

Rubric for USG CPR Analysis

Areas of CPR Focus	Emerging	Established	Exemplary
Character of Institutional Process			
Clear process expectations	Timeline, review process, and assignment of responsibility are incomplete, ambiguous and/or inconsistent. Templates specifying expectations are incomplete.	Timeline, review process, and assignment of responsibility are complete and consistent. Templates specifying expectations are largely complete.	Timeline, review process and assignment of responsibility are unambiguous, complete, consistent, and used by all units. Templates clearly specify expectations
Inclusion of broad-based review and input	Incomplete evidence that process is broad-based and systematic. Partial provision of feedback from relevant administrators and/or committees. Little provision for external review of program where such review is appropriate	Process shows incorporation of broad-based institutional collaboration as well as external review where appropriate.	Extensive demonstration of broad-based, systematic, ongoing involvement of faculty and staff Process shows multiple levels of review, feedback, and response.
Process is balanced and comprehensive.	Process proscribed addresses most, but not all, key benchmarks of performance. Consideration of Productivity, Quality, and Viability is ambiguous or incomplete.	Productivity, Quality, and Viability are generally in evidence as themes.	Productivity, Quality and Viability are comprehensively addressed.
CPR is a meaningful process on campus	While cycles of review include some programs, including General Education, insufficient evidence exists to demonstrate full participation and engagement.	Cycle of review includes most programs, including General Education. Evidence that programs are participating.	Cycle for review covers all programs including General Education. Strong evidence that all programs are participating and are fully engaged.

Distribution of reports	Website for posting CPR documents is in progress.	Website exists for posting CPR documents. System office and peer reviewers can access website.	Website for posting CPR documents is clear, comprehensive, and accessible to both internal users and p reviewers.
Goal Driven			
Analysis is contextual	CPR reports make minimal reference to earlier reviews and inadequately discuss implementation and impact of changes proposed in earlier cycles.	CPR reports include references to earlier cycles of review. Continuity exists between recommendations from earlier cycles and present use of results.	CPR reports make reference to earlier reviews and discuss implementation and impact of recommendations from earlier cycles. Strong demonstration of continuity between past and present CPRs.
Goals are formed and outcomes are measurable.	Programs do not clearly specify student learning outcomes. Programs do not clearly specify critical process/performance outcomes.	Programs specify clear student learning outcomes. Programs clearly specify critical process or performance goals/outcomes.	All programs specify clear student learning outcomes. All programs clearly specify critical process or performance goals/outcomes.
Performance Expectations	Expectations of performance are not clear or are not adequate to capture critical threshold levels of performance.	Standards of performance are clearly stated, reasonable, and appropriate for the program and institution.	Strong evidence that standards of performance are consistent with discipline and/or accreditation standards. Expectations for process and performance outcomes are clearly defined and articulated.
Diversity goals	Diversity goals are largely absent or weak.	Diversity goals are clearly stated, reasonable, and appropriate for program and institution.	Clear and strong evidence of diversity goals that is reasonable, comprehensive, and appropriate for program and institution.
Culture of evidence			
Degree to which appropriate data are identified, collected,	The collection and use of data are in evidence, but insufficient	The identification, collection, analysis, and use of appropriate	The use of data is compelling. Data include multi-year trends

analyzed and reported.	to adequately address specified program outcomes or measures. Inadequate use of trends and benchmarks where applicable.	data are sufficient to demonstrate congruence with student learning and other program outcomes.	and benchmarking where appropriate for the program. Findings include references to regional/professional accreditors when appropriate.
Relevance of measures	The relationship between a measure and its goal or outcome is not clearly articulated.	The measures employed adequately demonstrate congruence with the program goals and outcomes.	The relationship between a measure and its corresponding goal or outcome is clearly articulated. Measures of student learning are appropriate to and consistent with discipline standards.
Quality of measures	Measures largely rely on self-report or indirect sources.	Metrics employed represent satisfactory combination of direct and indirect measures of student learning and other program outcomes.	Data clearly include both direct and indirect measures of student learning and other program outcomes.
Reliability and validity of data	Measures do not generate reliable, valid, or critical data to support program goals and outcomes.	Measures generate adequate data to support program goals and outcomes.	Measures generate reliable and valid data that clearly and comprehensively support program goals and outcomes.
Linking data to decisions	Analysis and reporting yield non-specific, generalized claims without supporting evidence.	Analysis and reporting are adequate to demonstrate the extent to which program outcomes are met.	Analysis and reporting yield clear and specific evidence related to each outcome.
Emphasis on quality assurance and program improvement			
Identification of programmatic areas of excellence and areas in need of improvement.	Reports address program as a whole rather than consider specific factors individually OR report addresses individual factors, but does not address how they interrelate.	The structure and processes proscribed by the completed CPRs are adequate to identify programmatic areas of excellence and those in need of improvement.	CPR reports address individual outcomes and specific factors that have been reviewed AND fully define key inter-relationships among them.

<p>Articulation of realistic and meaningful plans of action</p>	<p>Proposed changes are superficial. For many indicators, report concludes implicitly or explicitly “no action required.” Proposed changes are not supported by reference to results of assessment. Proposed changes include no resource/budget information.</p>	<p>CPR reports include adequate proposed actions in response to findings of review. Proposed changes/actions largely address substantive elements of program. CPR includes at least minimal references to requisite resource/budget information.</p>	<p>CPR reports include multiple proposed actions in response to findings of review. Proposed changes/actions are comprehensive and involve substantive elements of program, including curriculum, course design, and pedagogy. Proposed changes are supported by reference to results of assessment. Proposed changes include resource/budget information.</p>
<p>Evaluation and tracking of plans of action</p>	<p>Action plans include inadequate provision for changes based on ongoing evaluation. Inadequate evidence of institutional response to identification of areas in need of improvement.</p>	<p>Action plans include adequate provision for changes based on ongoing evaluation. Consistent evidence of institutional response to identification of areas in need of improvement.</p>	<p>Action plans clearly define and articulate provision for changes based on ongoing evaluation. Pervasive evidence of institutional response to identification of areas in need of improvement.</p>