



# Co-curricular Assessment Report

Program/Department Name: Physical Plant  
Year of CAR Completion: 2016-17  
CAR Cycle: 2014-15 through 2016-17

## Co-curricular Assessment Report

### **Organization of Program Review Materials:**

- ◆ Component I: Response to Previous Co-curricular Assessment Report
- ◆ Component II: Review of Assessment Data
- ◆ Component III: Criteria for Co-curricular Assessment Report
- ◆ Component IV: Recommendations and Executive Summary
- ◆ Appendix A: Co-curricular Program/Department Summary Work Plan

NOTE: Please spell out any acronym the first time it is used.

NOTE: Whenever possible, link answers to supplemental documentation that you are providing.

## Component I

### Response to Previous Co-curricular Assessment Report

**Based on your previous CAR review**, identify strengths, areas of improvement, opportunities, threats, and progress to date. *(Please enter NA in these areas if this is your first CAR.)* **\*\*If you are referring to supplemental documentation that you are including in this CAR, please identify that documentation clearly in your answers below.**

Program/Department: Physical Plant

Strengths:

- Well-maintained facilities and grounds
- Dedicated staff
- High quality Customer Service
- Response time on reactive/corrective work orders

Areas of improvement:

- Added buildings and equipment to our Building Automation System to better control heating/cooling
- Record-keeping/filing
- Handicap Accessibility
- Campus growth

Opportunities:

- Replace outdated HVAC equipment
- Continue adding buildings to the Building Automation System
- Ongoing training for new employees/new equipment
- Find a better way to send out work order service rating requests and to track them

Threats:

- Still short-staffed based on the 2013 APPA Maintenance Staffing Guidelines
- Additional buildings/increased square footage with no additional staff

Progress to Date:

- Continue to add buildings to our Building Automation System to regulate heat/cooling.
- In the process of hiring to replace custodial staff who have retired/quit
- All filing/scanning of older paperwork has been complete. Scanning/filing is done on a daily basis now.
- Implemented an annual checklist for the handicap door buttons at each entrance throughout the campus

## Component II

### Review of Previous Assessment Data

***\*\*If you are referring to supplemental documentation that you are including in this CAR, please identify that documentation clearly in your answers below.***

**1. What changes have been recommended that have had a positive effect on your program's outcomes? (Please be specific.)**

- Completed work orders now list the corrective action taken, which allows the requestor to see what was done.
- We upgraded the S Building and B Building elevators.
- We installed ramps from the Faculty/Staff parking lot, in front of the J&K Buildings and through the gravel area between the M Building and B/C Buildings.

**2. What changes to your program/department were made based on findings from the previous CAR?**

- The Physical Plant Department is in the process of getting 100% of our buildings on the Building Automation System to help us regulate temperatures and identify equipment failures in a timely manner.
- We use Survey Gizmo to send out random service rating requests once a work order is completed.

## Component III

### Criteria for Co-curricular Assessment Report

#### Criterion 1.0 Mission, Values and Goals

**Mission:** The mission of the Physical Plant Department is to provide and mandate a safe, clean, comfortable physical environment and to provide quality services that are pro-active and responsive to Stark State's mission and to support our students, staff and visitors.

**Values:** The Physical Plant Department will be recognized as a center of excellence for service delivery and for our commitment to innovation and sustainability.

**Goals:**

1. To provide high quality environmental services for the campus community
2. To meet applicable code requirements; Provide OSHA Safety Training
3. To ensure handicapped accessibility throughout the College

**\*Note if any changes have been made to the mission, values, and/or goals since the last CAR.**

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#### Criterion 2.0 Baseline Data

**1.) What baseline data has your Program/Department collected during this CAR term?**

**a. Goal 1**

- Noel –Levitz Student Satisfaction Inventory (Item #24, 39, 68, 94)
- Student photographic assessment
- Support effectiveness survey
- Work order requests (service rating email upon completion)
- National Association Standards

**b. Goal 2**

- Fire, Elevator, Boiler, Backflow Preventers Inspection Compliance
- OSHA Training Compliance (monthly)

**c. Goal 3**

- Checklist (doors, auto doors, restrooms, signage, parking, ramps, elevators); annual each spring
- Student feedback
- Faculty/Staff feedback

**2.) How is that data used to evaluate the Program/Department?**

Each goal has several measures that are tracked throughout the assessment process.

## Criterion 2.0 Program/ Departmental Assessment Procedure and Action Plan

<b>Program/Department Name: Physical Plant</b>
<b>Individual Completing Report: Georgi Kerby</b>
<b>Individual(s) Reviewing Report: Steve Spradling, Bill Cook, Richard Rosenberger</b>
<b>Date:</b>

### Program/ Departmental Assessment Procedure and Action Plan

#### **Purpose:**

To self-identify the status of Program/Department in the outcomes assessment process as well as the action-steps and timetable for the development of assessment processes.

#### **Procedure:**

All programs and departments must complete the assessment process. A follow-up assessment report on the implementation of the assessment plan will be due at the end of the following academic year. Programs meeting effective assessment standards will be required to submit an assessment report on a three-year cycle (two years of assessment and one year of implementation).

#### **Directions:**

Mark the appropriate response to the Yes/No items with an X. Provide a brief summary of action steps to meet the Criteria (for example, the department will meet twice a month over the next term to develop goals). Please note that it is critical that due diligence is given to the development of goals and associated outcome measures.

Assessment Criteria

#### **Goals:**

Does the Department have specific student learning or academic/ student service goals which reflect the discipline or service area professional standards?

Yes   X   No       

#### **Outcome Measures:**

Are direct and indirect outcome measures identified for each goal?

Yes   X   No       

#### **Research:**

Is research systematically conducted to evaluate success or failure in achieving outcomes?

Yes   X   No

**Findings:**

Are research results analyzed and interpreted and findings determined?

Yes   X   No       

**Review Process:**

Are findings discussed and reviewed by appropriate groups and individuals and recommendations made for action?

Yes   X   No       

If no, what are the proposed action steps to meet the Criteria?

**Proposed Actions:**

Are recommendations acted upon?

Yes   X   No       

If no, what are the proposed action steps to meet the Criteria?

What is the proposed timetable for the action steps?

**Improvements:**

Have actions resulted in documented improvements in student learning or academic/ student services?

Yes   X   No       

If no, what are the proposed action steps to meet the Criteria?

What is the proposed timetable for the action steps?

## Assessment Measures Inventory

**\*The matrix should contain all goals as they pertain to the CAR.**

<b>Assessment Measures for Goals</b> (Outcome measures from assessment report)	<b>Is trend data available for the measure?</b> (Yes, No, NA)	<b>Has a performance benchmark(s) been identified for the measure?</b> (Yes, No, NA)	<b>Type of performance benchmark - SSC</b> (internal), <b>State-level</b> (OACC, OBR, Etc.), <b>National</b> (Professional Org., accrediting group, etc.) <i>List all that apply</i>
Goal 1: Noel Levitz Student Satisfaction Inventory (Item #24, 39, 68, 94)	Yes	Yes	National
Goal 1: Student Photographic Assessment	Yes	NA	NA
Goal 1: Work Order Requests	Yes	Yes	SSC
Goal 2: Fire, Elevator, Boiler, Backflow Preventers Inspection Compliance	Yes	Yes	State
Goal 2: OSHA Training Compliance (monthly)	Yes	NA	NA
Goal 3: Checklist (doors, auto doors, restrooms, signage, parking, ramps, elevators); annual each spring	Yes	Yes	SSC
Goal 3: Student Feedback	Yes	Yes	SSC
Goal 3: Faculty/Staff Feedback (survey)	Yes	Yes	SSC



### Criterion 3.0: Assessment Results Report

#### Purpose:

The report is a summary compilation of key assessment methods, findings, review processes, actions, and improvements related to the academic/student service or learning goals of the Program/Department on an annual basis. As an historical record of assessment activities, the report provides for and supports the *systematic* assessment of academic support outcomes.

#### Instructions:

Enter the outcome measure in the space provided. Please note that for each goal it is expected that a mix of quantitative and qualitative as well as direct and indirect measures are employed.

Provide a brief summary of baseline data collected by the Program/Department and how that data has been used during the current CAR cycle.

Provide a brief summary of *key findings*, either as bulleted points or in short paragraph form.

Provide a brief summary on the review committee/review process (for example, Findings are reviewed by the Director and staff on a per term basis and recommendations are forward to the VP for further review).

Provide a brief summary of any proposed actions for the next term/CAR cycle. Please note that not all findings result in actions.

Provide a brief summary of any improvements from the previous CAR cycle (this does not apply to new measures the first year).

**Goal 1:** To provide high-quality environmental services for the campus community

**Outcome Measure 1:** Noel-Levitz Student Satisfaction Inventory Items 24, 39, 68, 94

Terms of Assessment:        Fall \_\_\_\_\_    Spring   X      Annual \_\_\_\_\_

**Findings:** Satisfaction with facilities and condition of the grounds met or exceeded survey norms. Student responses include:

1. Parking lots are well-lighted and secure - Mean difference of 0.48 with triple asterisks
2. The amount of student parking space on campus is adequate – Mean difference of 0.13
3. On the whole, the campus is maintained – Mean difference of 0.37 with triple asterisks
4. Campus appearance as a factor to enroll – No data supplied

Per the Noel-Levitz Interpretive Guide:

If the mean difference is a POSITIVE number, then our students are MORE satisfied than the students in the comparison group. If the mean difference is a NEGATIVE number, our students are LESS satisfied than the students in the comparison group.

The level of significance is reflected by the number of asterisks which appear behind the mean difference number:

- No asterisks: No significant difference;

- One asterisk: Difference statistically significant at the .05 level
- Two asterisks: Difference statistically significant at the .01 level
- Three asterisks: Difference statistically significant at the .001 level

The greater the number of asterisks, the greater the confidence in the significance of this difference, and the greater the likelihood that this difference did not occur by chance. For example, statistical significance at the .05 level indicates that there are five chances in 100 that the difference between your institution's satisfaction score and the comparison group satisfaction score would occur due to chance alone. The .01 level indicates a one in 100 chance and the .001 level indicates a one in 1,000 chance. If there are no asterisks for a particular score, then the level of satisfaction is basically the same between Stark State and the comparison group.

**Review Committee/Review Process:** Data was reviewed by the Director of Institutional Research and Planning comparing results to National public colleges to compile SSC's mean score.

**Improvements:** Since the last assessment, the Physical Plant Department has completed the addition of all buildings to the Building Automation System, which has helped us regulate temperatures and identify equipment failures in a timely manner. This has resulted in less work orders and complaints regarding heating/cooling issues.

**Outcome Measure 2: Student Photographic Assessment**

Terms of Assessment:        Fall   X          Spring \_\_\_\_\_        Annual \_\_\_\_\_

**Findings:** Approximately 26 students from our Photography Program participated in the Photographic Assessment. Positive and Negative comments include:

- **Positive Findings**
  - Installation of Military Flags
  - Well-maintained grounds
  - Attention to Diversity & Literature
  - Campus Growth
  - Way-finding
  - Teacher Involvement with the Students
  - Smoke-free environment
  - Keeping up with technology
- **Negative Findings**
  - Lack of places to socialize
  - Lack of parking
  - Courtyard not aesthetically pleasing
  - Smoking in unauthorized places
  - Narrow staircases in some areas
  - Lack of seating outside classrooms
  - Parking lot maintenance
  - Older buildings not getting enough attention

**Review Committee/Review Process:** Reviewed findings with Steve Spradling, Director of Physical Plant and Construction, Bill Cook, Maintenance Supervisor, and Mike Mastri, Grounds Supervisor.

**Improvements:** A retaining wall was built and drought-resistant plants were installed in the Courtyard using the HWH Community Sustainability grant. We are continuing to upgrade that area as finances allow.

Parking lot maintenance is budgeted annually in the Capital Budget. Various parking lots are seal-coated, paved and/or crack-filled based on need.

### **Outcome Measure 3: Support Effectiveness Survey**

Terms of Assessment:        Fall \_\_\_\_\_        Spring   X          Annual \_\_\_\_\_

**Findings:** Over 280 employees responded to the survey and results show the Physical Plant department consistently scored over 3.5 on the key areas, for an average grade of A-, making us the one of the highest rated departments in the College. Out of 42 comments, 32 were very positive (76%); for example:

- Always helpful and courteous
- Best I have ever seen
- Exceptionally good
- Respond quickly to issues
- Midnight custodial are very dedicated to keeping the college clean and inviting to all.
- Most respond to needs quickly.
- Those that work in the maintenance department are outstanding! They are helpful, kind, hard-working and do an excellent job. Their handling of requests in a timely manner is admirable. I appreciate their hard work and diligence to the utmost.

The remaining 24% of the comments were either negative, non-applicable or suggestive; for example:

- Operating at a reduced staff; occasionally shows in the cleanliness of the women's restrooms. This is not a reflection on the job of these staff persons, just the frequency in which they can't clean the facilities due to lack of personnel.
- No assistance from Maintenance in hauling scrap metal from the welding program or moving the machine shop.
- Very rare that anyone answers the extension when you call to report a problem that needs immediate attention. Someone should answer the line all the time in the event of an emergency.
- Some of the employees are unfriendly, sometimes rude.
- It would be nice if they dusted the offices every once in a while. It seems like all they do is empty the trash.
- The need to have a form signed by the President to move an office is silly. Why does it have to go that far? Aren't the Deans able to control their own areas?

**Review Committee/Review Process:** Findings were reviewed with Steve Spradling, Director of Physical Plant and Construction, Bill Cook, Maintenance Supervisor, Val Mayle, Custodial Supervisor, and Mike Mastri, Grounds Supervisor.

**Improvements:** Based on a comment from the last Assessment, cement repairs were completed on the B & E sidewalk to prevent flooding. Ramps were installed from the Faculty/Staff parking lot, in front of the J/K Buildings and between the front of the M Building and B/C Buildings.

The Grounds Department demolished the old retaining wall at the E Building and erected a new one.

All new custodial employees go through extensive training when hired. Any time a new piece of equipment or new procedure is implemented, additional training is given to every employee. For example:

1. A new microfiber mop system was implemented and all employees were trained on the use.
2. New ride-on equipment was purchased and training was done by the company representative.

The implementation of the Office Move Form was done as a team effort by Physical Plant, Security and the IT Departments. A master list of office occupants is kept and updated by the Physical Plant office. Security and IT also need to be kept up to date. Prior to the Office Move Form, employees would change offices without any approvals or notice to any of these departments. We are asked for an updated list by the VP of Business and Finance at various intervals throughout the year. It was nearly impossible to keep the list accurate prior to the Office Move Form. The new form is requested, approved up to the President and a copy sent to Physical Plant, Security and IT.

**Outcome Measure 4:** Work Order Requests (service rating email upon completion)

Terms of Assessment:            Fall   X              Spring   X              Annual       

**Findings:** Once a work order is completed and closed, a service rating request is sent to a random selection of requestors. Out of the requests sent in the last three years, 234 employees responded. 228 of the requests were rated “very satisfied/satisfied”, 5 responded “low quality”, and 1 employee did not properly answer the questions.

**Review Committee/ Process:** Service ratings are reviewed by the Office Coordinator. If any suggestions or complaints are made, they are reviewed with Steve Spradling, Director of Physical Plant and Construction, and Bill Cook, Maintenance Supervisor.

**Improvements:** With changes that SchoolDude (our maintenance tracking system) implemented, some of the surveys sent out were not received by employees, therefore were not able to be counted. Since that time, Survey Gizmo has been set up to send surveys randomly. Lu Phillips tracks the results and sends them to the Physical Plant department on a monthly basis.

**Outcome Measure 5: National Association Standards**

Terms of Assessment:        Fall\_\_\_\_        Spring   X          Annual \_\_\_\_\_

**Findings:** APPA Maintenance Staffing Guidelines in 2013 revealed that the Physical Plant Maintenance staff is 5.56 FTE’s below national standards for Level 2, Comprehensive Stewardship. APPA Standards for Custodial Staffing revealed that the Physical Plant Custodial staff is 18.94 FTE’s below national standards for Level 2, Ordinary Tidiness.

There has not been a systematic review since this assessment was completed.

**Review Committee/ Process:** The final study was reviewed by Steve Spradling, Director of Physical Plant and Construction, Bill Cook, Maintenance Supervisor, and Valerie Mayle, Custodial Supervisor.

**Improvements:** N/A - Current information on record reveals that we are still below the 2013 guidelines.

**Goal 2:** To meet applicable code requirements

**Outcome Measure 1: Fire, Elevator, Boiler, Backflow Preventers Inspection Compliance**

Terms of Assessment:        Fall\_\_\_\_        Spring \_\_\_\_\_        Annual   X  

**Findings:** Processes are in place to meet NFPA and State standards as listed:

**FIRE:**

- Fire extinguishers are checked semi-annually by Pitts Fire Extinguisher, Inc.
- Fire alarms, pull stations, smoke detectors, fire pump and main panels are tested semi-annually by Simplex-Grinnell; fire pump is also checked monthly by a maintenance technician.
- Fire suppression systems (sprinklers) are inspected annually by S.A. Comunale

**ELEVATORS:**

- Elevators are tested semi-annually by the State of Ohio Division of Industrial Compliance and monthly checks are performed by a maintenance technician.

**BOILERS:**

- Boilers are inspected annually by the State of Ohio Division of Industrial Compliance.

**Review Committee/Process:** Any deficiencies found by the fire system, elevator and boiler inspections/tests are reviewed by Steve Spradling, Bill Cook, and Kevin Proffitt. Corrections are made as required to meet the various NFPA and State of Ohio codes.

**Improvements:** All NFPA, State and OSHA standards are met and maintained. Maintaining records continues to be a priority and an ongoing process in conjunction with Kevin Proffitt.

**Outcome Measure 2: OSHA Training Compliance (Monthly)**

Terms of Assessment:        Fall\_\_\_\_        Spring \_\_\_\_\_        Monthly   X  

**Findings:** OSHA Safety tests are distributed to all Physical Plant employees (maintenance, custodial, grounds, mail room) during a monthly safety meeting.

**Review Committee/Process:** Steve Spradling, Director of Physical Plant, reviews the answers to the quiz for the dayshift employees. The test is then scanned and filed in employee folders for tracking purposes. Val Mayle reviews the quiz answers for the midnight shift. Their quizzes are given to the Office Coordinator for scanning to employee folders.

**Improvements:** Employees continue to score highly on the tests with very few incorrect answers.

**Goal 3: To ensure handicapped accessibility throughout the College**

Outcome Measure 1: Checklist (doors, auto doors, restrooms, signage, parking, ramps, elevators; annual each Spring

Terms of Assessment:        Fall\_\_\_\_        Spring   X          Annual \_\_\_\_\_

**Findings:** The Maintenance Supervisor checks all of the handicap entrance doors annually to ensure they are working correctly. If there are any problems during this inspection, a service call is placed.

**Review Committee/Process:** Bill Cook, Maintenance Supervisor, completes the checklist and makes any service calls if needed.

**Improvements:** The checklist itself is an improvement. We implemented the use of the checklist after the last assessment period. It enables us to ensure doors are working properly.

**Outcome Measure 2: Student Feedback**

Terms of Assessment:        Fall\_\_\_\_        Spring   X          Monthly \_\_\_\_\_

**Findings:** A Physical Accessibility Focus Group was held on April 13, 2015. A 9-question survey was distributed to the Group. Some of the concerns were repeated from the last survey:

- Elevator in H Building is difficult for scooters to navigate
- Students did not know evacuation plans
- Building S into Building G – no automatic doors
- Restrooms in B Building too small

New concerns:

- Non-handicap persons parking in handicap spaces
- Handicap spaces being used to park/drop off in wheelchair loading areas
- Several areas not accessible during the winter

- Getting to ATC Building difficult; would benefit from a shuttle service

Positive comments:

- M Building, Engineering rooms and K bridge very accessible
- Restrooms pretty accessible
- Handicap parking improved
- Enough automatic doors

**Review Committee/Process:** The Focus Group consisted of 7 students and was moderated by Nathaniel Elgass. The questionnaire was distributed for completion and both positive and negative comments were discussed during the meeting.

**Improvements:** The Physical Plant Department continues efforts to expand, improve and address accessibility standards throughout the facility.

The Gateway Building was constructed while adhering to all accessibility requirements.

Disability Support Services Department moved from the third floor of the S Building to the first floor of the B Building, making it more accessible for students. Rooms were remodeled to accommodate students with disabilities, i.e., wider doorways, handicap door button, etc.)

### **Outcome Measure 3: Faculty/Staff Feedback**

Terms of Assessment:          Fall   X            Spring                     Monthly       

**Findings:** Overall response to the survey was positive, with 93.4% of the staff satisfied with the accessibility of the campus. Staff accessibility concerns most mentioned include:

- Doors from S Building into G Building need to be automatic
- Disability Support Services being on the 3<sup>rd</sup> floor
- No transportation for physically challenged persons from Main Campus to classes at ATC
- Employee parking lot does not have accessible ramp to the K Building sidewalk

Positive comments include:

- All areas are accessible with all of the entrances and exits
- Directional signage helpful
- All parking lots are greatly improved
- Parking/elevators/everything connected to 2<sup>nd</sup> floor is very nice
- Walk-through by J Building – will make it easier in the winter

**Review Committee/Process:** The final survey summary was reviewed by Steve Spradling, Director of Physical Plant and Construction, Bill Cook, Maintenance Supervisor, and Richard Rosenberger, Construction Coordinator.

**Improvements:** The Disability Support Services department has been relocated to the B Building. B104 and B105 were renovated to make it handicap accessible and it is in closer proximity to the new Gateway Center for easier student maneuvering.

Cement repairs were completed in various areas, including:

- Leveling area at the Mega Street handrail
- Leveling front sidewalk in front of the K Building
- Leveling 3 areas between B & C Buildings
- Leveling NE side at C Building

**Criterion 4.0 Program/Department members are qualified by professional background, experience, and continuing professional development and meet the needs of the Program/Department.**

Yes	No	DNA		
X			4.1	Employee (full-time and part-time) credentials meet the program, college, state, and national accreditation requirements.
X			4.2	Annual Employee Performance Evaluations are on record in Human Resources.
X			4.3	Employees (full-time and part-time) are involved in professional organizations, presentations, and/or other scholarly works.
X			4.4	Employees are involved in the development of program/department initiatives that support the College Mission.

Additional Comments: (Please explain any “No” selections.)

Reflective Narrative Questions:

1. Describe how Performance Evaluations are being used to enhance the Program/Department.

Performance evaluations are used as an evaluative process as well as a communication tool. The employee performance evaluation process, including goal setting, performance measurement, regular performance feedback, self-evaluation, employee recognition, and documentation of employee progress, ensures success for the College, as well as the department. The employee performance evaluation helps employees accomplish both personal development and organizational goals.



2. Describe how professional development benefits the program.

Professional development ensures our employees are kept up to date on modern practices and trends.

3. Describe how employees are involved in the development of program/department initiatives that support the College Mission.

The Physical Plant staff is very engaged in the department’s initiatives to support the college mission to support our students by maintaining our facilities to a very high standard while receiving some of the highest satisfaction scores in the college-wide survey. They are always putting the student first by providing a very clean, comfortable, accessible learning environment and being proactive to any of the student needs.

We are always looking at ways to save energy costs, improve indoor air quality, provide a very clean, safe, learning environment for our students, visitors, staff and faculty.

**Criterion 5.0 Program/Department is responsive to changes in current technology and adequate resources.**

Yes	No	DNA		
X			5.1	Program/Department changes are consistent with technological and scientific advances, and Program/Department content incorporates new developments in the field.
X			5.2	Employees work with supervisors to ensure adequate and current resources available for the Program/Department.
X			5.3	Employees work with information technology staff to ensure availability of appropriate software and hardware components.

Additional Comments: (Please explain any “No” selections.)

Reflective Narrative Questions:

1. Explain the changing conditions within the field.

Some of the conditions that affect the Physical Plant Department include:

- Doing more with less (employees, money, time)
- Automation
- Lack of quality employees within the field
- Energy money-saving initiatives

2. How are these changing conditions addressed within the Program/Department?

- We have to plan and schedule more efficiently with the staff we have. Time-saving equipment is also purchased as finances allow and we are always looking for new products to save us time performing our tasks.
- We have constant training on Automation. The staff has attended in-services for Variable Frequency Drives, lighting, HVAC controls, etc.
- Our Facilities staff is up to date with the latest technologies to find ways to reduce our energy costs.

3. Explain how employees work with information technology staff to ensure availability of appropriate software and hardware components.

Our Facilities staff works with IT staff on upgrading our HVAC control systems with the newest software. IT also works with Facilities on other software upgrades from automated door lock systems to new CAD drawing software.

## Component IV

### Recommendations and Executive Summary

Based on the results of this current CAR, list your strengths, areas of improvement, opportunities, threats, and recommendations.

Program/Department: Physical Plant

Strengths:

- Campus Growth
- Well-maintained facilities and grounds
- Dedicated staff
- High quality Customer Service

Areas of improvement:

- Replaced outdated HVAC Equipment; have 100% of our buildings on our Building Automation System
- Continued resurfacing/crack-filling parking lots
- Leveled cement sidewalks/installed ramps for easier access
- Relocated Disability Support Services to B104

Opportunities:

- Energy cost-savings
- Restructuring our preventative maintenance program/schedule to better service our main equipment more efficiently

Threats:

- Long-time employees will be retiring in the next couple years
- Lack of qualified recruitment pool

**Priority Recommendations:** *(For each area listed below, please number all recommendations as they will be prioritized on the [Summary Work Plan - Appendix A](#). Sufficient support for the recommendations must be included, either by reference to responses in the components or specific Criterion or by additional information included with this program review.)*

**Additional Information.** On occasion, some programs may have additional documents that they feel should be included to complete the self-study. Supporting documents may include such things as program self-study reports, case study reports, survey statistics, focus group data, etc. All supporting documentation must be dated within this CAR period. Please list below the additional documents that you will be adding to this CAR in support of your recommendations.