



1.9.1 Evaluation/Assessment Program

Chapter 1 - Administration and Organization	Original Effective Date: October 1999
Section: 1.9 Evaluation/Assessment of Educational Programs, Administrative, Operational and Academic Support Services	Date Last Reviewed: February 2022
Responsible Entity: Vice President for Academic, Faculty and Student Affairs	Date Last Revised: February 2022

I. Purpose

UT Health San Antonio maintains a broadly inclusive, coordinated and ongoing process of planning and assessment of its programs and services, in order to ensure their quality and the monitoring of continuous improvement in fulfillment of UT Health San Antonio's missions.

II. Scope

This policy applies to all administrative, operational and academic support units at UT Health San Antonio.

III. Policy

- A. Each educational, administrative, operational, or academic support unit is required to develop and implement periodic evaluation/assessment processes.

For administrative, operational or academic support units, suggested areas for evaluation/assessment include the following:

1. level of satisfaction of those who use services (including faculty, staff, and students as appropriate to the specific unit);
2. ways to improve services offered;
3. how existing services continue to contribute to the missions of UT Health San Antonio; and
4. how new services contribute to the missions of UT Health San Antonio.

Reviews of academic support units incorporate the assessment of student learning outcomes, as appropriate to the specific unit.

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B. Process

An evaluation/assessment process, and schedule for completion of the necessary evaluation/assessment activities, must be prepared by the appropriate dean or vice president for their areas of responsibility. The evaluation/assessment process must include:

1. identification of key services and or outcomes to be evaluated/assessed;
2. method(s) of evaluation/assessment;
3. how results of the evaluation/assessment activities are reviewed and used to identify areas where the standards of quality are met and areas that warrant planned new efforts to improve the services/outcomes; and
4. a subsequent evaluation/assessment after implementation of the improvement plan to determine if the expected improvements were achieved.

As part of their annual performance evaluations, deans and vice presidents will provide to the president the outcomes of the assessments of the units reporting to them. These institutional leaders also develop and report action plans that are responsive to the unit evaluations, including mechanisms for monitoring improvement, as part of their annual work plans.

IV. Definitions

There are no defined terms used in this Policy.

V. Related References

There are no related documents associated with this Policy.

VI. Review and Approval History

- A. The approving authority of this policy is the University Executive Committee.
- B. The review frequency cycle is set for three years following the last review date, a time period that is not mandated by regulatory, accreditation, or other authority.

Effective Date	Action Taken	Approved By	Date Approved
10/1998	Policy Origination		
08/2017	Policy Revision		
02/2022	Policy Review	VP/AFSA, ICPO	02/25/22