

Instructional Program Review- Annual Update Template

Instructional Program

Indicate the type of program: AA; AS; AA-T; AS-T; Certificate

Program Name: Associate of Arts Degree, Humanities

Academic Year: 2025 - 2026

Name of Faculty Submitter(s): Andrew Rehfeld

Annual Update #1 #2

***Note: An Annual Update must be submitted each year that a Program Review is not submitted.**

I. Progress on Program Level Outcomes (PLOs) and Student Learning Outcomes (SLOs) Data

A) Summarize the progress made on course level outcomes and assessments (SLOs):

Across the disciplines, success rates have been consistent. Faculty are getting more consistent at inputting SLO data, and the general trends are starting to take shape, though the implementation of eLumen has taken some time.

MUSIC DEPARTMENT: Courses Assessed

MUSI3 - Music Appreciation (American Music) - Fall 2024

SLO 1. Analyze the historical and sociological effects of American music.

38.39% Exceeds Expectations

59.12% Meets Expectations

2.49% did not complete assignment

SLO 2. Examine and discuss the value of the arts.

19.2% Exceeds Expectations

80.8% Meets Expectations

Instructional Program Review- Annual Update Template

MUSI2 – Music Appreciation (Classical Music) – Spring 2025
Date unknown

THEATRE ARTS DEPARTMENT: Courses Assessed

TART1 - Beginning Acting – Fall 2024

SLO 1. Evaluate a script to discern subtext and identify objectives and obstacles.

75% Exceeds Expectations

25% Meets Expectations

SLO 2. Demonstrate understanding of character development and create a credible theatrical portrayal.

50% Exceeds Expectations

25% Meets Expectations

25% Does Not Meet Expectations

TART3 - Theatre Appreciation – Spring 2025

SLO 1. Analyze the contributions and impact of the playwright, director, actor, designer, producer, critic, and audience on theatre.

15.38% Exceeds Expectations

42.30% Meets Expectations

23.07% Does Not Meet Expectations

19.23% did not complete assignment

SLO 2. Distinguish and summarize a vocabulary of common theatre terms

80.76 Exceeds Expectations

15.38% Meets Expectations

3.84% did not complete assignment

B) Please list specific courses or SLOs that were identified for student-centered growth and improvement.

Use the information from Part C of the “Program Learning Outcomes Assessment Data” section of the IPR.

1) List the actions identified to help grow or improve those areas.

Click or tap here to enter text.

Instructional Program Review- Annual Update Template

2) Discuss the progress the program has made on those actions. Include any data used to support progress.

Click or tap here to enter text.

C) Please list any actions identified to support equitable outcomes.

Use the information from Part D of the "Program Learning Outcomes Assessment Data" section in the IPR.

1) List the specific student groups the program identified as students they would like to focus their efforts on.

The Program Review Trends report showed that Two DI groups (Black/African and Pacific Islander) identified as needing more early intervention and support.

2) Discuss any progress with equitable action within the program and any measures taken to ensure the identified student group(s) would receive appropriate support. Include any data used to support progress.

Humanities departments have worked to make their syllabi more inclusive based on suggestions by the Office for Institutional Equity and Diversity. These include hierarchical headings, electronic hypertext, course schedule in table format, images, and graphics. The departments have also worked at making sure images and graphics within online content is culturally responsive.

D) Describe any other program, course, and/or instructional changes made by your program as a result of the outcomes assessment process.

Humanities departments have worked at clarifying assignment instructions to give students a better chance at success. Discussion questions have been changed or updated to reflect further critical thinking, student interest, and engagement.

Spring 2025 – MUSI 3 Musical Theatre Analysis Assignment

- **Were we a more conservative or progressive society as a whole?**

Instructional Program Review- Annual Update Template

- **Collective feelings about race?** Give a specific example (i.e. laws, media representation, etc.).
- **Collective feelings about women's rights?** Give a specific example (i.e. laws, media representation, etc.).
- **Collective feelings about LGBTQ rights?** Give a specific example (i.e. laws, media representation, etc.).
- **Were we overwhelmingly religious or leaning secular?**

Fall 2024 – same assignment

- **Were we a more conservative or progressive society as a whole?**
- **Collective feelings about race?** Give a specific example (i.e. laws, media representation, data, etc.).
- **Collective feelings about women's rights?** Give a specific example (i.e. laws, media representation, data, etc.).
- **Collective feelings about LGBTQ rights?** Give a specific example (i.e. laws, media representation, data, etc.).
- **Were we overwhelmingly religious or leaning secular? How high was church, etc. attendance What is the data?**

E) Reflecting on the responses for B) and C) above, what will you implement for the next assessment cycle?

Humanities departments – Continue to revise or change discussion questions and/or assignments as needed.

II. Progress Toward Achieving Program Goals, Objectives, and Outcomes

These should be carried forward from your full Program Review (Section III), or from your Annual Update #1, if revised since your full Program Review.

A) List the 2-3 goals from your Program Review or most recent update.

1. **GOAL #1**
Increase enrollment and efficiency.
2. **GOAL #2**
Humanities ADT.

Instructional Program Review- Annual Update Template

3. GOAL #3

Generate accurate data on SLOs/PLOs and incorporate into curriculum.

B) Have any goals been completed or discontinued?

If yes, please list the goal and whether it has been completed or discontinued; if discontinued, please explain why.

Yes No

Goal 1 is not completed, but is ongoing.

Goal 2 has been delayed.

Goal 3 is hard to measure as completed, but it is essentially.

C) Discuss the objectives and related outcomes for each goal.

1. GOAL #1 Objective(s) with related Outcome.

INCREASE ENROLLMENT AND EFFICIENCY

PURPOSE - Recruitment

-Visits to area schools with presentations about performing arts classes at BCC (done by Devin Vargas). Presentation was given for approximately 200 students.

- Visits to Barstow High School's choir class to present information about class and workshop with singers. Approximately 42 students were present.

- Joint choral concert with Barstow High School.

- Club sponsorship of community productions at the PAC, one being a large musical.

During the school year of 2024-2025, there were 9-10 club members each semester.

- Productions planned that have name recognition and larger casts.

The Fall 2024 production has a cast of 37 (20 of which are children) with 15 in the crew. Total = 52

The Spring 2024 production calls for a minimum of 23 cast members (6 of which are children), not counting ensemble.

- An ADT in Theatre Arts has been created and close to being fully implemented.

- Social Media canvassing of class and audition notices.

• Discuss any progress toward meeting the goal based on the goal objectives.

- Two students from Barstow High School enrolled in College Choir.

- Two members of community production joined fall Theatre Arts production.

- 40 people auditioned for fall 2024 Theatre Arts production. All were cast.

- Devin Vargas' presentations resulted in 81 Interest Forms for various performing arts classes at BCC from students at Barstow High School and Silver Valley High School.

Instructional Program Review- Annual Update Template

- **Briefly explain how you have been measuring the goal and any notable indicators of forward progress.**

Informal tracking of student enrollment based on objective event.

Instructors mentally note how many students enroll in their classes.

Devin Vargas' surveys given to area school students after presentation.

2. GOAL #2 Objectives with related Outcome.

HUMANITIES ADT

- **Discuss any progress toward meeting the goal based on the goal objectives.**
No progress made towards this goal
- **Briefly explain how you have been measuring the goal and any notable indicators of forward progress.**

3. GOAL #3 Objectives with related Outcome.

GENERATE ACCURATE DATA ON SLOs/PLOs AND INCORPORATE INTO CURRICULUM -

- **Discuss any progress toward meeting the goal based on the goal objectives.**
Lots of progress made towards this goal. Faculty are inputting SLO and PLO data into eLumen, which has been helpful in measuring the state of the department.
- **Briefly explain how you have been measuring the goal and any notable indicators of forward progress.**
The data is available in eLumen.

D) List any resource you are requesting for each goal.

1. Goal 1 Goal 2 Goal 3

Please list the resource and how it relates to the goal.

Music and Theatre Arts Departments:
- Increase in district budgets.

Instructional Program Review- Annual Update Template

FACULTY NEEDED IN FUTURE

Almost every class in Theatre Arts and Music are capped at 45.

There are currently 3 instructors who teach Music

There is currently 1 instructor who teaches Theatre Arts

Existing classes that need additional faculty -

1 instructor to teach:

Jazz Dance

Modern Dance

Newer classes for the ADT will need additional faculty -

1 instructor to teach:

Intro to Theatre Design

Intro to Stage Lighting

Stagecraft

Technical Theatre in Production

1 instructor to teach:

Intro to Stage Costume

1 instructor to teach:

Intro to Stage Makeup

2. **Goal 1**

Goal 2

Goal 3

Please list the resource and how it relates to the goal.

Click or tap here to enter text.

Instructional Program Review- Annual Update Template

3. Goal 1 Goal 2 Goal 3

Please list the resource and how it relates to the goal.

Click or tap here to enter text.

III. New Goals (optional)

This section is optional and should be used to replace a completed or discontinued goal OR if a new goal has become necessary for the program.

A. NEW GOAL #1

Click or tap here to enter text.

1. Alignment to BCC Strategic Priority (*Select at least one but choose all that apply*)

Choose an item.

Choose an item.

Choose an item.

Choose an item.

2. Relationship to Guided Pathways

- Clarify the Path
- Entering the Path
- Staying on the Path
- Support Learning

3. Please list at least one objective for achieving this goal.

Click or tap here to enter text.

4. Please list outcome statements for each objective.

Click or tap here to enter text.

5. Briefly explain how you will measure the outcome.

Click or tap here to enter text.

6. Please list resources (if any) that will be needed to achieve the goal/outcome.

Click or tap here to enter text.

Instructional Program Review- Annual Update Template

B. NEW GOAL #1

Click or tap here to enter text.

1. Alignment to BCC Strategic Priority (*Select at least one but choose all that apply*)

Choose an item.

Choose an item.

Choose an item.

Choose an item.

2. Relationship to Guided Pathways

- Clarify the Path
- Entering the Path
- Staying on the Path
- Support Learning

3. Please list at least one objective for achieving this goal.

Click or tap here to enter text.

4. Please list outcome statements for each objective.

Click or tap here to enter text.

5. Briefly explain how you will measure the outcome.

Click or tap here to enter text.

6. Please list resources (if any) that will be needed to achieve the goal/outcome.

Click or tap here to enter text.

IV. Resource Requests: What does the program need to meet its goals and objectives?

What does the program need to meet its goals and objectives?

List all resources from Sections II.D and III.6 below.

If there was no room on the template to list all resources being requested for a single goal/objective, you may list additional resource requests here. Also list any resources required to implement planned improvements.

IMPORTANT: A BUDGET ALLOCATION PROPOSAL must be completed and submitted for **EACH** new resource requested.

Instructional Program Review- Annual Update Template

Goal #	Objective #	Resource Required	Estimated Cost	BAP Required? Yes or No	In No, indicate funding source
					Click or tap here to enter text.

Instructional Program Review- Annual Update Template

					<p>Click or tap here to enter text.</p>
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Instructional Program Review- Annual Update Template

Click or tap here to enter text.					
Click or tap here to enter text.					
Click or tap here to enter text.					

BUDGET ALLOCATION PROPOSAL

Date:	Originator:		
Program or Department Name:			
Dean/Vice President/Supervisor:			
What are you requesting? (Brief) Budget Increase (not including Professional Experts) Amount Requested:			
Funding	<input type="checkbox"/> One-time <input checked="" type="checkbox"/> Ongoing Funding Funding Source (if known):		
REQUEST TYPE:			
<input type="checkbox"/> Personnel/Staffing <small>Complete Personnel/Staffing section below</small>	<input type="checkbox"/> Technology Resource <small>Complete Technology section below</small>	<input type="checkbox"/> Facilities Resource <small>Complete Facilities section below</small>	<input type="checkbox"/> Professional Development <small>Complete Professional Development section below</small>
OTHER			

PERSONNEL/STAFFING REQUEST				
Is the position request for: <input type="checkbox"/> Faculty <input type="checkbox"/> Classified <input type="checkbox"/> Management/Confidential				
Is the position requested: <input type="checkbox"/> A new classification (Attach proposed job description, or detailed list of proposed duties) <input type="checkbox"/> An existing classification <i>Official Job Title:</i> _____				
Is the position requested: <input type="checkbox"/> Full Time		<input type="checkbox"/> Part Time:	Months/Year	Hours/Week

TECHNOLOGY RESOURCE REQUEST					
Indicate the category of the request:					
<input type="checkbox"/> Hardware	<input type="checkbox"/> Software	<input type="checkbox"/> Printer/Copier	<input type="checkbox"/> Network	<input type="checkbox"/> Audio-Visual	<input type="checkbox"/> License/Maintenance
Indicate the intended users: Staff		<input type="checkbox"/> Students		<input type="checkbox"/> Faculty	
Is training required? <input type="checkbox"/> No		<input type="checkbox"/> Yes Explain:		<input type="checkbox"/> Other	
How will it be secured? <input type="checkbox"/> Alarm Cabinet		<input type="checkbox"/> Secure Room		<input type="checkbox"/> Secure	
				<input type="checkbox"/> Cable/Lock	
				<input type="checkbox"/> Password	
Have you completed and attached the Technology Assessment Form?					

BUDGET ALLOCATION PROPOSAL

FACILITIES RESOURCE REQUEST

BUDGET ALLOCATION PROPOSAL

Indicate the intended users:

Students Faculty Staff Other

Is maintenance required? No

Yes Explain:

BUDGET ALLOCATION PROPOSAL

PROFESSIONAL DEVELOPMENT REQUEST

Indicate the intended users: Students Faculty Staff Other

Do other internal areas/departments need to be

involved? No Yes Explain:

Is technology needed? No Yes
Explain:

1. Why is the request being made?

BUDGET ALLOCATION PROPOSAL

2. a) Where in the Program Review/Annual Update is the request supported? Include the text from the Program Review AND cite the applicable section number(s).

BUDGET ALLOCATION PROPOSAL

- b) Explain how the request is supported with information gathered from the assessment of outcomes (Student Learning Outcomes, Program Level Outcomes, Service Area Outcomes, or Administrative Unit Outcomes).
 - c) How was this included in the Area Goals section of your Program Review? Please cite section/item number and include the text.
- 3. If this item is approved, what departments or resources are needed, or would be affected, when implementing or developing it, on both a short-term and a long-term basis? Have they been notified?

BUDGET ALLOCATION PROPOSAL

4. a) How will this resource improve student success or institutional services?

BUDGET ALLOCATION PROPOSAL

b) What data will you gather and analyze to demonstrate that your proposal is meeting this goal(s)?

5) Describe how your request is aligned with as many of the college's strategic planning documents as applicable. (If the request does not align with a document, indicate N/A.)

Please be specific and provide detail, ensuring a clear correlation between content of referenced document and the request. Cite the section and page numbers where the correlation can be found.

BUDGET ALLOCATION PROPOSAL

4. Others: Such as [Technology Plan](#) , [Facilities Master Plan](#), [HR Staffing Plan](#), [Professional Development Plan](#)

BUDGET ALLOCATION PROPOSAL

ADMINISTRATIVE USE

Administrator:

Title:

Comments/Recommendations:

Signature:

Date:

Administrator:

Title:

Comments/Recommendations:

Unit Priority Ranking: _____ of _____

BUDGET INFORMATION

*(This section **MUST** be completed)*

Budget Program Number: _____

Restricted

Unrestricted

Comments regarding Budget
Information:

Signature:

Date:

BUDGET ALLOCATION PROPOSAL

Date: 9/13/23	Originator: Amy Ross		
Program or Department Name: Music			
Dean/Vice President/Supervisor: Emily Garrison			
What are you requesting? (Brief) Budget Increase (not including Professional Experts) Amount Requested: \$8,000			
time Funding	<input checked="" type="checkbox"/> Ongoing Funding Funding Source (if known):		
REQUEST TYPE:			
<input type="checkbox"/> Personnel/Staffing <i>Complete Personnel/Staffing section below</i>	<input type="checkbox"/> Technology Resource <i>Complete Technology section below</i>	<input type="checkbox"/> Facilities Resource <i>Complete Facilities section below</i>	<input type="checkbox"/> Professional Development <i>Complete Professional Development section below</i>
<input checked="" type="checkbox"/> OTHER			

PERSONNEL/STAFFING REQUEST				
Is the position request for:	<input type="checkbox"/> Faculty	<input type="checkbox"/> Classified	<input type="checkbox"/> Management/Confidential	
Is the position requested:	<input type="checkbox"/> A new classification (Attach <i>proposed</i> job description, or <i>detailed</i> list of proposed duties)			
	<input type="checkbox"/> An existing classification <i>Official Job Title:</i> _____			
Is the position requested:	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time:	Months/Year	Hours/Week

BUDGET ALLOCATION PROPOSAL

TECHNOLOGY RESOURCE REQUEST

Indicate the category of the request:

Hardware Software Printer/Copier Network Audio-Visual License/Maintenance

Indicate the intended users:
Staff Students Faculty Other

Is training required? No Yes Explain:

How will it be secured? Alarm Secure Room Secure Cable/Lock Password
Cabinet

Have you completed and attached the [Technology Assessment Form](#)?

FACILITIES RESOURCE REQUEST

BUDGET ALLOCATION PROPOSAL

Indicate the intended users:

Students Faculty Staff Other

Is maintenance required? No

Yes Explain:

BUDGET ALLOCATION PROPOSAL

PROFESSIONAL DEVELOPMENT REQUEST

Indicate the intended users: Students Faculty Staff Other

Do other internal areas/departments need to be

involved? No Yes Explain:

Is technology needed? No Yes
Explain:

1. Why is the request being made?

2. a) Where in the Program Review/Annual Update is the request supported? Include the text from the Program Review AND cite the applicable section number(s).

BUDGET ALLOCATION PROPOSAL

The request is supported in the Annual Humanities Update #2.

II. D. 1

- b) Explain how the request is supported with information gathered from the assessment of outcomes (Student Learning Outcomes, Program Level Outcomes, Service Area Outcomes, or Administrative Unit Outcomes).**

- c) How was this included in the Area Goals section of your Program Review? Please cite section/item number and include the text.**

- 3. If this item is approved, what departments or resources are needed, or would be affected, when implementing or developing it, on both a short-term and a long-term basis? Have they been notified?**

- 4. a) How will this resource improve student success or institutional services?**

BUDGET ALLOCATION PROPOSAL

b) What data will you gather and analyze to demonstrate that your proposal is meeting this goal(s)?

5) Describe how your request is aligned with as many of the college's strategic planning documents as applicable. (If the request does not align with a document, indicate N/A.)

Please be specific and provide detail, ensuring a clear correlation between content of referenced document and the request. Cite the section and page numbers where the correlation can be found.

BUDGET ALLOCATION PROPOSAL

ADMINISTRATIVE USE

Administrator:

Title:

Comments/Recommendations:

Signature:

Date:

Administrator:

Title:

Comments/Recommendations:

Unit Priority Ranking: _____ of _____

BUDGET INFORMATION

*(This section **MUST** be completed)*

Budget Program Number: _____

Restricted

Unrestricted

**Comments regarding Budget
Information:** _____

Signature:

Date: