs director to the ERT and the subsequent report
- Be familiar with the members of the ERT and their respective roles on the team
- Attend every interview and meeting during the external review team visit
- Assist in the writing and editing of the report as requested by the ERT leader

### Student Affairs Staff Members (if applicable)

- Read the self-study report in preparation for the external review team (ERT) visit
- Use your professional experience, skills, insight, and expertise in the development of questions, in the interactions and discussion in the interviews, and in the deliberations
- Bring the unique perspective of a student affairs staff member to the ERT and the subsequent report
- Be familiar with the members of the ERT and their respective roles on the team
- Attend every interview and meeting during the external review team visit
- Assist in the writing and editing of the report as requested by the ERT leader

### Student Affairs Planning, Assessment & Research

- Create a shared drive that all ERT members can access for notes and other working documents, if needed
- Coordinate team orientation (unless the Team leader has a different plan)
- Serve as a resource for process questions

### The Scribe (if applicable)

- Read the self-study report in preparation for the external review team (ERT) visit
- Develop a system for taking notes based on the department's self-study report (e.g., develop a template that is reflective of the categories identified in the self-study report; develop a template for each of the program areas of the department)
- Consult with the ERT leader(s), at the orientation, and determine if the note taking templates are appropriate and/or need any editing
- Be familiar with the members of the ERT and their respective roles on the team
- Attend every interview and meeting during the external review team visit
- Use a laptop to take notes during each of the interviews
- Review and edit the notes, as needed, at the end of each day
- Provide the ERT leader with an electronic copy of all the notes at the end of the ERT visit

### **External Review Team Report Framework**

At the exit interview with the Office of the Vice President for Student Affairs (OVPSA) and others, no written report is expected. That time is used to provide initial conclusions, strengths, areas of improvement, and recommendations. It may be used to clarify content, but it is really a time to have a conversation with the OVPSA and other attendees about reflections and summary information.

The report should include a list of the external review team members, the date of the review, and a copy of the schedule. There is an expectation that the written report be comprehensive in addressing each of the department areas and the department as a whole.

The report should include the following sections:

1. Title page including name of department reviewed, date of the external review, list of external review team members and titles
2. Overall impressions of the department
3. Strengths for specific areas, services, programs, and processes
4. Opportunities for improvement for specific areas, services, programs, and processes
5. Recommendations for action for specific areas, services, programs, and processes
6. Observations/recommendations on additional focus areas as identified by division/department
7. Overall conclusions
8. Appendix: copy of the interview schedule

The recommendations should include the basis or rationale for the statement (e.g., based on interviews, best practices in the field, benchmarks of similar programs, etc.). References to specific individuals or groups should not be identified in the report. The external review team leader may communicate confidentially with the reporting AVP if there are potential issues with a particular person or group. Finally, if there are any questions or concerns about the report, these should be directed to the reporting AVP.

## APPENDIX A - DIVISION OF STUDENT AFFAIRS CPR CYCLE/TIMELINE

FY 2024 – 2033

	2024-2025	2025-2026	2026-2027	2027-2028	2028-2029	2029-2030	2030-2031	2031-2032	2032-2033
Career Center	x						x		
Disability Resources					x				
Marketing & Communications			x						x
Memorial Student Center		x						x	
Multicultural Services	x						x		
Music Activities				x					
Office of the Vice President						x			
Recreational Sports				x					
Residence Life	x						x		
Student Activities	x						x		
Student Community Standards			x						x
Student Life		x						x	
Student Affairs Planning, Assessment & Research			x						x
Veteran Resource and Support Center		x						x	
<b>Total</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>3</b>	<b>3</b>

## APPENDIX B - GLOSSARY OF KEY TERMS

The glossary of key terms defines and briefly describes terms used throughout the CPR manual.

Action Plans: Specific actions that respond to short- and longer-term strategic initiatives. Action plans include details of resource commitments and time horizons for accomplishment. Action plan development represents the critical stage in planning when strategic goals, objectives and outcomes are made specific so that effective department-wide understanding and deployment are possible.

Analysis: The examination of facts and data to provide a basis for effective decisions. Overall departmental analysis guides management toward achieving key departmental results and toward attaining strategic objectives/initiatives.

Despite their importance, individual facts and data do not usually provide an effective basis for actions or setting priorities. Actions depend on an understanding of relationships derived from analysis of facts and data.

Benchmarks: Processes and results that represent best practices and performance for similar activities, inside or outside the student affairs profession. Departments engage in benchmarking activities to understand the current dimensions of world-class performance and to achieve non-incremental or breakthrough improvement.

Benchmarks are one form of comparative data. Other comparative data departments might use include data collected by a third party (such as professional organizations such as ACUI, ACHUO-I, ACHA, ASCA, NODA, NIRSA, NASPA, ACPA, etc. or consulting firms), data on performance of comparable student affairs departments, and comparisons with similar organizations in the same geographic area.

Effective: How well an approach, a process, or an assessment method addresses its intended purpose. Determining effectiveness requires the evaluation of how well a need is met by the approach taken, its deployment, or the method used.

Empowerment: Giving staff the authority and responsibility to make decisions and take actions. Empowerment results in decisions being made closest to students and stakeholders, where work-related knowledge and understanding reside.

Empowerment is aimed at enabling staff to respond to students' needs, to improve processes, and to improve student learning and development. Empowered staff require information to make appropriate decisions; thus, a departmental requirement is to provide that information in a timely and useful way.

Formative Assessment: Frequent or ongoing evaluation during programs or learning experiences that gives an early indication of what students are learning. Formative assessment is often used as a diagnostic tool for students and staff, providing information with which to make real-time improvements in activities, techniques, and approaches. Approaches to formative assessment might

include projects; portfolios; journals; observations of the learning process and learning outcomes; discussion groups; performances; self-assessments, or tests that occur during the program or activity, when student and staff can benefit from the information and improve.

Functions and Services: What you do and what you provide.

Goals: A future condition or performance level that the department intends to attain. They can be both short- and longer-term. Goals are ends that guide action.

Goals can serve many purposes, including:

- Clarifying strategic objectives and action plans to indicate how success will be measured
- Fostering teamwork by focusing on a common end
- Encouraging “out of the box” thinking to achieve a stretch goal
- Providing a basis for measuring progress

How: In what way or manner? By what means? To what extent or degree?

Improvement/Innovation: Making meaningful change to improve programs, services, and/or processes and create new value for students and stakeholders. Innovation involves the adoption of an idea, process, technology, or product that is either new or new to its proposed application.

Successful organizational innovation is a multistep process that involves development and knowledge sharing, a decision to implement, implementation, evaluation, and learning. Although innovation is often associated with technological innovation, it is applicable to all key departmental programs, services, and processes that would benefit from change, whether through breakthrough improvement or a change in approach.

Key: The major or most important elements or factors, those that are critical to achieving your intended outcome.

Learning Outcome: What a participant should know or be able to do (demonstrate) following an intervention, activity, etc.

Methods: Information (quantitative and qualitative) that documents input, output, and performance dimensions of programs, processes, services, and the overall department (outcomes). Methods might be simple (derived from one measure) or composite from several different measures.

Mission: The overall function of a department. The mission answers the question, “What is this department attempting to accomplish?” The missions might define students, stakeholders, future students served, distinctive competencies, or technologies used.



Partners: Refers to other departments, other divisions within the institution, other schools, and parents, as appropriate, with which your organization has cooperative relationships for purposes of ensuring effective student success.

Performance: The output results and their outcomes obtained from processes and services that permit evaluation and comparison relative to goals, standards, past results, and other organizations.

Process: Method(s) by which outcomes are produced. Often processes are linked activities for the purpose of producing a program or service for students and/or stakeholders within or outside the department. Generally, processes involve combinations of people, tools, techniques and materials in a systematic series of steps or actions. Processes might require adherence to a specific sequence of steps, with documentations (sometimes formal) of procedures and requirements, including well-defined measurement and control steps (e.g., application to be a recognized student organization).

In service situations such as education, especially in situations where those served are directly involved in the service, process is used in a more general way to spell out what must be done, possibly including a preferred or expected sequence. If the sequence is critical, the service needs to include information to help those served understand and follow the sequence. Such service processes also require guidance to the providers of these services on handling contingencies related to possible action or behaviors of those served (For example, the selection, training, and support of Fish Camp counselors).

In knowledge work such as teaching, strategic planning, research, development, and analysis, process does not necessarily imply formal sequence of steps. Rather, process implies general understanding regarding competent performance such as timing, options to be included, evaluation, and reporting. (For example, the assessment of student leadership development)

Program/Process/Performance Outcome: What the program or process will accomplish, usually by a specific date or to a specific level.

Results: Outputs and outcomes achieved by an organization in addressing the purposes of a category item. Results are evaluated based on:

- Current performance
- Performance relative to appropriate comparisons
- The rate, breadth and importance of performance improvements
- Relationship of results measures to key organizational performance requirements

SACSCOC: Southern Association of Colleges and Schools Commission on Colleges. The accrediting body for Texas A&M University.

Senior Leaders: Those with the main responsibility for managing the overall department. That might include the head of the department and their direct reports. "Senior leadership" is defined uniquely by each department in the Division of Student Affairs. In some cases, this might be the director and associate and assistant directors. In other departments it might include coordinators of programs and

services. It is the purview of each department to define senior leadership and to include this description in the body of the document where appropriate.

**Stakeholders:** All groups that are or might be affected by a department's actions and success. Examples of key stakeholders might include parents, parent organizations, faculty, staff, boards, former students, employers, other schools, funding entities, and local/professional communities. Although students are commonly thought of as stakeholders, for purpose of emphasis and clarity, this program review process refers to students and stakeholders separately.

**Strategic Challenges:** Those pressures/forces that exert a decisive influence on a department's likelihood of future success. These challenges frequently are driven by a department's future competitive position relative to other providers of similar products or services. While not exclusively so, strategic challenges are generally externally driven. However, in responding to an external strategic challenge, a department may face internal strategic challenges.

External strategic challenges may relate to student, stakeholder, or future student needs/expectations; changes in programs or offerings; technological changes; or budgetary, financial, societal, and other risks. Internal strategic challenges may refer to the department's capabilities or its staff and other resources.

**Strategic Initiatives:** A department's articulated aims or responses to address major change/improvement and/or competitiveness issues. Strategic initiatives generally are focused externally and relate to significant student/stakeholder, future student, service, or technological opportunities and challenges (strategic challenges). Broadly stated, they are what a department must achieve to meet/exceed mission/vision requirements and expectations. Strategic initiatives set a department's longer-term directions and guide resource allocations and redistributions.

**Student Segments:** Groups of students with similar needs. The basis for the groupings might reflect their co-curricular interests, learning styles, service delivery, living status (on or off campus), mobility, special needs, race and ethnicity, gender or other factors.

**Summative Assessment:** Longitudinal analysis of the learning and performance of students and former students. Summative assessments tend to be formal and comprehensive, and they often cover global subject matter. Such assessment may be conducted at the end of a program and could be compared to the results of pretesting to determine gains and to clarify the causal connections between practices and student learning.

**Systematic:** Approaches that are repeatable and use data and information so that improvement and learning are possible. Systematic approaches build in the opportunity for evaluation and learning and thereby permit a gain in maturity.

**Trends:** Numerical information that shows the direction and rate of change for a department's results. Trends provide a time sequence of departmental performance.

A minimum of three data points generally is needed to begin to ascertain a trend. The time for a trend is determined by the cycle time of the process being measured. Shorter cycle times demand more frequent measurement, while longer cycle times might require longer periods before a meaningful trend can be determined.

Examples of trends called for in the categories may include student learning and development results, student, stakeholder and staff satisfaction and dissatisfaction results; program results; budgetary, financial, and future student performance; and departmental performance results, such as student participation, staff satisfaction and meeting budget requirements.

Value: The perceived worth of a program, service, process, asset, or function relative to cost and relative to possible alternatives. Departments frequently use value considerations to determine the benefits of various options relative to their costs, such as the value of various programs and service combinations to students or stakeholders. Departments need to understand what different student and stakeholder groups value and then deliver value to each group. This frequently requires balancing value for students and stakeholders.

Values: The guiding principles and/or behaviors that embody how the department and its people are expected to operate. Values reflect and reinforce the desired culture of the department. Values support and guide the decision-making of all staff, helping the department to accomplish its mission and attain its vision in an appropriate manner.

Vision: The desired future state of a department. The vision describes where a department is headed, what it intends to be, or how it wishes to be perceived.

Work Systems: How your staff is organized into formal or informal units to accomplish your mission and your strategic objectives/initiatives; how job responsibilities are managed; and your processes for compensation, performance management, recognition, communication, and hiring. Departments design work systems to align their components to enable and encourage all staff to contribute effectively and to the best of their abilities.

## APPENDIX C – SAMPLE TEXAS A&M SERVICES AGREEMENT

The Word version of the Services Agreement can be found by searching the Contracts Administration website (<https://contracts.tamu.edu/>) for “General Services Agreement.” **The actual agreement will be electronically routed from DSA Business Services when the leader, dates, and pay are determined.** The SAPAR director will submit the contract Appendix A to the DSA Business Services for the contract to be processed.

**SERVICES AGREEMENT  
BETWEEN  
TEXAS A&M UNIVERSITY  
AND  
External Review Team Leader**

This Services Agreement (“Agreement”) between Texas A&M University, a member of The Texas A&M University System, an agency of the State of Texas, through its Office of the Vice President for Student Affairs (“Texas A&M”) and External Review Team Leader (“Provider”) is made and entered into by and between Texas A&M and Provider.

Texas A&M and Provider hereby agree as follows:

### 1. SCOPE OF WORK

- A. Provider shall provide External review team leadership for the comprehensive program review of the Division of Student Affairs’ DEPARTMENT NAME. The external review team leader will conduct interviews on the Texas A&M campus and submit a report of findings and recommendations to the Office of the Vice President for Student Affairs.
- B. The scope of the work (“Work”) and the time for performance thereof, is as set forth in Appendix “A” attached hereto and made a part hereof for all purposes.
- C. Upon execution of this Agreement, all services previously performed by Provider on behalf of Texas A&M and included in the description of the Work, shall become part of the Work and shall be subject to the terms and conditions hereof.

### 2. TIME FOR COMMENCEMENT AND COMPLETION

It is understood that time is of the essence in this Agreement and that Provider shall complete all authorized Work in accordance with the time for performance described for the Work, and in a minimum of time consistent with the highest customs, standards, and practices of Provider’s business or profession. Work is to commence based on dates coordinated with Texas A&M during the period of \_\_\_\_\_, 20\_\_ <DATE OF ABOUT ONE MONTH PRIOR TO THE ERT VISIT>

through \_\_\_\_\_, 20\_\_ <DATE OF ABOUT ONE MONTH AFTER TO THE ERT VISIT> (“Term”). This Agreement may be extended only by written agreement executed by both parties.

### **3. PAYMENT TERMS**

- A. For the satisfactory performance of the Work, Texas A&M shall pay Provider an amount not to exceed **TWO THOUSAND** Dollars (\$**2,000**). Breakdown of payment is described in Appendix “A”. Provider will obtain the written approval of Texas A&M prior to incurring any additional costs as may be stipulated in Appendix A.
- B. **Payments of the amount due to Provider will be provided by Texas A&M upon receipt of an invoice which details the date of service, description of work performed, billing rate as set forth in Appendix A, and provides supporting documentation for reimbursable expenses relating to Work requested by Texas A&M, if any. Payment for travel related expenses shall be in accordance with State of Texas Travel Guidelines.**

### **4. DEFAULT AND TERMINATION**

- A. In the event of substantial failure by a party hereunder to perform in accordance with the terms hereof, the other party may terminate this Agreement upon thirty (30) days written notice of termination setting forth the nature of the failure (the termination shall not be effective if the failure is fully cured prior to the end of the thirty-day period), provided that said failure is through no fault of the terminating party.
- B. Texas A&M may, without cause, terminate this Agreement at any time upon giving thirty (30) days advance notice to Provider. Upon termination pursuant to this paragraph, Provider shall be entitled to payment of such amount as shall compensate Provider for the services satisfactorily performed from the time of the last payment date to the termination date in accordance with this Agreement, provided Provider shall have delivered to Texas A&M a final report describing the work completed to the date of termination. Texas A&M shall not be required to reimburse Provider for any services performed or expenses incurred after the date of termination notice.

### **5. UNIVERSITY FACILITIES**

Texas A&M will provide Provider with office space, as needed, to carry out Provider’s duties under this Agreement. Any non-consumable items provided by Texas A&M will remain Texas A&M property at the termination of this Agreement unless otherwise agreed in writing. Provider and its employees will be permitted access to and use of the allocated office space, but Texas A&M reserves the right to enter the premises to conduct Texas A&M business, as may be reasonably necessary or for health and safety purposes.

### **6. PUBLIC INFORMATION**

Provider acknowledges that Texas A&M is obligated to strictly comply with the Public Information Act, Chapter 552, *Texas Government Code*, in responding to any request for public information pertaining to this Agreement, as well as any other disclosure of information required by applicable Texas law. Upon Texas A&M's written request, Provider will promptly provide specified contracting information exchanged or created under any resultant agreement for or on behalf of Texas A&M. Provider acknowledges that Texas A&M may be required to post a copy of the fully executed Agreement on its Internet website in compliance with Section 2261.253(a)(1), *Texas Government Code*. The requirements of Subchapter J, Chapter 552, *Texas Government Code*, may apply to this Agreement and Provider agrees that this Agreement can be terminated if Provider knowingly or intentionally fails to comply with a requirement of that subchapter.

## 7. DISPUTE RESOLUTION

The dispute resolution process provided in Chapter 2260, *Texas Government Code*, and the related rules adopted by the Texas Attorney General pursuant to Chapter 2260, shall be used by Texas A&M and Provider to attempt to resolve any claim for breach of contract made by Provider that cannot be resolved in the ordinary course of business. Provider shall submit written notice of a claim of breach of contract under this Chapter to the University Contracts Officer of Texas A&M, who shall examine Provider's claim and any counterclaim and negotiate with Provider in an effort to resolve the claim.

## 8. CONFLICT OF INTEREST

By executing and/or accepting this Agreement, Provider and each person signing on behalf of Provider certifies, and in the case of a sole proprietorship, partnership or corporation, each Party thereto certifies as to its own organization, under penalty of perjury, that to the best of their knowledge and belief, no member of the A&M System or the A&M System Board of Regents, nor any employee, or person, whose salary is payable in whole or in part by Texas A&M or the A&M System, has direct or indirect financial interest in the award of this Agreement, or in the services to which this Agreement relates, or in any of the profits, real or potential, thereof.

## 9. MISCELLANEOUS

- A. **Provider agrees to indemnify and hold harmless Texas A&M from any claim, damage, liability, expense or loss arising out of Provider's negligent or intentional acts or omissions in performance under this Agreement.**
- B. Provider shall neither assign its rights nor delegate its duties under this Agreement without the prior written consent of Texas A&M.
- C. Provider shall be an independent contractor, and neither Provider nor any employee of Provider shall be deemed to be an agent or employee of Texas A&M. As an independent contractor, Provider will be solely responsible for determining the means and methods for performing the services described. Provider shall observe and abide by all applicable laws and regulations,

policies and procedures, including but not limited to, those of Texas A&M relative to conduct on its premises.

- D. This Agreement constitutes the sole agreement of the parties and supersedes any other oral or written understanding or agreement. This Agreement may not be amended or otherwise altered except upon the written agreement of both parties.
- E. The validity of this Agreement and all matters pertaining to this Agreement, including but not limited to, matters of performance, non-performance, breach, remedies, procedures, rights, duties, and interpretation or construction, shall be governed and determined by the Constitution and the laws of the State of Texas. Pursuant to Section 85.18, *Texas Education Code*, venue for any suit filed against Texas A&M shall be in the county in which the primary office of the chief executive officer of Texas A&M is located.
- F. If Provider is a taxable entity subject to the Texas Franchise Tax (Chapter 171, *Texas Tax Code*), then Provider certifies that it is not currently delinquent in the payment of any franchise (margin) taxes or that Provider is exempt from the payment of franchise (margin) taxes.
- G. Any notice required or permitted under this Agreement must be in writing and shall be deemed to be delivered (whether actually received or not) when deposited with the United States Postal Service, postage prepaid, certified mail, return receipt requested, and addressed to the intended recipient at the address set out below. Notice may also be given by regular mail, personal delivery, courier delivery, facsimile transmission, email, or other commercially reasonable means and will be effective when actually received. Texas A&M and Provider can change their respective notice address by sending to the other party a notice of the new address. Notices should be addressed as follows:

Texas A&M:	Texas A&M University Office of the Vice President for Student Affairs 1256 TAMU College Station, TX 77843-1256 ATTN: <Reporting AVP> Telephone: (979) 845-4728 Fax: (979) 845-3320 Email: <Reporting AVP email>
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With a copy to:	Texas A&M University Department of Contract Administration 1182 TAMU College Station, TX 77843-1182 ATTN: Executive Director Telephone: (979) 845-0099 Fax: (979) 862-7130 Email: <a href="mailto:contracts@tamu.edu">contracts@tamu.edu</a>
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Provider:                                      ERT Leader Name  
   ERT Leader Personal Address  
   ATTN: \_\_\_\_\_  
   Telephone: \_\_\_\_\_  
   Fax: \_\_\_\_\_  
   Email: \_\_\_\_\_

- H. Texas A&M may request a provider to perform a criminal background check on any employee and/or representative of Provider who conducts business pursuant to this Agreement on the campus of Texas A&M.
- I. Under Section 231.006, *Texas Family Code*, the vendor or applicant certifies that the individual or business entity named in this contract, bid, or application is not ineligible to receive the specified grant, loan, or payment and acknowledges that this contract may be terminated, and payment may be withheld if this certification is inaccurate.
- J. Pursuant to Sections 2107.008 and 2252.903, *Texas Government Code*, Provider agrees that any payments owing to Provider under this Agreement may be applied directly toward certain debts or delinquencies that Provider owes the State of Texas or any agency of the State of Texas regardless of when they arise, until such debts or delinquencies are paid in full.
- K. Headings appear solely for convenience of reference. Such headings are not part of this Agreement and shall not be used to construe it.
- L. Neither Party will be in breach of its obligations under this Agreement (other than payment obligations) or incur any liability to the other Party for any losses or damages of any nature whatsoever incurred or suffered by that other Party if and to the extent that it is prevented from carrying out those obligations by, or such losses or damages are caused by, a Force Majeure, except to the extent that the relevant breach of its obligations would have occurred, or the relevant losses or damages would have arisen, even if the Force Majeure had not occurred. Force Majeure is defined as: 1) acts of God; 2) war; 3) act(s) of terrorism; 4) fires; 5) explosions; 6) natural disasters, to include without limitation, hurricanes, floods, and tornadoes; 7) failure of transportation; 8) strike(s); 9) loss or shortage of transportation facilities; 10) lockout, or commandeering of materials, products, plants or facilities by the government or other order (both federal and state); 11) interruptions by government or court orders (both federal and state); 12) present and future orders of any regulatory body having proper jurisdiction; 13) civil disturbances, to include without limitation, riots, rebellions, and insurrections; 14) epidemic(s), pandemic(s), or other national, state, or regional emergency(ies); and 15) any other cause not enumerated in this provision, but which is beyond the reasonable control of the Party whose performance is affected and which by the exercise of all reasonable due diligence, such Party is unable to overcome. Such excuse from performance will be effective only to the extent and duration of the Force Majeure event(s) causing the failure or delay in performance and provided that the affected Party has not caused such Force Majeure event(s) to occur and continues to use



diligent, good faith efforts to avoid the effects of such Force Majeure event(s) and to perform the obligation(s). Written notice of a Party's failure or delay in performance due to Force Majeure must be given within a reasonable time after its occurrence and which notice must describe the Force Majeure event(s) and the actions taken to minimize the impact of such Force Majeure event(s). Notwithstanding the foregoing, a Party's financial inability to perform its obligations shall in no event constitute a Force Majeure.

- M. To the extent that *Texas Government Code*, Chapter 2271 applies to this Agreement, Provider certifies that (a) it does not currently boycott Israel; and (b) it will not boycott Israel during the term of this Agreement. Provider acknowledges this Agreement may be terminated and payment withheld if this certification is inaccurate.
- N. Pursuant to Subchapter F, Chapter 2252, *Texas Government Code*, Provider certifies Provider is not engaged in business with Iran, Sudan, or a foreign terrorist organization. Provider acknowledges this Agreement may be terminated and payment withheld if this certification is inaccurate.
- O. Under Section 2155.0061, *Texas Government Code*, the vendor certifies that the individual or business entity named in this bid or contract is not ineligible to receive the specified contract and acknowledges that this contract may be terminated and payment withheld if this certification is inaccurate.
- P. Provider is responsible to ensure that employees participating in work for any A&M System member have not been designated by the A&M System as Not Eligible for Rehire as defined in A&M System Policy 32.02, Section 4. Non-conformance to this requirement may be grounds for termination of this Agreement.
- Q. Provider expressly acknowledges that Texas A&M is an agency of the State of Texas and nothing in this Agreement will be construed as a waiver or relinquishment by Texas A&M of its right to claim such exemptions, privileges, and immunities as may be provided by law.
- R. Performance by Texas A&M under this Agreement may be dependent upon the appropriation and allotment of funds by the Texas State Legislature (the "Legislature"). If the Legislature fails to appropriate or allot the necessary funds, Texas A&M will issue written notice to Provider and Texas A&M may terminate this Agreement without further duty or obligation hereunder. Provider acknowledges that appropriation of funds is beyond the control of Texas A&M.
- S. Under Section 2155.004, *Texas Government Code*, the vendor certifies that the individual or business entity named in this bid or contract is not ineligible to receive the specified contract and acknowledges that this contract may be terminated and payment withheld if this certification is inaccurate.
- T. Provider understands that acceptance of funds under this Agreement constitutes acceptance of the authority of the Texas State Auditor's Office, or any successor agency (collectively, "Auditor"),

to conduct an audit or investigation in connection with those funds pursuant to Section 51.9335(c), *Texas Education Code*. Provider agrees to cooperate with the Auditor in the conduct of the audit or investigation, including without limitation, providing all records requested. Provider will include this provision in all contracts with permitted subcontractors.

- U. If Provider is a business entity, Provider warrants, represents, covenants, and agrees that it is duly organized, validly existing and in good standing under the laws of the state of its incorporation or organization and is duly authorized and in good standing to conduct business in the State of Texas, that it has all necessary power and has received all necessary approvals to execute and deliver the Agreement, and the individual executing the Agreement on behalf of Provider has been duly authorized to act for and bind Provider.
  
- V. Each provision of this Agreement is severable. If any provision is rendered invalid or unenforceable by statute or regulations or declared null and void by any court of competent jurisdiction, the remaining provisions will remain in full force and effect if the essential terms of this Agreement remain valid, legal, and enforceable.

IN WITNESS WHEREOF, the parties have signed this Agreement on the date indicated below their signatures.

**TEXAS A&M UNIVERSITY**

**TEAM LEADER NAME**

\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Name  
  
\_\_\_\_\_  
Title  
  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Name  
  
\_\_\_\_\_  
Title  
  
\_\_\_\_\_  
Date

## **Contract Appendix A: Scope of Work**

### External Review Team Leader Responsibilities

#### **Expectations**

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The department undergoing comprehensive program review (CPR) relies heavily on the expertise of the external review team (ERT) leader and team members to provide insightful recommendations to move the department forward in its programs and services. The team leader will quickly build a cohesive team to engage stakeholders in interviews and to write a comprehensive report.

#### **Prior to the Site Visit**

The ERT leader will contact the team for (electronic) introductions and any initial expectations and thoughts about the process. Upon the receipt of the self-study report (at least one month before the visit) and the schedule, the ERT leader will follow up with the team about initial questions and approaches to the visit. It is helpful to brainstorm initial questions for each interview before the review starts. Team members are expected to read the self-study report and supporting documentation. The team may also recommend additional interviews.

#### **During the Site Visit**

During the site visit, the external review team will participate in the following activities:

- Welcome and orientation dinner
- Planning time for the team to finalize interview questions, formulate a plan for the interviews, and strategize how to process the information (facilitator, note-taker, timekeeper, etc.)
- Meeting with the vice president for student affairs, department supervisor, and division leadership
- Interviews with department staff at all levels
- Interviews with users and stakeholders of the department
- Processing time for the team to identify and discuss major findings and approaches to the written report
- An exit interview with the Office of the Vice President for Student Affairs, the director of Student Affairs Planning, Assessment & Research, the department director and/or department leadership, and/or the self-study team
- A brief exit interview with the director of Student Affairs Planning, Assessment & Research about the CPR process

The external review team will be provided a room in which to conduct the interviews and have time to meet as a team. If the team should need anything during the visit, the departmental CPR coordinator or the student affairs representative on the external review team will assist.

At the beginning of each interview time, the external review team leader should introduce the group and state the purpose of the meeting. Supervisors, staff hosts, and the department director should not

be there, so that the participants feel free to discuss important issues openly. Team members should take notes during the interviews to capture responses and ideas to contribute to the report. (The department may choose to hire a scribe/note taker to capture interview responses.) The ERT may wish to hand out index cards for participants to also write down their answers anonymously, especially if it is a large group with a limited time. (If the cards are going to be collected and included in the report, be sure that participants know how the information will be documented.)

At the exit interview, the team will have the opportunity to verbally share preliminary findings and recommendations. There is no set format for the exit interview.

### **Following the Site Visit**

Utilizing the agreed upon template, team members will prepare the final report. Team members are responsible for contributing to and reviewing the written report, although the team leader is ultimately responsible for the completion of the report. The ERT leader should provide all ERT members an opportunity to review and comment on the report draft.

The ERT leader will email the first draft report to the Student Affairs Planning, Assessment & Research (SAPAR) director who will share it with the AVP. Feedback on areas of fact or clarification will be sent back to the team leader who will incorporate the comments as deemed appropriate. The final report is sent to the Student Affairs Planning, Assessment & Research director and the reporting AVP within two weeks after feedback has been given. The reporting AVP will share the report with the director of the department.

Specific roles and responsibilities are described below.

- Read the self-study report in preparation for the external review team (ERT) visit
- Convene and provide leadership at all meetings of the ERT prior to and during site review
- Use your professional experience, skills, insight, and expertise and that of the team in the development of questions, in the interactions in the interviews, in the discussions, and in the ERT deliberations
- Facilitate communication among and between team members
- Facilitate team work to make appropriate progress in each element of the CPR external review and of the entire CPR external review
- Ensure engagement and involvement of each team member
- Ensure that interview groups remain on task and focused
- Ensure that ERT members remain focused on collecting quality information and observations to shape the final report
- In the exit interview, highlight both areas of strength and initial observations that may become recommendations
- Collaborate with the ERT to produce a well-written final report with observations and recommendations that contain the required elements of the report as described in the ERT report guidelines

## External Review Team Report Template

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While the written report may vary in content and length, depending on the nature and size of the department. The report should include a list of the external review team members, the date of the review, and a copy of the schedule. There is an expectation that the written report be comprehensive in addressing each of the department areas and the department as a whole.

The report should include the following sections:

1. Title page including name of department reviewed, date of the external review, list of external review team members and titles
2. Overall impressions of the department
3. Strengths for specific areas, services, programs, and processes
4. Opportunities for improvement for specific areas, services, programs, and processes
5. Recommendations for action for specific areas, services, programs, and processes
6. Observations/recommendations on additional focus areas as identified by division/department
7. Overall conclusions
8. Appendix: Copy of the interview schedule

The recommendations should include the basis or rationale for the statement (e.g., based on interviews, best practices in the field, benchmarks of similar programs, etc.). References to specific individuals or groups should not be identified in the report. The ERT leader may communicate confidentially with the reporting AVP if there are potential issues with a particular person, group, or recommendation. Finally, if there are any questions or concerns about the report, these should be directed to the reporting AVP.

For the scope of work, **ERT LEADER NAME** will receive payment of **\$2,000 (two thousand dollars)** after the final report has been submitted to the university. In addition, the university also agrees to provide one round trip, coach class airline ticket to/from **LOCATION**, lodging, and meals during the visit on **EXTERNAL REVIEW DATES**. *Specify rental car, parking expenses, etc. depending on the travel plans.*

## APPENDIX D – DEPARTMENTAL PROFILE

1. Explain/Include your department's **strategic plan**: mission, vision, key goals, objectives, outcomes, and key functions as appropriate.
2. Identify the primary and secondary student users, student groups or other stakeholders that your department serves and attracts.
3. Highlight your department's core functions, services, and activities and the methods/strategies used to deliver them to students and stakeholders.
4. Explain your department's organizational structure. (Use of an organizational chart is appropriate here, which may be the first appendix in the final self-study report.) Identify your department's senior leadership team and why they are identified as the senior leadership team.
5. Describe your department's staff demographics and contributions using the forms provided in Appendix G of this document.
  - 5.1. Describe any significant staffing changes over the past five years and any future anticipated changes.
6. Provide a financial overview of your department. (Include an overview table of revenue and expenditures.) Include a pie chart that illustrates the sources of funding (university advancement fee, E&G, rental, endowments, etc.) and a second pie chart that illustrates expenditures (salaries, technology, equipment, travel, etc.)
  - 6.1. Describe resource changes over the past five years and future anticipated changes.
7. Describe the major facilities, equipment, and technologies that support your department's operations.
8. Describe the key collaborative relationships (with and beyond student affairs) that your department is involved in and how they strengthen your department.
9. Describe your department's contributions to the advancement of University and Division goals and outcomes (university strategic plan, university learning outcomes, quality enhancement plan, DSA strategic plan, etc.).
10. Explain the challenges your department faces and how they may be affecting the department's performance. These could include areas such as key programs/services, learning and program outcomes; operations; resources; and campus environment.
11. Describe the overall approach your department uses to maintain a focus on departmental improvement.

12. **Provide a summary of major findings, recommendations, and subsequent actions taken from your last program review** and any self-assessments against national standards such as the Council for the Advancement of Standards in Higher Education (CAS), if applicable.
- 12.1. What were the primary strengths and weaknesses of the department as identified in each review?
  - 12.2. Describe any major changes, if any, which have been implemented that were NOT specific recommendations from a review.

## APPENDIX E – DEPARTMENTAL PERFORMANCE CATEGORIES

### ***Category 1: Functions and Services for Students and Other Stakeholders***

The functions and services category addresses how your department goes about determining, planning, and communicating functions and services. It also addresses how functions and services contribute to the university and division goals for the satisfaction, retention, learning, and success of its students.

- 1.1. What are the department's outcomes for its functions and services?
  - 1.2. How does the department communicate its programs and services to students and stakeholders?
    - 1.2.1. How does it determine the effectiveness of that communication?
  - 1.3. How are new functions or services planned and current functions discontinued to meet student or other stakeholder needs?
  - 1.4. *Self-study team: Summarize how this category contributes to the department's mission and outcomes described in the departmental profile.*
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this category.

#### Considerations:

Maintaining awareness of stakeholder needs and expectations is critical to improve learning and services. To understand student/stakeholder needs and expectations, it is necessary to consider all aspects of program content and delivery and of the learning environment. An important part of this information comes from observations of student utilization of programs, services, and facilities to determine their influence on learning. This requires departments to use current knowledge about student development and learning, including academic, social, physical, and ethical development.

Although many of the needs of stakeholders will be translated into student learning and development services for students, other stakeholders themselves may have needs that the department also must accommodate.



## ***Category 2: Human Resources/Staff***

The human resources category examines how the department engages, manages, and develops its own staff.

- 2.1. How do current qualifications and number of staff facilitate or impede the department's ability to be a high performing unit?
  - 2.2. What strategies are used to recruit, hire, and retain staff?
    - 2.2.1. How does the department ensure diverse ideas, cultures, and thinking through its recruitment, hiring, and retention initiatives?
    - 2.2.2. How successful have the initiatives in 2.2.1 been?
    - 2.2.3. What are the deterrents to having a more diverse staff? How do you know that?
  - 2.3. How are staff performance expectations established?
  - 2.4. How does the department manage appropriate career progression (e.g., career ladder)?
  - 2.5. How does the department reward and recognize staff to reinforce high performance expectations?
  - 2.6. How does the department provide the education, training, and career development of its staff? (Include opportunities associated with new staff orientation, ethics, leadership development, workplace safety, and risk management, etc.)
    - 2.6.1. How does the department get input from various levels of the department on the education and training needs that exist?
    - 2.6.2. How does the department and its senior leaders and supervisors motivate staff and help them attain ongoing learning and career-related development?
  - 2.7. What formal or informal assessment methods are used to determine staff well-being, satisfaction, and motivation?
    - 2.7.1. How are the results used to improve the work environment?
  - 2.8. *Self-study team: Summarize how this category contributes to the department's mission and outcomes described in the departmental profile.*
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this category.

### Considerations:

The human resources category addresses key human resource practices – those directed toward creating and maintaining a high-performance workplace and toward developing staff to enable them and your department to adapt to change.

Work and job factors for your consideration include use of teams/committees (including self-directed teams and, in some cases, involving paraprofessionals) and effective communication.

The category should include the formal (staff retention, absenteeism, grievance, safety, and productivity) and informal methods and measures used to determine a diverse staff's wellbeing, satisfaction, and motivation or refer to the department's assessment plan, if appropriate.

Many factors might affect staff well-being and satisfaction, and these factors are likely to differ greatly among staff groups. The department might need to consider factors such as effective staff grievance procedures, staff development and career opportunities; career ladders; preparation for changes in technology or organizational structure; the work environment and leadership support; workload; communication, cooperation, and teamwork; job security; compensation; equality of opportunity; appreciation of the differing needs of diverse employee groups; and the capacity to provide required services to students.

### ***Category 3: Financial Resources***

The financial resources category examines how a department makes decisions about resource allocation and the outcomes of that decision making.

- 3.1. How are budget allocation/reallocation decisions made in the department to make certain that your goals/action plans (category 7, planning) are accomplished?
  - 3.2. What is the link between assessment, planning, and resource allocation?
  - 3.3. What are the department's indicators of budgetary and financial performance (see considerations below)?
  - 3.4. How satisfied are you as a department with your current funding? What would you do/prioritize if you had more resources?
  - 3.5. *Self-study team: Summarize how this category contributes to the department's mission and outcomes described in the departmental profile.*
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this category.

#### **Considerations:**

This category addresses those factors that best reflect the department's financial and budgetary performance. Measures of budgetary and financial performance might include income, expenses, and reserves; program expenditures as a percentage of budget; annual budget increases or decreases; resources redirected to your department from other areas such as grants and external partnerships. Comparative data for these measures might include performance relative to comparable departments and important benchmarks from within and outside the academic community.

#### ***Category 4: Facilities, Equipment, and Technology***

The facilities, equipment, and technology category addresses how effectively the department's current facilities/space, equipment and technology support the work of the department.

- 4.1. How effectively do the department's current *facilities* support the work of the department?
    - 4.1.1. How must facilities change to keep pace with the future needs and expectations of students and/or other stakeholders and to be a leader in your field?
    - 4.1.2. What would your priorities be if more space were available?
  - 4.2. How effectively does the department's current *equipment* support the work of the department?
    - 4.2.1. How must equipment change to keep pace with the future needs and expectations of students and/or other stakeholders and to be a leader in your field?
    - 4.2.2. What strategies will you use to institute these changes?
  - 4.3. How is *technology* integrated into program, service, and operating functions of the department?
    - 4.3.1. How must technology change to keep pace with the future needs and expectations of students and/or other stakeholders and to be a leader in your field?
    - 4.3.2. What strategies will you use to institute these changes?
  - 4.4. *Self-study team: Summarize how this category contributes to the department's mission and outcomes described in the departmental profile.*
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this category.

### ***Category 5: Legal, Ethical, and Risk Responsibility***

The legal, ethical, and risk responsibility category examines your department's approach to ensuring compliance with applicable legal and ethical responsibilities.

- 5.1. How does your department ensure non-discriminatory, fair, and equitable treatment of the staff and stakeholders that it serves?
    - 5.1.1. How are students, staff, and other stakeholders informed of these practices?
  - 5.2. How is staff trained to ensure that they are knowledgeable about laws, regulations, and professional ethics that apply to their respective job responsibilities?
  - 5.3. How does the department monitor and ensure compliance with federal and state laws, system policies, and university rules?
  - 5.4. What risk management and safety processes are in place? (Refer to any risk management plans and procedures for students, staff, and customers in appendix or website. Also refer to the department's business continuity plan in an appendix.)
    - 5.4.1. How are staff included in creating and improving a safe, secure, and ethical department?
  - 5.5. *Self-study team: Summarize how this category contributes to the department's mission and outcomes described in the departmental profile.*
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this category.

#### **Considerations:**

Some of the questions in this category can be answered by referring to university policies, procedures, and practices as well as the department's risk management and continuity of operations manuals.

## **Category 6: Assessment and Evaluation**

The assessment and evaluation category examines your department's performance and improvement in key areas - student learning and development results; student and stakeholder satisfaction; program, business, or service outcomes; performance in creating a positive, productive, learning-centered, and supportive work environment for staff; distribution of information about outcomes; and support for the mission of the university. It also asks how the department determines that it is doing the right things not just assessing what it is doing now.

- 6.1. What methods are used to assess student and other stakeholder *needs, satisfaction, and dissatisfaction* with your department's performance?
  - 6.1.1. What are the results from the assessment?
  - 6.1.2. How are results used (and how have they been used) to improve satisfaction and meet needs?
- 6.2. What methods are used to assess *student learning and development outcomes* achievement?
  - 6.2.1. What are the results from the assessment?
  - 6.2.2. How are the results used (and how have they been used) to improve outcomes?
- 6.3. What methods are used to assess the department's *program, business, or service outcomes* achievement?
  - 6.3.1. What are the results from the assessment?
  - 6.3.2. How are the results used (and how have they been used) to improve outcomes?
- 6.4. How are your department's assessment results and actions communicated to faculty, staff, students, donors, and other stakeholders, as appropriate?
- 6.5. How does the department specifically connect to the academic life of students in support of the University mission, strategic plan, and Quality Enhancement Plan (e.g., transformational experiences, university learning outcomes, NACE competencies, etc.)?
  - 6.5.1. If applicable, how does your program assess student persistence, retention, time to graduation, academic success (e.g., GPA), and preparation for the work world? What are the results?
- 6.6. How does the department address access and belonging through their assessment efforts?
- 6.7. How does the department obtain and use comparative or benchmark information to stay current with and/or excel beyond your peers and/or competitors delivering similar programs/services?
  - 6.7.1. What does this information tell you about your department's performance relative to your peers and/or competitors?
- 6.8. *Self-study team: Summarize how this category contributes to the department's mission and outcomes described in the departmental profile.*

- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this category.

Considerations:

The following considerations are important in responding to this category:

- Student learning should reflect holistic development and consistency with the department's mission
- Current levels and trends should be reported to demonstrate year-to-year improvement
- Where possible, information should be disaggregated by student population to permit an analysis of trends and comparisons that demonstrates the departments sensitivity to the improvement of and success for all students

Effectively used, satisfaction results provide important indicators of departmental effectiveness and improvement – especially for departments where student learning and development are not the primary focus. Effective use entails understanding the key dimensions of satisfaction and dissatisfaction, recognition that satisfaction and dissatisfaction with programs, services, and activities and/or performance might differ among student and stakeholder segments, and recognition that satisfaction and dissatisfaction might change over time.

The category focuses on the creation and use of all relevant data to determine and help predict your department's performance as viewed by students and stakeholders. Relevant data and information include gains and losses in student participation; positive referrals; complaints; student- and stakeholder-perceived value; student assessment of accessibility and availability of programs, services, and activities; and awards, ratings, and recognition from independent rating organizations.

Student learning outcome results should reflect not only what students know but also what they are able to do and how well they are able to function because of your department's programs and services. Appropriate for inclusion are formative and summative assessment results that address key student learning and development goals as articulated in the departmental profile.

## **Category 7: Planning**

The planning category addresses how your department develops strategic initiatives and action plans. It also examines how your strategic initiatives are utilized and progress are measured and sustained.

7.1. What are the key process steps in department planning?

7.1.1. Who are the key participants in the process?

7.1.2. What data is used for the process?

7.2. What are the department's action/implementation plans for achieving goals?

7.2.1. How are they developed?

7.2.2. How is progress measured?

7.2.3. What is the timeline for accomplishment?

7.3. How does planning address:

7.3.1. The department's challenges as identified in the departmental profile?

7.3.2. Current trends on campus or in the field?

7.3.3. Staff needs?

7.4. *Self-study team: Summarize how this category contributes to the department's mission and outcomes described in the departmental profile.*

- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this category.

### Considerations:

Improvement and learning need to be embedded in a department's normal work processes. The role of planning is to align work processes and programs with the department's strategic directions to ensure that improvement and learning reinforce the department's priorities. The department planning and actions should illustrate alignment with the Division of Student Affairs strategic plan, the Texas A&M University strategic plan, the Texas A&M quality enhancement plan, and any other related documents.

These questions do not imply formalized plans, planning systems, staff planning positions, or specific planning cycles. They also do not imply that all your improvements could or should be planned in advance. They do emphasize a future-oriented basis for decisions and priorities which requires clear strategic guidance, particularly when improvement alternatives, including major change, compete for limited resources. An increasingly important part of strategic planning is projecting the future environment. Such projections help to detect and reduce threats, to shorten reaction time, and to identify opportunities.



## **Category 8: Leadership**

The leadership category examines how the department's senior leaders (identified in the department profile) guide the department in setting values, directions, and performance expectations, as well as how they guide a focus on students and stakeholders, student learning, staff empowerment, innovation, and departmental learning. Attention is given to how senior leaders communicate with staff, review departmental and programmatic performance, and create a learning environment that encourages high performance.

- 8.1. What practices/methods are employed by senior leaders to establish and promote department's values, vision, mission, and goals?
  - 8.2. What practices/methods are employed by senior leaders to establish and promote performance expectations to department staff, students, and other key stakeholders?
    - 8.2.1. How are employees helped to understand how their work contributes to the success of the department and the Division of Student Affairs?
  - 8.3. How does department senior leadership address individual, organizational, and environmental conditions that inhibit goal achievement?
  - 8.4. How do senior leaders promote a work culture that encourages staff empowerment, innovation, and risk taking to serve students and other stakeholders?
  - 8.5. How do senior leaders support organizational and staff learning?
  - 8.6. What practices/methods do senior leaders employ to communicate with and engage the entire staff?
    - 8.6.1. How is frank, two-way communication encouraged?
    - 8.6.2. How and with what timeliness do senior leaders communicate key decisions?
  - 8.7. *Self-study team: Summarize how this category contributes to the department's mission and outcomes described in the departmental profile.*
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this category.

### Considerations:

Each department defines senior leadership for its own department (see the department profile). In some departments this may be the department director; in others it may include several associate and assistant directors.

### **Category 9: Outreach and Engagement**

The Outcomes and Engagement category examines your department's performance, strategies, and improvement in nurturing effective collaborations both inside and outside of Texas A&M.

- 9.1. What strategies does the department use to establish, maintain, and promote collaboration, communication, cooperation, and coordination with other departments *within the Division of Student Affairs*?
    - 9.1.1. How do these strategies and their outcomes benefit the Division of Student Affairs and the University?
    - 9.1.2. How does the department know these strategies are effective? What types of assessment are employed to determine effectiveness?
  - 9.2. What strategies does the department use to establish, maintain, and promote collaboration with relevant campus constituencies *outside the Division of Student Affairs within Texas A&M*?
    - 9.2.1. How do these strategies and their outcomes benefit the Division of Student Affairs and the University?
    - 9.2.2. How does the department know these strategies are effective? What types of assessment are employed to determine effectiveness?
  - 9.3. What strategies does the department use to establish, maintain, and promote collaborative relations with relevant individuals and organizations *external to Texas A&M*?
    - 9.3.1. How do these strategies and their outcomes benefit the Division of Student Affairs and the University?
    - 9.3.2. How does the department know these strategies are effective? What types of assessment are employed to determine effectiveness?
  - 9.4. What goals does the department have in strengthening these types of relationships?
  - 9.5. How does the department manage/sustain these relationships through staff transitions?
  - 9.6. *Self-study team: Summarize how this category contributes to the department's mission and outcomes described in the departmental profile.*
- Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this category.

### ***Category 10: Process Management (Optional)***

The process management category address how the department determines key student learning and program outcomes, designs, and delivers its programs to maximize student learning and success, and how the department maximizes the service it delivers to students and stakeholders. This is a negotiable category. Some departments have a natural affinity for thinking and operating with process concepts; others do not. Although processes can often undermine the best intent and content of programs and activities, all departments will profit from completing this category.

- 10.1. What are the department's processes for determining student or other stakeholder learning outcomes and needs, as appropriate?
- 10.2. What are the processes for determining program outcomes?
- 10.3. What are the processes for designing work systems? Work systems can include how staff is organized into formal or informal units to accomplish your mission and your strategic objectives/initiatives; how job responsibilities are managed; and your processes for compensation, performance management, recognition, communication and hiring.
  - 10.3.1 What are the processes for implementing work systems?
- 10.4. How are key support processes determined, designed, and implemented? Support processes might include processes for finance and accounting; facilities management; legal and human resources; information technology; public relations; purchasing; management of suppliers/partners; and other administrative services.
- 10.5. How does the department improve processes to maximize student success and to improve programs and services?
- 10.6. *Self-study team: Summarize how this category contributes to the department's mission and outcomes described in the departmental profile.*
  - Please list 3-4 strengths, opportunities for improvement, and actions for improvement for this category.

#### Considerations:

A chart or table is completely appropriate for responding to 10.1.

## **APPENDIX F – MAJOR FINDINGS AND RECOMMENDATIONS**

Following the completion of the department profile and the departmental performance categories, the self-study team should bring closure to the report using the following reflection questions.

- Based on your department's self-assessment, provide a summary of your major findings.
- What is your reflection of your department's strengths in total?
- What are your recommendations for the future – for closing the gaps between goals and performance? What does your department need to do to improve and be innovative in thinking and actions?
- What resources does your department need to move to the next level of excellence?
- Based on your analysis, make recommendations on how your unit can best accomplish desired results.

## APPENDIX G - STAFF PROFILE AND INVOLVEMENT FORMS

Name of Department:

Date Form Completed:

Instructions:

Column One: List each full-time staff member.

Column Two: Indicate the title of each person listed.

Column Three: Briefly describe the individual's primary responsibilities to provide student support services.

Column Four: Indicate the staff member's academic qualifications pertaining to his or her responsibilities in providing the institutions student support services.

Column Five: Describe the staff member's relevant experience that qualify the individual to carry out his or her responsibilities. Experience could include number of years in the position/field, presentations given, software knowledge related to position, etc.

Staff may be grouped by working units within your department to reflect the breadth of qualifications more closely within that unit.

Name	Title	Responsibilities	Educational Qualifications	Relevant Experience

## Staff Involvement Form

This form highlights the contributions that all full-time staff make to a variety of areas that may be inside or outside their formal position description.

Name	Contributions to the division (e.g., division committees, special projects, etc.)	Contributions to the university (e.g., university committees, searches, teaching, projects, etc.)	Contributions to the profession (e.g., publications, national organizational leadership roles, presentations, etc.)

## APPENDIX H – EXTERNAL REVIEW TEAM PLANNING

### External Review Team On-Site Schedule Tips

Tips for constructing the schedule:

- The schedule will look different for every department based on size, complexity, and focus. Be flexible, but also thorough in identifying stakeholders. Interview times typically run 45-60 minutes but may vary based on size and scope. The VP/AVP meeting should be at least an hour. Department directors may be scheduled for an hour or an hour and fifteen minutes. Ideally, the participants in each group have similar functions. *Provide a clear explanation of the purpose of their participation prior to the interview (include in the calendar appointment), so they know why they are there.* Then, the external review team does not need to spend time explaining the purpose and outcomes. In the ERT agenda, provide a list of who will be there (name/position) and why.
- Other than the time with the division directors, keep the participants to a manageable number, probably 5-8 depending on the time allotted. If the group is too large, not all participants will be able to contribute and/or the external review team will not be able to have all their questions answered. You may need to divide large groups into two groups (except division directors).
- Supervisors of participants within the department **should not** be in the same interview as their employees. There is a potential power differential that may constrain honest feedback.
- If an employee serves in several relevant roles, only have the person attend one interview.
- If the department has extensive facilities, be sure to include enough time for the tour.
- Get approval from department director and reporting AVP before sending final agenda to the external review team. The final agenda should include building names/room numbers and if food is provided.
- In respect for the time commitments of campus members of the external review team, limit the amount of time spent during the on-site review, but provide enough opportunities to be able to do a credible job for the department.
- Provide as much space/down time as possible and still allow the team to accomplish its tasks (have short and longer breaks and time for the team to start formulating their response).
- Do not split the external review team into small groups to do interviews; the entire team needs to hear all interviews.
- Ideally, the team should have access to a “break room” near their interviews to have snacks and beverages, do work, etc.
- For evening times, the team should have access to a space where they can work on the report, prepare for the next day, etc. (room with internet access, dry erase board, projector, etc.). This could be their break room if logistics work out.
- Keep the team in one room for interviews as much as possible. That limits (wasted) travel time.
- Provide a time toward the end of the schedule so the team can ask to meet with other people or follow up with people they did not have enough time with.
- The CPR coordinator (or designee) should be at the beginning of each session to make sure logistics are taken care of and participants are there.

- Provide a timekeeper outside of each interview room during the visit to give a 3-minute warning to wrap up.
- You may consider having a note taker, using a laptop to capture what is said each interview.

### Sample External Review Team On-Site Schedule

Day 1	
2:00 - 3:30 pm	External review team (ERT) meets with assistant/associate vice president (AVP), department director, CPR coordinator, and Student Affairs Planning, Assessment & Research director - set scope and parameters for visit
3:30 – 6:00 pm	External review team preparation meeting Review agenda, finalize questions, make assignments, and discuss self-study report
6:00 – 7:30 pm	Dinner and external review team work time (if needed)
Day 2	
7:45 – 9:00 am	Breakfast with vice president for student affairs and reporting AVP
9:00 - 9:45 am	Tour of department
9:45 – 10:00 am	Break
10:00 – 11:00 am	Meet with director staff/department leadership team
11:00 - 11:30 am	Break
11:30 am-12:15 pm	Meet with program/service area staff
12:15 - 1:45 pm	Lunch, seated service with student users
1:45 – 2:15 pm	ERT discussion time
2:15 – 3:00 pm	Meet with program/service area staff
3:00 – 3:15 pm	Break/ERT discussion time
3:15 – 4:00 pm	Meet with constituent group (e.g., student organizations, collaborative partners, faculty, community members, service users, etc.) Name the constituent group and individuals attending.
4:00 – 4:15 pm	Break
4:15 – 5:00 pm	Meet with constituent group
5:00 – 6:00 pm	ERT process check, evaluate programs reviewed that day, and discuss interviews scheduled for the next day
6:00 – 7:30 pm	Dinner and external review team work time
Day 3	
8:00 – 8:30 am	Breakfast
8:30 – 9:45 am	Meet with directors, not including the department director
9:45 – 10:00 am	Break
10:00 – 11:00 am	Meet with AVPs
11:00– 11:15 am	Break
11:15 – 12:00 pm	Meet with constituent group
12:00 – 1:45 pm	Lunch and ERT work time
1:45 – 2:30 pm	Meet with constituent group



2:30 - 2:45 pm	Break
2:45 – 3:30 pm	Meet with constituent group
3:30 – 6:00 pm	Open time for follow up meetings or work time
6:00 – 7:30 pm	Dinner for ERT members only
<b>Day 4</b>	
8:00 – 8:30 am	Breakfast
8:30 – 9:30 am	ERT work time
9:30 am – 10:30 am	External review team exit interview with the Office of the Vice President leadership team (VPSA, AVPs); director of department; members of the self-study team and/or department as deemed appropriate by the director; director of Student Affairs Planning, Assessment & Research
10:30 – 11:00 am	Debriefing of external review team process with director of Student Affairs Planning, Assessment & Research

## APPENDIX I - COMMUNICATION EXAMPLES

### External Review Team Leader Confirmation

NAME,

Thank you for taking the time to speak with me recently and thank you also for agreeing to serve as team leader for our comprehensive program review (CPR) of the DEPARTMENT NAME.

An important component of the CPR process is the external review. External reviews provide a professional and neutral evaluation, analysis, and recommendations to improve the quality of the department's programs and/or services. External reviews bring new perspective, fresh insight, and new ideas to the department's self-discovery that occurs during the self-study process. In addition, the external review offers the opportunity for the department to be examined in the context of national trends and standards.

We are presently assembling the external review team (ERT). **Given your experience and expertise, and the unique perspective provided by your current role as ROLE, we think you will be an ideal leader for the ERT that will review the DEPARTMENT. Accordingly, as we discussed and as you have agreed you will serve as leader of this team. You will be contacted about the contract/agreement and will be asked to complete a W-9 form. Note: Texas A&M will complete a background check on you.)** The remainder of the team will be comprised of staff from Texas A&M, and we are in the final stages of that selection process.

The external review team site visit is scheduled for DATES. Meetings usually begin the afternoon/evening of the first day (in this case, DATE) and run most of the day on the 2<sup>nd</sup> day (DATE) and third days (DATE), with exit interviews to take place on the last day (DATE). A finalized schedule will be sent to you in the coming weeks. Additionally, a conference call or two may occur, for coordination purposes, prior to the site visit.

Team Leader responsibilities include providing leadership to the ERT to do the following:

- Read the self-study report in preparation for the ERT visit
- Convene and provide leadership at all meetings of the ERT prior to and during site review
- Facilitate communication among and between team members
- Use your professional experience, skills, insight, and expertise and that of the team in the development of questions, in the interactions in the interviews, in the discussions, and in the ERT deliberations
- Be familiar with the members of the ERT and their respective roles on the team
- Attend every interview and meeting prior to and during the external review team visit
- In the exit interview, highlight both areas of strength and initial observations that may become recommendations
- Submit the report draft within four weeks after the visit
- Submit the final report two weeks after receiving our feedback

Meals will be provided throughout the site review visit, as well as any needed supplies. We realize that this is a significant time commitment; however, the result will enhance the services and support we provide to the University and students.

**We appreciate you assisting us in this endeavor. You will be contacted soon by Tommy McGowan about the contract and W-9 form.** Please let me know if you have any questions. Thank you!

Sincerely,

Assistant/Associate Vice President

## External Review Team Member Invitation

DEPARTMENT NAME, a department in the Division of Student Affairs at Texas A&M University, is currently participating in a Comprehensive Program Review (CPR) process. An important component of the CPR process is the external review. External reviews provide a professional and neutral evaluation, analysis, and recommendation to improve the quality of the department's programs and/or services. External reviews bring new perspective, fresh insight, and new ideas to the department's self-discovery that occurs during the self-study process. In addition, the external review offers the opportunity for the department to be examined in the context of national trends and standards.

We are presently assembling the External Review Team (ERT). **Given your experience and expertise, your tenure here at the University, and your interest and work with continuous quality improvement, we would like to invite you to be a member of this team.** The team will be led by NAME, TITLE, INSTITUTION. The remainder of the team will be comprised of people from Texas A&M.

**The External Review Team site visit is scheduled for DATES.** Meetings usually begin the afternoon/evening of the DATE and run most of the day on the DATE and end around noon on the DATE. If you choose to participate a schedule will be sent to you in the coming weeks. A conference call and email conversation or two may occur prior to the site visit to coordinate the process.

If you agree to participate as a member of this team, your responsibilities include the following:

- Read the Self-Study report in preparation for the External Review Team (ERT) visit.
- Ensure that your professional experience, skills, insight, and expertise clearly contributes to the development of questions, in the interactions with focus groups and in the discussions and deliberations of the ERT.
- Bring the unique perspective of the staff to the ERT and the subsequent report.
- Be familiar with the members of the ERT and their respective roles on the team.
- Attend every interview and meeting prior to and during the External Review Team visit. Any conflicts should be discussed with the team leader. We recognize emergencies may arise.
- Collaborate with and assist the ERT in the writing and editing of the report as requested by the ERT Leader. The report draft is due within four weeks after the visit.

Meals will be provided throughout the site review visit as well as any needed supplies. We realize that this is a significant time commitment; however, the result will enhance the services and support we provide to the University.

**Please consider assisting us in this endeavor and reply by DATE.** Please let me know if you have any questions. Thank you!

Sincerely,

Assistant/Associate Vice President

## Follow Up with the External Review Team Leader

NAME,

Thank you again for your willingness to lead the external review team for the DEPARTMENT. In the next few months, you may be contacted by several people involved in the process. Here is a list of those staff who may be reaching out to you:

NAME, Director, email, phone number. This person can provide information about the department and the focus of the review.

NAME, CPR Coordinator, email, phone number. This person will be sending you the final self-study report, as well as the schedule and any other supporting documents you may request before your visit. This person (or team of people) will also be readily available during your visit for questions and logistics.

NAME OF BUSINESS PERSON, email, phone number. This person may be reaching out to you about travel plans, professional services contract, payment, etc.

NAME, Student Affairs Planning, Assessment & Research Director, darby@tamu.edu, 979-862-5624. This person can answer questions about the overall process, reporting templates, timelines, etc.

Of course, I am also available to answer any questions that you have about the process and expectations. Please do not hesitate to reach out to me.

Sincerely,

Assistant/Associate Vice President

## Meeting Request to Division Directors

As you know, DEPARTMENT is going through Comprehensive Program Review. The External Review Team will be here DATES to talk to our stakeholders, including the DSA Directors. Please accept this meeting request. If you are unable to attend, please forward this to the person who will be attending in your place. Thank you for your time and feedback.