2010-11
Annual Program Review Update

PROGRAM NAME:

Deaf and Hard of Hearing Services

Name of person or persons that filled out this form:

Donna Bradshaw, Armand De la Cruz

I. PROGRAM DESCRIPTION

A. What is the primary mission/purpose of your program?:

Facilitate communication and provide access to campus activities for Deaf and hard of hearing students. Promote campus-wide understanding and responsiveness to the needs of Deaf and hard of hearing students.

B. What is your Program Level Outcome (PLO) statement?:

Students, The De Anza Campus Community, and The Deaf Community will be able to identify and access Deaf and Hard of Hearing Services.

      1. Describe the processes by which your PLO is assessed:

	Analysis of SLOAC results (refer to Part III)
x	Analysis of SSLOAC results (refer to Part III)

Other:

      2. How does your PLO directly or indirectly support the: Mission, Institutional Core Competencies (ICC), and/or Strategic Initiatives

(Attach "PLO to Mission, ICC, and/ SI matching sheet(s)."
Comments:

DHHS is a critical program, as is all of DSPS, in that it provides students the ability to access the College with its' rich academic environment. Without DHHS an already disenfranchised, very marginalized population would have even less opportunity to realize their goals. DHHS is very closely aligned with our Mission and our Strategic Initiatives.

C. Program Demographics

      1. How many people does your program/department serve?

38	# Students	Source:	Institutional Research
1	# Faculty	Source:	DSPS
1	# Staff	Source:	
	# Community	Source:	

Comments: Describe the typical characteristics of the people your program serves - i.e. What are their goals, majors, reasons for coming to your program, etc.

Basic skill improvement leading to certificate, AA, transfer. The program provides access to communication for the students in all areas so that they may fulfill their educational/vocational goals.

2. Number of employees associated with the program?

6	# FT staff	180	Total hrs per wk combined
1	# PT staff	20	Total hrs per wk combined
0	# FT Faculty		(FTEF)
0	# PT faculty		(FTEF)
15	# Students	102	Total hrs per wk combined

II. SIGNIFICANT CHANGES and TRENDS

A. **If your program offers instruction**, attach your Program Review Data Sheet (from IR). Briefly, address any significant changes and how they have effected your **curriculum / instruction** relative to:

> 1. Growth or decline in historically underrepresented populations (Latina/o, African Ancestry, Pacific Islander, Filipino)

> 2. Trends related to closing the student equity gap relative to the college's stated goals.

> 3. Overall enrollment growth or decline of all student populations

B. Briefly, address any significant changes and how they have effected your program's **services** relative to:

> 1. Growth or decline in historically underrepresented populations (Latina/o, African Ancestry, Pacific Islander, Filipino)

> No significant changes. Deaf/hard of hearing students, as well as all students with disabilities, are an extremely underrepresented population. As the economy continues to decline, our enrollment increases.

> 2. Trends related to closing the student equity gap relative to the college's stated goals.

> 3. Overall enrollment growth or decline of all student populations

C. Make any modifications, deletions, additions, edits, etc. to your 2008-09 Comprehensive Program Review (CPR). Use the spaces below to explain what changes you are making to your CPR and the reasons for those changes (i.e. College/District policies, state or fedeal laws and regulations, external agencies regulations or requirements, budget cuts, personnel decisions, etc.).

D. Use this space to explain anything else about your program that was not included in your 2008-09 Comprehensive Program Review (CPR) or under II.C.   What should be known about your program that hasn't been asked?

III. OUTCOMES ASSESSMENT

If your program offers both instruction and services, complete all of Part III. If your program does not offer instruction, skip to III. E.

A. **If your program offers instruction**, describe the number of **SLOAC** that have been completed or will be completed in 2010-11.

B. **If your program offers instruction**, describe the level of engagement in the 2010-11 **SLOAC** process. (i.e. How many faculty, staff, and administrators participated in the SLOAC process?)

C. **If your program offers instruction,** what program enhancements are you implementing as a result of the 2010-11 **SLOAC** process? (Only describe planned enhancements that **do not require additional resources.** Enhancements that require new resources will be addressed in Part V.)

D. **If your program offers instruction,** what are your **SLOAC** plans for 2011-12?

E. Describe the number of **SSLOAC** that have been completed or will be completed in 2010-11.

> We are assessing our first sslo.

F. Describe the level of engagement in the 2010-11 **SSLOAC** process. (i.e. How many faculty, staff, and administrators participated in the SSLOAC process?)

> The whole program (6 staff, 1 supervisor)

G. What program enhancements are you implementing as a result of the 2010-11 **SSLOAC** process? (Only describe planned enhancements that **do not require additional resources.** Enhancements that require new resources will be addressed in Part V.)

> Revising our Orientation material by creating an accessible DVD (it will be presented in American Sign Language with open captions)

H. What are your **SSLOAC** plans for 2011-12?

> Focusing on Cultural Competency

IV. PROGRAM BUDGET DATA

	2009-10 Actual	2010-11 Projected
'A' budget		
'B' budget		
'C' Budget		
TOTALS	**$0**	**$0**	(automatically calculated)

If your program is <u>NOT</u> requesting any new resources – your 2010-11 Annual Program Review Update is finished

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If your program <u>IS</u> requesting any new resources – Continue to Part V.

V. RESOURCE REQUESTS

Department/Program Summary

A. Human Resources: Please submit up to three faculty and/or staff choices below in department/program ranked order:

Program Position Priority #1:

Faculty		Staff	1
Full-Time		Part-Time	20 hours

Position Name:

Real Time Captioner

Brief description:

Provides real time captioning for hard of hearing students.

Rationale: How will this person enhance or maintain your program's plans to improve outcomes relative to the college Mission, Institutional Core Competencies, Strategic Initiatives, Program Goals, etc. (i.e. What specific SLOAC/SSLOAC results support the program's need for this position?)
If applicable, address the FTE, PT/FTE ratios, and WSCH goals that support your request for this position.

Due to the lack of staff we are unable to meet the students'/campus' ever increasing need for captioning. This includes all areas (classroom, live broadcast, post production, and video). This lack of ability has a direct impact on student retention and success. SSLO #2 and #3

Program Position Priority #2:

Faculty		Staff	
Full-Time		Part-Time	

Position Name:

Brief description:

Rationale: How will this person enhance or maintain your program's plans to improve outcomes relative to the college Mission, Institutional Core Competencies, Strategic Initiatives, Program Goals, etc. (i.e. What specific SLOAC/SSLOAC results support the program's need for this position?)
If applicable, address the FTE, PT/FTE ratios, and WSCH goals that support your request for this position.

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Program Position Priority #3:

Faculty | Staff |

Full-Time | Part-Time |

Position Name:

Brief description:

Rationale: How will this person enhance or maintain your program's plans to improve outcomes relative to the college Mission, Institutional Core Competencies, Strategic Initiatives, Program Goals, etc. (i.e. What specific SLOAC/SSLOAC results support the program's need for this position?)
If applicable, address the FTE, PT/FTE ratios, and WSCH goals that support your request for this position.

NOTE: It is an expectation that all positions that are allocated 2 or more years prior to the next Comprehensive Program Review (2013-14) will be assessed relative to their contribution to the program, the program level outcomes and the program review criteria. In this light, briefly state some of the criteria you may use to assess the effect of each of the additional positions on your program.

Review Criteria:

B. Equipment/Materials/Facilities: Please submit up to three resource requests in department/program ranked order:

Program Resource Priority #1:

Equipment | Materials | Facilities | X

Est. Cost |

Item Name:

Space

Brief description:

1 private office, 2 cubicle spaces

Rationale: How will this resource enhance or maintain your program's plans to improve outcomes relative to the college Mission, Institutional Core Competencies, Strategic Initiatives, Program Goals, etc. (i.e. What specific SLOAC/SSLOAC results support the program's need for this item?)

Presently, DHHS has a lack of adequate office space to house interpreters and captioners. One additional office space and two cubicles are needed. This facility request is needed with or without the approval of additional staffing. Captioners require extensive hardware (television monitors, transcription equipment, and recording and playback equipment), which takes up considerable space, and due to the listening and manual transcribing responsibilities entailed in captioning/ editing, this position necessitates a private office. Currently there is no clear line of sight supervision as the staff is located in two separate areas. This prevents a cohesive work environment as well as having a deleterious effect on our communication. Being in two locations is also confusing for the students. Being housed in one location we will have the ability to more effectively and efficiently meet student needs. SSLO #1 and #2

Program Resource Priority #2:

Equipment [   ]   Materials [   ]   Facilities [   ]
Est. Cost [   ]

Item Name:

[   ]

Brief description:

[   ]

Rationale: How will this resource enhance or maintain your program's plans to improve outcomes relative to the college Mission, Institutional Core Competencies, Strategic Initiatives, Program Goals, etc. (i.e. What specific SLOAC/SSLOAC results support the program's need for this item?)

[   ]

Program Resource Priority #3:

Equipment [   ]   Materials [   ]   Facilities [   ]
Est. Cost [   ]

Item Name:

[   ]

Brief description:

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Rationale: How will this resource enhance or maintain your program's plans to improve outcomes relative to the college Mission, Institutional Core Competencies, Strategic Initiatives, Program Goals, etc. (i.e. What specific SLOAC/SSLOAC results support the program's need for this item?)

NOTE: It is an expectation that all resources that are allocated 2 or more years prior to the next Comprehensive Program Review (2013-14) will be assessed relative to their contribution to the program, the program level outcomes and the program review criteria. In this light, briefly state some of the criteria you may use to assess the effect of the additional equipment/materials/facilities on your program.

Review Criteria:

Divisional Summary (If applicable)

C. Human Resources: Of all the position requests within your Division what is the divisional ranking of your department/program position request?

Program Position Priority #1:   **Division Position Ranking:**

Program Position Priority #2:   **Division Position Ranking:**

Program Position Priority #3:   **Division Position Ranking:**

D. Equipment/Materials/Facilities: Of all the resource requests within your Division what is the divisional ranking of your department/program resource request?

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Program Resource Priority #1:   **Division Resource Ranking:**

Program Resource Priority #2:   **Division Resource Ranking:**

Program Resource Priority #3:   **Division Resource Ranking:**