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| State Center Community College District LogoState Center Community College District Image**DISTRICT SERVICES AdMINISTRATIVE UNIT Review** Unit Name:Contact Person: Due: *Last Revised: January 2019*Web Resources: *SCCCD District Strategic Plan 2017-2020* - <https://www.scccd.edu/_uploaded-files/documents/about/strategic_plan_2017-2020.pdf>  |

**District Services Administrative Unit Review**

**Purpose**

The District Services Administrative Unit Review is the annual review process for District Services units and is designed to serve these purposes:

* Document the unique strategies for improvement for each District Service unit
* Align strategies for improvement with the District vision, mission, values and goals as stated in the *SCCCD District Strategic Plan 2017-2020* and with other appropriate District-wide plans (i.e. District-wide Technology Plan)
* Collect and analyze data on District Services unit performance
* Provide an objective foundation for budget, staff, equipment, space, professional development, and other funding requests
* Demonstrate compliance with accreditation standards

This review process is designed to lead to continuous quality improvement and therefore includes the following cycle of data collection, analysis of strengths and weaknesses, development and implementation of strategies to remedy weaknesses, and re-evaluation. The steps are:

1. Describe the services provided by the District Service unit.
2. Use quantitative and qualitative data to analyze the services’ strengths and weaknesses relative to meeting established standards, advancing the mission, vision, values and goals of the District and addressing other District-wide plans as appropriate.
3. Develop strategies to sustain or improve performance.
4. Implement the strategies.
5. Assess the impact of the strategies.

The final step of assessment is the starting point for the development of next year’s District Services Administrative Unit Review. District Services Administrative Unit Review is linked to resource allocation. Requests for resources including staff, equipment, space, professional/organizational development and other needs.

The units that complete an annual District Services Administrative Review are:

* Chancellor’s Office Services
	+ General Counsel
	+ Foundation
	+ Public & Legislative Relations
* Finance & Administration
	+ Purchasing
	+ Fiscal
	+ Payroll
* Human Resources
	+ Personnel Commission
	+ Professional Development
* District Operations
	+ Police
	+ Maintenance and Grounds
	+ Planning and Construction
	+ Environmental Health & Safety
* Information Services
* Educational Services & Institutional Effectiveness\*
	+ Enrollment Management
	+ Institutional Effectiveness & Planning
	+ Workforce Development
	+ International Programs

# Process

The graphic below depicts the process to be used is the annual unit review and improvement of the District Services Administrative units:

Each District Services Administrative unit completes the District Services Administrative Unit Review self-assessment and presents it to the Vice Chancellor’s for discussion and prioritization. The resulting list of prioritized requests is forwarded to Chancellor’s Cabinet for discussion and approval. Should any of the items be significant and require District-wide approval, those items are forwarded to the District-wide Resource Budget Allocation Advisory Committee for approval. Once approved the items are funded and implemented as described in the District Services Administrative Unit Review. The following year the District Services Administrative Unit Review documents the status of the previous year’s strategies for improvement and sets the course for the next year’s strategies.

# Mission, Vision, Values and Goals of the District

The District Services Administrative Unit Review identifies how the unit will meet the Mission, Vision, Values and Goals of the District. They are listed below for reference in completing the review.

**Mission Statement**

State Center Community College District (SCCCD) is committed to empowering our colleges in their efforts to promote exemplary educational opportunities and to provide safe, inclusive, and supportive learning environments leading to student success and global competitiveness which will transform our region.

**Vision Statement**

Empowering through Educational Excellence

**Core Values**

**STEWARDSHIP**

We are committed to the enhancement, preservation, conservation, and effective utilization of our resources.

**COLLABORATION**

We are committed to fostering a spirit of teamwork internally with our students, faculty, classified professionals and administrators while expanding our external partnerships with education, industry, and our community.

**INTEGRITY**

We are accountable, transparent and adhere to the highest professional standards.

**INNOVATION**

We are committed to an educational environment promoting actions and processes that create new methods, ideas, or products.

**INCLUSIVITY**

We are committed to and intentional in creating an environment that cultivates, embraces, and celebrates diversity.

**Goals**

**EXCELLENCE IN EDUCATION**

SCCCD is committed to empowering our colleges to cultivate excellence in educational programs and student support services.

**INSTITUTIONAL EFFECTIVENESS**

SCCCD is committed to data-informed but people-driven continuous quality improvement of processes and resources.

**LEADER IN HIGHER EDUCATION AND COMMUNITY COLLABORATION**

SCCCD is committed to being a force for positive change by expanding partnerships in education and workforce development.

The questions and forms on the subsequent pages are intended to assist you in completing a self-assessment for the administrative unit. The forms that follow are separated into pages for ease of distribution to relevant subcommittees. **Please keep the pages separated** if possible (though part of the same electronic file), **with the headers as they appear**, and be sure to include your unit identification on each page.

**DISTRICT SERVICES ADMINISTRATIVE UNIT REVIEW SELF-ASSESSMENT**

District Services Unit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prepared by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Description**

1. What is the **mission** of the District Services Administrative unit?
2. **Identify or outline how your unit serves the mission, vision, values and goals of State Center Community College District.**  *Please limit to a single paragraph.*
3. **Identify or outline how your unit is meeting the goals/initiatives in unit specific plans**. *Please attach the plan (i.e. District-wide Technology Plan, etc.). Please limit response to a couple of paragraphs as specifics are included in the form below.*
4. **Function**: List no more than 10 bullet points to summarize the services provided by the unit.
5. Provide the official **Organizational Chart of the unit** which includes all levels of services and positions**.** *If necessary, provide very brief narrative descriptions by numbering the chart and including a numbered list with clarifications on a subsequent page.*

**Assessment**

1. **Assessment of prior year Strategies for Improvement** (not to be completed in the first year). Briefly describe the outcome for each goal and/or objective and attach data representing the outcome where possible.
2. **Data**: Provide quantitative and qualitative data related to the District Service.
3. **Data Analysis**: Link the data presented above to established standards for the service, ACCJC standards for this service, the District Mission, Vision, Values and Goals.
4. **Strategies for Improvement**: Identify strategies to be implemented in the next year to sustain or improve performance (do not include normal functions of your unit) in order from 1 – 5, with 1 as the most important. Before writing your strategies be sure to review other unit review documents and analysis provided in this self-assessment related to your unit.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strategies for Improvement** | **Start Date** | **Status:** ongoing, completed, or date completion anticipated | **Resources needed to complete goal or objective** (reference applicable resource request page) | **Specific Unit Plan Goal(s)/Initiative(s) Addressed** | **District Goal(s) Addressed** |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| 5. |  |  |  |  |  |

1. **Staffing Profile** (Please indicate the number in terms of FTE. A full-time staff person is a 1, and a half time person is a .5)

|  |  |  |
| --- | --- | --- |
| **Positions** | **Staffing Levels for Each of the Previous Five Years** | **Anticipated total staff needed** |
| **Five Years Prior** | **Four Years Prior** | **Three Years Prior** | **Two Years Prior** | **Previous****Year** |  | **Current Year** | **Next Year** |
| Academic Management |  |  |  |  |  |  |  |  |
| Classified Management |  |  |  |  |  |  |  |  |
| Classified Staff FT |  |  |  |  |  |  |  |  |
| Classified Staff PT |  |  |  |  |  |  |  |  |
| Confidential Staff FT |  |  |  |  |  |  |  |  |
| Faculty Reassigned FTE Full time |  |  |  |  |  |  |  |  |
| Faculty Reassigned FTE Part time |  |  |  |  |  |  |  |  |
| Temporary Staff/Student Workers |  |  |  |  |  |  |  |  |
| **Total Full Time Equivalent Staff** |  |  |  |  |  |  |  |  |

Complete the Management and/or Staff request form that follows if new employees are needed.

*When filling out the form on the next page please* ***consider*** *the following in framing your “reason:”*

* 1. *Has the workload of your unit increased in recent years?*
	2. *Has technology made it possible to do more work with the same staff? Or, has technology increased your work load (adding web features which need updating for example)?*
	3. *Does the workload have significant peaks and valleys during the fiscal year that would be best filled by part time staff?*

**Resource Requests**

Identify additional staff, equipment, space, professional or organizational development or other needs required to implement the Strategies for Improvement in the following forms. If the unit has no additional needs in a particular area, please indicate with N/A.

*District Services Administrative Unit Name: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

1. **Staff Needs**

**NEW OR REPLACEMENT STAFF (Administrator, Faculty or Classified)**

|  |  |  |
| --- | --- | --- |
| **List Staff Positions Needed for Academic Year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Place titles on list in order (rank) or importance. | **Annual Cost including Salary & Benefits**  | **Unit Strategies for Improvement to Be Met** |
| Justification: Describe how this meets District Goals of:Excellence in EducationInstitutional EffectivenessLeader in Higher Education & Community CollaborationIf applicable describe how this meets appropriate unit plan (i.e. District-wide Technology Plan): |  |  |
| **2.**Justification: Describe how this meets District Goals of:Excellence in EducationInstitutional EffectivenessLeader in Higher Education & Community CollaborationIf applicable describe how this meets appropriate unit plan (i.e. District-wide Technology Plan): |  |  |
| **3.** Justification: Describe how this meets District Goals of:Excellence in EducationInstitutional EffectivenessLeader in Higher Education & Community CollaborationIf applicable describe how this meets appropriate unit plan (i.e. District-wide Technology Plan): |  |  |

 *District Services Administrative Unit Name: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

1. **Equipment (including technology) Needs Not Covered by Current Budget**

|  |  |  |
| --- | --- | --- |
| **List Equipment or Equipment Repair & Technology Needed for Academic Year. Please be as specific and as brief as possible.** Place items on list in order (rank) or importance. | **Annual TCO\*\*\*** |  |
| Cost per item | Number Requested | Total Cost of Ownership | Unit Strategies for Improvement to be Met |
| Justification: |  |  |  |  |
| **2.**Justification: |  |  |  |  |
| **3.**Justification: |  |  |  |  |
| **4.**Justification: |  |  |  |  |
| **5.**Justification: |  |  |  |  |

\*\* Annual TCO = “Total Cost of Ownership”. Calculate the cost for 5 years and divide by 5 for an annual average cost. For example, item costs $500 in first year and $50 each subsequent year for 4 years for a total of $700 ($500+$50+$50+$50+$50) divided by 5 equals $140. 5 years is used because most equipment has a 5-year life.

*District Services Administrative Unit Name: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

1. **Space Needs Not Covered by Current Building or Remodeling Projects**

|  |  |
| --- | --- |
| **List Space Needs for Academic Year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****(Office space, storage, etc.,)** Place items on list in order (rank) or importance. |  |
| **Annual TCO\*\***  |
| Justification: |  |
| **2.**Justification: |  |
| **3.**Justification: |  |
| **4.**Justification: |  |
| **5.**Justification: |  |
| **6.** Justification: |  |

\*\* Annual TCO = “Total Cost of Ownership” for one year is the cost to maintain the space for one year.

*District Services Administrative Unit Name: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

1. **Professional or Organizational Development Needs**

|  |  |
| --- | --- |
| **List Professional Development Needs.** Reasons might include in response to assessment findings or the need to update skills to comply with state, federal, professional organization requirements or the need to update skills/competencies. Please be as specific and as brief as possible. Some items may not have a direct cost but reflect the need to spend current staff time differently. Identify if one-time or an annual/ongoing need. Place items on list in order (rank) or importance. | **Annual TCO\*\***  |
| Cost per item | Number Requested | Total Cost of Ownership |
| Justification: |  |  |  |
| **2.**Justification: |  |  |  |
| **3.**Justification: |  |  |  |
| **4.**Justification: |  |  |  |
| **5.**Justification: |  |  |  |
| **6.** Justification: |  |  |  |

\*\* Annual TCO = “Total Cost of Ownership” for one year is the cost of the item for one year.

*District Services Administrative Unit Name: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

1. **Other Needs**

|  |  |
| --- | --- |
| **List Other Needs that you** are certain do not fit elsewhere.Please be as specific and as brief as possible. Not all needs will have a cost but may require a reallocation of current staff time. Place items on list in order (rank) or importance. | **Annual TCO\*\***  |
| Cost per item | Number Requested | Total Cost of Ownership |
| **1.**Justification: |  |  |  |
| **2.**Justification: |  |  |  |
| **3.**Justification: |  |  |  |
| **4.**Justification: |  |  |  |
| **5.**Justification: |  |  |  |
| **6.** Justification: |  |  |  |

\*\* Annual TCO = “Total Cost of Ownership” for one year is the cost of the item for one year.

*District Services Administrative Unit Name: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

1. **Projected Future Needs**

|  |  |
| --- | --- |
| **List Other Needs that you** are certain will be needed in future years. This can include staffing, equipment, facilities and all other needs. | **Year** |
| Next Year | Two Years from now | Three Years from now |
| **1.**Justification: |  |  |  |
| **2.**Justification: |  |  |  |
| **3.**Justification: |  |  |  |
| **4.**Justification: |  |  |  |
| **5.**Justification: |  |  |  |
| **6.** Justification: |  |  |  |