SOUTH DAKOTA BOARD OF REGENTS

Policy Manual

SUBJECT: Board of Regents Academic Program Evaluation and Review

NUMBER: 2.3.4

A. PURPOSE

This policy establishes a consistent, system-wide, evidence-based evaluation process for all new and established academic programs to ensure their effectiveness. The process is designed to review and reveal academic program strengths and opportunities for improvement through examination of strategic impact, academic quality, student success, and financial health.

B. DEFINITIONS

1. **Academic Program:** This is defined as undergraduate (associate or bachelor) and graduate/professional (master, specialist, doctorate) degrees approved and offered at each of the Regental institutions.

2. **Board of Regents:** Defined as the constitutional body responsible for governing the Unified System of Public Higher Education in South Dakota, which encompasses its supervision, coordination, management, and regulation. Board of Regents Policy 1.1.1, 1.1.2 and SDCL § 13-49 through § 13-53 provides the authority to govern academic programming.

3. **Institution:** Defined as one of the six (6) universities: Black Hills State University, Dakota State University, Northern State University, South Dakota School of Mines and Technology, South Dakota State University, and University of South Dakota.

4. **Program Actions:**

   - **Watchlist:** A program appearing on the Program Productivity report and allowed to remain active will be placed on an annual report created by BOR and provided to the University.

   - **Moratorium:** Temporary suspension (up to two years) of student admission to or declared major in an academic program that is being re-evaluated pursuant to this policy.

   - **Teach-Out:** A program in Moratorium that is determined for program closure, is placed in Teach-Out. During the Teach-Out stage, a comprehensive plan (in compliance with regional accreditation requirements) will be developed by the University to ensure all students are guided through options to complete or transfer to another program and appropriate options for all human, facility, and fiscal resources are identified.

   - **Program Closure:** A planned termination of a program.

5. **Program Evaluation and Review:**

- **Annual Health Analytics/Evaluation:** University examination of program performance based on a set of common metrics: enrollment, student success, instructional activity, faculty, and revenue/expense.

- **Year-Three (3) Mid-Cycle Analytics/Evaluation:** University examination of program performance based on a set of common metrics: enrollment, student success, instructional activity, faculty, and revenue/expense.

- **Year-Six (6) Comprehensive Program Review:** University extensive analytical and reflective peer review process that analyzes program status and effectiveness to identify strengths, opportunities for improvement, and priorities for the future.

- **Program Accreditation Review:** Accreditation review process completed by programs where standards are determined by specialized accrediting bodies related to a profession. The University may use a program accreditation review to satisfy the requirements for the Year-Six (6) Comprehensive Review.

- **Program Productivity Review:** Board of Regents program productivity review analyzing programs that fail to meet the established criteria thresholds.

- **New Program Review:** Board of Regents evidence-based program review conducted annually beginning in year two and will go through year six for new BOR-approved programs (BOR Policy 2.3.2) to facilitate new program growth, enrollment discussions, and budget projections.

- **Ad Hoc Program Review:** University unplanned, expedited review process in response to significant extenuating circumstances as deemed appropriate by the University President.

6. **Review Mechanics:**

- **External Review:** A review conducted by individuals outside the University. An external review process appropriate for the program will be established by the University and shall include individuals with the appropriate qualifications and expertise for the review, as deemed appropriate by the University and/or program accreditation requirements.

- **Internal Review:** A review conducted by individuals from within the University. An internal review process appropriate for the program will be established by the University.

- **Quantitative Review:** The assembly of the appropriate quantitative data utilized for the Program Review and Evaluation.

- **Qualitative Review:** The assembly of the appropriate qualitative data and responses utilized for the Mid-Cycle and Comprehensive Reviews will be completed by the University.

C. POLICY STATEMENTS

1. Board of Regents Policy 1.1.1, 1.1.2 and SDCL § 13-49 through § 13-53 provides the authority to govern academic programming.

2. The Board of Regents governs the process and policy for Program Productivity Review and policy for all other program evaluations and reviews.

3. The University manages the process for the Annual, Year-Three (3) Mid-Cycle and Year-Six (6) Comprehensive evaluation and review. University leadership will utilize the corresponding review process outlined with key elements as provided in AAC Guidelines.

4. University leadership will establish a master evaluation schedule (see AAC Guidelines).

5. A Regental reporting solution shall manage all the required quantitative data elements.

6. A Regental technology solution shall be the repository for all Annual, Year-Three (3) Mid-Cycle, Program Productivity, and Year-Six (6) Comprehensive Reviews (to include Program Specialized Accreditation Reviews) in accordance with State of South Dakota Bureau of Administration Records Retention and Destruction Schedule.

7. Quantitative elements for evaluation shall include at a minimum: Enrollment, Student Success, Academic and Instructional Activity, Revenue and Expenditure, Course Management, Workforce Analysis, Degree Gap Analysis, etc.

8. Qualitative elements (Year-Six (6) Comprehensive) shall include: University Mission/Alignment, Strategic Impact, Academic Quality, Emerging Industry/Industry Trends, Student Success, Strategic Partnerships and Collaboration, Impact and Value, and Contributions to the Public Good

9. The University shall integrate program review results into its planning and budget processes.

10. The Provost/Chief Academic Officer of the University can recommend a Moratorium, Teach-Out, or Program Closure if the program does not meet established criteria thresholds, using the appropriate University and institutional accrediting body guidelines and processes.

11. Action Plans will include timelines assigned for enhancement, augmentation of a program as well as the outcome if plan is not realized (reduce or closure). Ongoing monitoring, of results and action plans, is performed as needed at the University.

12. A report summary of the program reviews completed are submitted annually to the Board of Regents. The online form can be found in AAC Guidelines.

D. PROCESS AND TIMELINE

1. Annual Health Analytics/Evaluation

The evaluation is conducted by the University annually. This Annual Health Analytics/Evaluation includes quantitative data provided to the University. Universities shall utilize the data to review and work toward program success. See AAC Guidelines for additional information.

2. **Year-Three (3) Mid-Cycle Analytics/Evaluation**

The evaluation is conducted by the University on a three-year cycle. See AAC Guidelines for additional information. This Mid-Cycle Analytics/Evaluation includes quantitative data provided to the University. Trends of the program shall be reviewed. The University will provide additional summary findings appropriate for the program. This review may prompt additional research into program success and needs to further enhance the program.

Programs that utilize a Program Accreditation Review cycle, the year-three mid-cycle review will be adjusted to fit the specific individual accreditor's timeline.

3. **Year-Six Comprehensive Program Review/Program Accreditation Review**

   3.1 These reviews are conducted by the University on a six (6)-year schedule by program (or based on schedule for accreditation requirements).

   3.2 This Year-Six Comprehensive Program Review includes quantitative data provided to the University. Additionally, the University completes a self-study (utilizing the template from AAC Guidelines) that adds robust qualitative data to the quantitative data. Campuses may include additional campus generated quantitative data. The self-study is reviewed through an Internal Review and/or External Review process. See AAC Guidelines for additional information.

   3.3 The Program Accreditation Review will follow the accrediting body requirements regarding the program review and processing timeline. All reviews will be submitted to the Board of Regents as outlined in AAC Guidelines. The campus will be required to review all the Board of Regents quantitative data in coordination with the program accreditation if not incorporated.

4. **Program Productivity Review**

   4.1. This review is conducted by the Board of Regents (BOR).

   4.2. The Program Productivity Review shall be aligned with the Year-Three (3) Mid-Cycle Health Analytics/Evaluation cycle.

   4.3. The BOR shall use a common set of metrics to flag a program for review at the University.

   4.4. Degrees conferred shall be the primary metric that flags a program for review. A program that does not meet the minimum criteria threshold of degrees conferred shall then have the Student Headcount Enrollment and Financial Viability criteria metrics reviewed. AAC Guidelines outlines more information on the program productivity procedure.

   4.4 Program Productivity Metrics

       4.4.1 Primary Data - Degrees Conferred: Degrees Conferred is the primary data point utilized to flag a program for review. The following are the minimum criteria thresholds:

           4.4.1.1 Associate Degree: Five (5) graduates a year or twenty-five (25) during the five (5)-year reporting period.

4.4.1.2 Bachelor's Degree: Seven (7) graduates a year or thirty-five (35) during the five (5)-year reporting period.

4.4.1.3 Master's Degree: Four (4) graduates a year or twenty (20) during the five (5)-year reporting period.

4.4.1.4 Professional, Terminal, and Doctoral Degree: One (1) graduate a year or five (5) during the five (5)-year reporting period.

4.4.2 Secondary Data – Student Headcount Enrollment: Student Headcount Enrollment over a three (3)-year average is the secondary flag. The following are the minimum criteria thresholds:

4.4.2.1 Associate Degree – Three (3)-year average of a minimum of fifteen (15) enrollments

4.4.2.2 Bachelor's Degree – Three (3)-year average of a minimum of twenty-five (25) enrollments

4.4.2.3 Master's Degree – Three (3)-year average of a minimum of fifteen (15) enrollments

4.4.2.4 Professional, Terminal, and Doctoral Degree – Three (3)-year average of a minimum of seven (7) enrollments

4.4.3 Secondary Data – Financial Viability: A Financial Viability formula will be managed by the BOR. The formula utilizes a three (3)-year average for the metrics. Each University has access to the reporting data utilized in their formula for management needs. BOR reserves the right to determine if similar programs will be combined or evaluated individually in this formula. The reporting will include:

- Faculty Average Salaries and Benefits

- Number of Sections

- Section Enrollments

- Student Generated Hours

- Total Revenue – Tuition and Fees

- Total Expenditures (Total Compensation, Overhead Expense)

- Net Income

- Total Reallocation of Resources from Grants or Other Funding

4.5 Exempt Program Request

AAC Guidelines provide a mechanism for the University to request that a program be exempted from the low-productivity designation if it meets certain criteria. If a program is designated as an exempt program, the program will be flagged in the Student Information System and be re-evaluated every three (3) years to ensure that it meets the exemption criteria.

The criteria for exemption are:

- Meets a demonstrated workforce or service need of the state or geographical region served by the institution, including any projected future needs of the state or region – through GAP analysis.

- Demonstrates an increase in student demand through a pattern of increasing enrollment of majors.

- Demonstrates productivity in the receipt of external grants and contracts related to the program,

- Includes collaborative programs approved for exemption, or

- Supports underrepresented student or community groups.

4.6 Flagged Program Reporting

    4.6.1 Flagged programs will require a program review as defined in AAC Guidelines and in accordance with this policy.

    4.6.2 Programs flagged shall require the University to develop a plan and implement an action plan.

    4.6.3 Programs that are recommended to remain active will be placed on a watchlist until such time that it is re-evaluated.

    4.6.4 The University shall submit the action plan to the Board of Regents

4.7 Flagged Program Actions

The University will be required to identify an appropriate action for the program. Actions include:

    4.7.1 Program Closure

    4.7.2 Moratorium

    4.7.3 Retain with further review (option limited to once per program); required action plan to meet established thresholds and will be on a watchlist

    4.7.4 Investment/Realignment/Augmentation Plan; required action plan to meet established thresholds and will be on a watchlist

        4.7.4.1 Internal program redesign within the department

        4.7.4.2 Internal program redesign within the University but outside the department

        4.7.4.3 External program redesign with other BOR University

4.8 University Flagged Program Action

    4.8.1 Retaining, Realigned or Augmented Programs

        4.8.1.1 When the University selects to retain or realign/augment a program, an action plan is created by the University including established program

performance metrics and timeline for them to be met to ensure program viability.

4.8.1.2 The action plan will be submitted to the BOR for review and approval at a BOR meeting.

4.8.1.3 If the BOR approves the action plan, the program will be placed on a watchlist.

4.8.1.4 In the event the program does not meet the metrics within the timeline established in the action plan, the program will be scheduled for Program Closure.

4.8.1.5 BOR Committee A will review all the recommendations and metrics around the recommendations annually during the review period.

4.8.2 Moratorium and Closure

4.8.2.1 The University will need to propose a plan in accordance with their accrediting body which may include a Teach-Out.

4.8.2.2 A timeline will be submitted to the BOR.

4.9 BOR Flagged Program Analysis

4.9.1 At a BOR meeting, an analysis of the program will be provided to assist in identifying the following: financial health and viability analysis, student success analysis, academic quality analysis, and strategic analysis.

4.9.2 Following that review and analysis, BOR may close a program due to the program productivity analysis.

4.9.3 The circumstances for Program Closure may include but are not limited to: Educational Needs, Strategic Realignment, Resource Allocation, Budgetary Constraints, Decline in Demand, and Academic Quality Concerns.

4.10 BOR Flagged Program Closure

4.10.1 The University will, upon notification of Program Closure, notify all stakeholders (students, prospective students, faculty, staff, internal University, accreditors, etc.).

4.10.2 The University shall develop a teach-out plan pursuant to federal regulations and University accreditation guidelines.

4.10.3 The University will provide, at the next BOR Meeting, the Program Termination Form outlined in AAC Guidelines. This form documents the formal plan to close the program, including the complete Program Closure timeline.

4.10.4 The University shall adhere to all University accreditation guidelines and or program specialized accreditation guidelines/requirements.

4.10.5 The University shall provide communication and advising on additional resources for completion of the program of study to all affected students.

4.10.6 The University shall complete and implement planning for faculty and staff associated with the program closure following BOR Policy 4:23 and BOR Policy 4:24.

E. <u>BOR ACADEMIC AFFAIRS OFFICE: NEW PROGRAM REVIEW</u>

After the BOR approves a new program, the BOR academic affairs staff shall conduct an annual review of data identified in AAC Guidelines, comparing results to the benchmarks identified in the new program proposal.

The BOR academic affairs staff shall review following data:

- Market demand data (gap analysis)

- Alignment of the revenue/expense projections

- Personnel service costs associated with the new program

- Expected growth in enrollments projections

- Migration patterns for student enrollment

- Partnership between finance, enrollment management and academic affairs with respect to their program launch planning.

The BOR academic affairs staff shall provide the new program review results to the Provost/Chief Academic Officer of the University. The University may provide a response to the review and may include relevant and compelling to the review.

On an annual basis, the BOR academic affairs staff shall provide the Board of Regents and Committee A with a summary report combining the BOR academic affairs data review and University's additional information.

The new program shall have six years to meet the criteria thresholds of program productivity. In the event the new program does do not meet the thresholds identified, the BOR shall initiate a formal program productivity review process.

FORMS / APPENDICES:

AAC Guideline 2.3.2.5.A & 2.3.2.5.B (Form) – Program Termination or Placement on Inactive Status Form

AAC Guideline 2.3.4.A(3)(Form) – Institutional Program Review Report to the Board Form

BOR – Records Retention and Destruction Schedule

SOURCE:

BOR March 2022.