# National Commission for Academic Accreditation & Assessment

### ANNUAL PROGRAM REPORT

Annual program reports should be prepared by the program coordinator in consultation with faculty teaching in the program or a program committee. The reports are provided to the head of department or college, and used as the basis for any modifications or changes that are required in the program. They should be retained on file to provide a record of developments in the program for use in periodic program self-studies and external reviews for accreditation.

Where reference is made to advice or comment from an independent evaluator, advice should be obtained from a person familiar with the program who is not directly involved in its delivery.

## Annual Program Report

| Institution  |  |
|--|--|
| College/ Department  |  |
| A. General Information   |  |
| Program title and code   |  |
| Name of program coordinator  |  |
| Date of report   |  |
| Academic year to which this report applies.  |  |
| Location if not on main campus or locations if program is offered in more than one location.   |  |
| B Statistical Information  |  |
| 1. Number of students who started the first year of the program this year:   |  |
| 2. Number of students completing the program in the year for which the report is prepared:   |  |
| (a) Completing the final year of the program:  |  |
| (b) Completing major tracks within the program   |  |
| TitleNo  |  |
| TitleNo  |  |
| TitleNo  |  |
| Title  |  |
| (c) Completing an intermediate award specified as an early exit point (if any)   |  |
| 3. Apparent completion rate.   |  |
| (a) Percentage of students completing the full program  (Number shown in 2 (a) as a percentage of the number that started the full program in that student intake.   |  |
| (b) Percentage of students completing an intermediate award (if any) (eg. Associate degree within a bachelor degree program) (Number shown in 2 (b) as a percentage of the number that started the program leading to that award in that |  |

| student intake.)   |                            |                               |                                |  |  |  |
|--|----------------------------|-------------------------------|--------------------------------|--|--|--|
| Comment on any special or unusual factors that might have affected the apparent completion rates. (Eg. Transfers between intermediate and full program, transfers to or from other programs)   |                            |                               |                                |  |  |  |
|  |                            |                               |                                |  |  |  |
| 4. Number and percentag  | e of students passing each | ch year of the program.       |                                |  |  |  |
|  | Number Starting            | Number Completing and Passing | Percent Completing and Passing |  |  |  |
| Year 1   |                            |                               |                                |  |  |  |
| Year 2   |                            |                               |                                |  |  |  |
| Year 3   |                            |                               |                                |  |  |  |
| Year 4   |                            |                               |                                |  |  |  |
| 5. Year to year progressi  | on rates.                  |                               |                                |  |  |  |
| Proportion of students whigher year level the cur  |                            | el in the previous year who   | passed and continued to a      |  |  |  |
| Started in Year 1 and  | continued to start in Ye   | ar 2 %                        |                                |  |  |  |
| Started in Year 2 and continued to start in Year 3 %   |                            |                               |                                |  |  |  |
| Started in Year 3 and  | continued to start in Ye   | ar 4 %                        |                                |  |  |  |
| 6. Special factors outside and continuing in the following in the followin |                            | am (if any) affecting the nu  | mbers completing the year      |  |  |  |

| 7. Destination                                     | of graduates as                    | s shown in survey                    | of graduating stude                        | ents (Include this in  | nformation in years |
|--|------------------------------------|--------------------------------------|--|--|---------------------|
| in which a surv                                    | ey of employn                      | nent outcomes for                    | graduating students                        | s is conducted)  |                     |
| Date of Survey                                     |                                    |                                      |  |  |                     |
| Number Survey                                      | /ed                                | Number Respo                         | nding                                      | Response Rate  | %                   |
| Destination  |                                    | railable for<br>loyment              | Av   | ailable for Employn  | nent                |
|  | Further<br>Study                   | Other Reasons                        | Employed in Subject Field                  | Other<br>Employment  | Unemployed          |
| Number   |                                    |                                      |  |  |                     |
| Percent of Respondents                             |                                    |                                      |  |  |                     |
| C. D   | Q                                  |                                      |  |  |                     |
| C. Program (                                       |                                    | the institution of                   | nating the masses                          | (if ony) dynin ~ 41  | aget two years      |
| 1. Significant c                                   | nanges within                      | the institution are                  | ecting the program                         | (if any) during the p  | bast two years.     |
| Implications for                                   | r the program                      |                                      |  |  |                     |
| 2. Significant c                                   | hanges externa                     | l to the institution                 | affecting the progr                        | ram (if any) during t  | he past two years.  |
| Implications for                                   | r the program                      |                                      |  |  |                     |
| D. Course In                                       | formation S                        | Summary                              |  |  |                     |
|  | all courses tau                    |                                      | mester/year showing                        | g for each course the<br>s (A, B, C, etc.)                             | e number            |
| List any course<br>unusually high<br>what was done | or low, or depa<br>to investigate, | oportion completinated from policies | s on grades or asses<br>difference, and wh | ourse, or the distribu<br>sments. For each so<br>at action has been to | uch course indicate |
| a. Course  |                                    |                                      | Variation                                  |  |                     |
|  |                                    |                                      |  |  |                     |

| Investigation Undertaken               |                   |                      |                                    |
|--|-------------------|----------------------|------------------------------------|
| Reason for Difference                  |                   |                      |                                    |
| Action Taken (if Required)             |                   |                      |                                    |
|  |                   |                      |                                    |
| b. Course                              |                   | Variation            |                                    |
|  |                   |                      |                                    |
| Investigation Undertaken               |                   |                      |                                    |
|  |                   |                      |                                    |
| Reason for Difference                  |                   |                      |                                    |
|  |                   |                      |                                    |
| Astin Tril or (CD or in 1)             |                   |                      |                                    |
| Action Taken (if Required)             |                   |                      |                                    |
|  |                   |                      |                                    |
| c. Course                              |                   | Variation            |                                    |
|  |                   |                      |                                    |
| Investigation Undertaken               |                   |                      |                                    |
| investigation endertaken               |                   |                      |                                    |
| Reason for Difference                  |                   |                      |                                    |
|  |                   |                      |                                    |
|  |                   |                      |                                    |
| Action Taken (if Required)             |                   |                      |                                    |
|  |                   |                      |                                    |
|  |                   |                      |                                    |
| (Attach additional summaries if necess | sary)             |                      |                                    |
| 4. Delivery of Planned Courses         | •                 |                      |                                    |
| (a) List any courses that were planned | ed but not taught | and indicate the rea | ason and what will need to be done |
| if any compensating action is require  | d.                |                      |                                    |
| Course title and code                  | Explanation       |                      | Compensating action if required    |
|  |                   |                      |                                    |
|  |                   |                      |                                    |
|  |                   |                      |                                    |
|  |                   |                      |                                    |
|  |                   |                      |                                    |
|  |                   |                      |                                    |

| (b) Compensating Action Required (Complete only where units not taugh |              |        |
|---|--------------|--------|
| Course  | Unit of work | Reason |
| Compensating action if required                                       |              |        |
| -   |              |        |
| Course  | Unit of work | Reason |
| Compensating action if required                                       |              |        |
| Course  | Unit of work | Reason |
| Compensating action if required                                       |              |        |
| Course  | Unit of work | Reason |
| Compensating action if required                                       |              |        |
|   |              |        |

### E. Program Management and Administration

| List difficulties (if any) encountered in management of the program       |                | ifficulties on the at of the program | Proposed action to avoid future difficulties in Response |
|---|----------------|--------------------------------------|--|
|   |                |                                      |  |
|   |                |                                      |  |
|   |                |                                      |  |
|   |                |                                      |  |
| F. Summary Program Evaluat  | ion            |                                      |  |
| Graduating Students Evaluation (7     Date of Survey                      | To be reported | d on in years when s                 | surveys are undertaken)                                  |
| Attach survey results a. List most important criticisms, stre suggestions | ngths and      | Comment (Eg. V other consideration   | alid comment, action already taken, ns, etc.)            |
|   |                |                                      |  |
|   |                |                                      |  |
| b. Changes proposed in program (if  | any) in respo  | nse to this feedback                 |  |
|   |                |                                      |  |
|   |                |                                      |  |

| 2. Other Evaluation (Eg. Evaluations by employers or other stakeholders, external review)) |                     |             |  |  |  |
|--|---------------------|-------------|--|--|--|
| Describe evaluation process  |                     |             |  |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
| a. List most important criticisms, strength suggestions                                    | ns and              |             | ment (Eg. Comment is valid and action will be a, action already taken, other considerations, etc.) |  |  |
| suggestions  |                     | takei       | i, action already taken, other considerations, etc.)   |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
| b. Changes proposed in program (if any   | ) in resp           | onse to     | this feedback.   |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
| 2. Ratings on Quality Standards (Refer t   | to Qualii           | ty Stand    | lards for Higher Education Programs.)  |  |  |
|  |                     |             | ther scales used for program evaluation. (To be  |  |  |
| evaluation is undertaken)  | re msi co           | ompiete     | d and in later years when a comprehensive  |  |  |
|  |                     |             | nally those where the practice is not followed but   |  |  |
| is considered a priority for development, than three stars) Indicate action proposed       |                     |             | assessed as in need of improvement (rating of less formance (if any).                              |  |  |
| Sub-Scale  | <u> </u>            | уче регл    | In first year in which scales are completed  |  |  |
| Suo-scale  | (Y/N                | b0          | indicate action proposed   |  |  |
|  | ce                  | Rating      | In later years, comment on performance in the year of the report.                                  |  |  |
|  | Practice<br>Followe | Star Rating |  |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |
|  |                     |             |  |  |  |

(Attach additional items if necessary)

#### G. Quality of Teaching

1. a. List courses taught during the year. Indicate for each course whether student evaluations were undertaken, and/or other evaluations made of quality of teaching. For each course indicate if action is planned to improve teaching. Student Other Evaluation Action Course/Course Code Evaluations (specify) Planned Yes No Yes No

| (Add items or attach list if necessary)   |           |    |       |             |            |                                 |    |  |
|---|-----------|----|-------|-------------|------------|---------------------------------|----|--|
| 2. Effectiveness of teaching strategies. Comment on the effectiveness of teaching strategies planned for use in courses for the type of learning involved in each of the domains of learning. (See description of domains in National Qualifications Framework and the proposed strategies in item D 2. in the Program Specification.) (Note this question is not an assessment of the skills of instructors, but an evaluation of the planned strategies based on instructors course reports.)  Summary of comments by instructors or other feedback on the effectiveness of teaching  Planned response to comments (Eg. training and assistance provided, modification in planned strategies) |           |    |       |             |            |                                 |    |  |
| feedback on the effectiveness of teachin<br>strategies for domains of learning outco<br>indicating any difficulties encountered,<br>suggestions for improvement.  | omes      | (W | hen a |             | refer to p | ation in pian<br>particular cou |    |  |
| a. Knowledge  |           |    |       |             |            |                                 |    |  |
|   |           |    |       |             |            |                                 |    |  |
| b. Cognitive skills   |           |    |       |             |            |                                 |    |  |
|   |           |    |       |             |            |                                 |    |  |
| c. Interpersonal skills and responsibility  | ý         |    |       |             |            |                                 |    |  |
| d. Communication, IT and numerical sl   | kills     |    |       |             |            |                                 |    |  |
| e. Psychomotor skills (if applicable)   |           |    |       |             |            |                                 |    |  |
| 3. Orientation programs for new teach   | ing staff |    |       |             |            |                                 |    |  |
| Orientation programs provided Yes   |           | No | ]     | If offered, | how man    | y participated                  | !? |  |

| a. Brief Description  |             |       |
|---|-------------|-------|
|   |             |       |
|   |             |       |
|   |             |       |
|   |             |       |
|   |             |       |
|   |             |       |
| b. Summary of evaluations by staff who participated in the orientation program. |             |       |
| b. Summary of evaluations by staff who participated in the offendation program. |             |       |
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| c. If orientation programs were not provided, give reasons.                     |             |       |
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|   |             |       |
|   |             |       |
|   |             |       |
|   |             |       |
|   |             |       |
|   | **          |       |
|   | How many    | 1     |
| 4. Professional Development Activities for Teaching and Other Staff             | Participate |       |
| a. Activities Provided  | Teaching    | Other |
|   | Staff       | Staff |
|   |             |       |
|   |             |       |
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| b. Summary comments on usefulness of activities based on participants evaluations           |                 |                       |                            |  |  |
|---|-----------------|-----------------------|----------------------------|--|--|
|   |                 |                       |                            |  |  |
|   |                 |                       |                            |  |  |
| H. Independent Opinion on Quality of (eg. head of another department offering commer notes) |                 |                       |                            |  |  |
| 1. Matters Raised by Person Giving Opinion  | Comment by      | Program coordinato    | r on Matters Raised        |  |  |
|   |                 |                       |                            |  |  |
| 2. Implications for Planning for the Program  |                 |                       |                            |  |  |
|   |                 |                       |                            |  |  |
|   |                 |                       |                            |  |  |
|   |                 |                       |                            |  |  |
| I. Action Plan  |                 |                       |                            |  |  |
| 1Progress on Implementation of Previous Year's  | Action Plans    |                       |                            |  |  |
| Actions Planned   | Completion Date | Person<br>Responsible | Completed or not completed |  |  |
| a.  |                 | •                     |                            |  |  |
| Reason if not completed as planned.   |                 |                       |                            |  |  |
| b.  |                 |                       |                            |  |  |

| Reason if not completed as planned   |         |                       |                       |
|--|---------|-----------------------|-----------------------|
| c.   |         |                       |                       |
| Reason if not completed as planned   |         |                       |                       |
| d.   |         |                       |                       |
| Reason if not completed as planned   |         |                       |                       |
| 2. Proposals for Program Development   |         |                       |                       |
| a. Proposals for Changes to Program Structure (un                              |         |                       |                       |
| b. Proposals for Changes to Courses, (deletions as assessment procedures etc.) |         | or topics, changes in | n teaching or         |
| c. Development Activities for Teaching and Othe                                | r Staff |                       |                       |
| 3. New Action Plan for Academic Year   | -       |                       |                       |
| Actions Required   |         | Completion Date       | Person<br>Responsible |
|  |         |                       |                       |
|  |         |                       |                       |
|  |         |                       |                       |

| Program Coordinator:   |  |  |
|--|--|--|
| Signature:Date Report Completed:   |  |  |
| Received by(Dean/Department Head)  |  |  |
| Date   |  |  |
| Attachments  |  |  |
| Copy of all course reports   |  |  |
| Rating scales applicable to the program from the Self Evaluation Scales for Higher Education Programs that were completed this year (See Item E 2) |  |  |
| Summary of any evaluations by graduates or other stakeholders in this year (See item E 1)  |  |  |
| Independent evaluators report  |  |  |