

# Foothill Annual Program Review 2024

Annual Program Review Template 2024

## Annual Program Review 2024

1. Number of full-time faculty in the program.

3

2. Number of part-time faculty in the program.

10

3. Number of staff in the program.

N/A

4. Do the above numbers reflect any staffing changes?

Yes, we have a new FT Faculty member.

5. Refer to the most recent Comprehensive Program Review, what were the identified actions for improvement? Identify any current and/or new Strategic Goals.

Actions for improvement included adding clinical sites to support offerings and enrollment. Several clinical sites have been added, including St. Louise, and mini rotations at Kaiser and Sequoia Hospital. The added clinical sites allow us to accept a full cohort of 30 students.

6. What actions identified in the Comprehensive Program Review (or most recent Annual Program Review if no Comprehensive Program Review) have you completed this year?

We have maintained our clinical sites and are currently preparing for accreditation.

7. Explain your implementation timeline and if there have been any changes or updates.

Ongoing to maintain clinical sites. Self-study to be completed 12/24 and site visit will occur in 2025, date TBD.

8. Explain the evidence the program used to evaluate progress and provide an update on progress.

We completed an annual accreditation report and are in good standing. We are preparing to move to the Sunnyvale Campus in 2026.

9. Click the link and follow the instructions to the Disproportionate Impact dataset, then respond to the prompt below.

[https://foothilldeanza-my.sharepoint.com/:b:/g/personal/20078222\\_fhda\\_edu/ETXoAp44fMFCppHXvzplFgcB5ogzcvUXLknHriXo1ghkHg?e=H8axR7](https://foothilldeanza-my.sharepoint.com/:b:/g/personal/20078222_fhda_edu/ETXoAp44fMFCppHXvzplFgcB5ogzcvUXLknHriXo1ghkHg?e=H8axR7)

Identify the groups that are experiencing a disproportionate impact in the most recent year (highlighted in orange). In the text box below, provide the percentage point gap and the number of additional successes needed to erase the percentage point gap for each group.

For non-instructional programs that do not have program specific disproportionate impact student data, please provide an update on the program's 13-55 project (i.e., project description, students served, implementation timeline).

The Gap for LatinX students is -4 compared to -2, -1, or 0 for the other groups. We will continue to do outreach to attract more LatinX students. I currently spent an entire day speaking to over 500 middle school students, predominantly LatinX, to introduce them to our program. If more LatinX students apply to the program, then more will be represented. We also provide tutoring through NCBH to support them.

10. Use this opportunity to reflect on your responses in this document. Include your closing thoughts.

We continue to have a strong program that complies with accreditation.

Click on the link below to view the Annual Program Review Rubric.

[https://foothilldeanza-my.sharepoint.com/:w:/g/personal/20078222\\_fhda\\_edu/Ec2dqPH1B2RHinzFtnlz6sYB7-DOzW9lv1KkGyWdLuZkbg?e=CifFMU](https://foothilldeanza-my.sharepoint.com/:w:/g/personal/20078222_fhda_edu/Ec2dqPH1B2RHinzFtnlz6sYB7-DOzW9lv1KkGyWdLuZkbg?e=CifFMU)

End of Annual Program Review Template 2024

## Rubric Annual Program Review

### Criteria

The program's responses...

- align with the program's goals
- align with data
- are informed by data
- are within the control of the program
- have measurable outcomes

- Meets Expectations
- Needs Improvement

### Feedback

Will review the COARC accreditation self-study once it has been completed. Please note the new Medical Director is shared with the EMS Programs.

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This form is completed and ready for acceptance.