



CLARK ATLANTA UNIVERSITY

Office of Planning, Assessment and Research

**ADMINISTRATIVE and EDUCATIONAL
SUPPORT UNITS PERIODIC REVIEW:
Assessment Tool**

Department/Unit Name: _____

Evaluator(s): _____

Please indicate an appropriate response for each Content Area

Content Area 1: Mission and Objectives

1a. Criteria for Success **Met** **Not Met**

The department/unit has a current comprehensive mission statement that describes its functions and purpose, and is clearly linked to the University's mission statement.

Documentation Evidencing Compliance: _____

Comments:

1b. Criteria for Success **Met** **Not Met**

The department/unit objectives, means for assessing achievement of the objectives, and evidence of improvement of support services based on analysis of results are clearly stated.

Documentation Evidencing Compliance: _____

Comments:

Content Area 2: Functions Performed and Type of Services Provided

2a. Criteria for Success **Met** **Not Met**

The department/unit operations, functions and type of services provided are described.

Documentation Evidencing Compliance: _____

Comments:

Content Area 3: Governing Regulation Policies, Directives, Accreditation Standards, and Internal Policies and Procedures

3a. Criteria for Success **Met** **Not Met**

The department/unit has internal policies and procedures regarding staff rights and responsibilities.

Documentation Evidencing Compliance: _____

Comments:

3b. Criteria for Success **Met** **Not Met**

The department/unit has established governance and administrative structure that dictates authority and responsibility for decision making according to the University's policies.

Documentation Evidencing Compliance: _____

Comments:

3c. Criteria for Success **Met** **Not Met**

A description of how the department/unit complies with National, State, and Local standards are clearly explained.

Documentation Evidencing Compliance: _____

Comments:

Content Area 4: Organizational Structure within the Context of the University

4a. Criteria for Success **Met** **Not Met**

The department/unit organization structure of the administration and staff is described.

Documentation Evidencing Compliance: _____

Comments:

Content Area 5: Personnel, Technical Support, Space, Equipment and Funding, and Use of Resources

5a. Criteria for Success **Met** **Not Met**

The department/unit indicates names and job description of personnel and denotes any changes in personnel within the five-year cycle.

Documentation Evidencing Compliance: _____

Comments:

5b. Criteria for Success **Met** **Not Met**

The department/unit staff has adequate office space, access to technology/equipment and resources to support the work and services provided.

Documentation Evidencing Compliance: _____

Comments:

Content Area 6: Broad-Based Involvement: Personnel and Customer Feedback

6a. Criteria for Success **Met** **Not Met**

The department/unit provided an opportunity for employees to evaluate the services, review data collected with feedback on the services by means of: surveys, staff meetings, interviews, or focus groups.

Documentation Evidencing Compliance: _____

Comments:

6b. Criteria for Success **Met** **Not Met**

The department/unit obtained customer feedback through surveys or focus groups on customer needs, expectations, and evaluation of the services provided.

Documentation Evidencing Compliance: _____

Comments:

Content Area 7: Status of Findings and Recommendations of Prior Periodic Review

7a. Criteria for Success **Met** **Not Met**

The department/unit provides a statement explaining the status of findings and recommendations of the prior internal or external reviews and evaluations.

Documentation Evidencing Compliance: _____

Comments:

7b. Criteria for Success **Met** **Not Met**

The department/unit provides a statement explaining the status of the **Plan of Action** for improvement in accordance to the Unit's Quality Improvement Plan (UQIP) completed as a result of the prior periodic review.

Documentation Evidencing Compliance: _____

Comments:

Content Area 8: Overall Analysis of the Department/Unit Strengths and Weaknesses

8a. Criteria for Success **Met** **Not Met**

A description of the department/unit strengths and weaknesses is provided with a clear explanation of the strengths and effectiveness with supporting services and how the weaknesses are addressed.

Documentation Evidencing Compliance: _____

Comments:

Content Area 9: Final Recommendations for Improvement Based on Findings of the Self-Study Report

9a. Criteria for Success **Met** **Not Met**

The department/unit has provided a written evaluation **Self-Study Report** addressing recommendations of priorities for improvement.

Documentation Evidencing Compliance: _____

Comments:
