

## UNIT / DIVISION / DEPARTMENT INFORMATION

Unit Name	Instructional Services	Department Name	Community Outreach
Division Name	Student Services	School Year	2018-2019

## IDENTIFY GOALS AND ACTION STEPS

Select two areas in need of improvement from your list of concerns. Use the space below to identify the goal for each concern.

### GOAL ONE

The Community Outreach Department will achieve a 90% positive rating for overall customer satisfaction as evidenced by the Central Services Survey School Staff Ratings of the department by June 2019.

<b>Action Steps</b>	Compile and analyze survey data on a monthly basis
<b>Personnel Responsible</b>	Administrator - review survey results
<b>Monitoring Plan (Evidence/Data the action step has occurred)</b>	Monitor survey responses and review with support staff Provide training and support as needed Review monthly with supervisor
<b>Timeline</b>	Goal will be completed by June 2019

### GOAL TWO

The Community Outreach Department will achieve a 95% positive rating for customer satisfaction specific to schools, as evidenced by the Central Services Survey School Staff Ratings of the department by June 2019.

<b>Action Steps</b>	Compile and analyze survey data on a monthly basis
<b>Personnel Responsible</b>	Administrator - review survey results
<b>Monitoring Plan (Evidence/Data the action step has occurred)</b>	Monitor survey responses and review with support staff Provide training and support as needed Review monthly with supervisor
<b>Timeline</b>	Goal will be completed by June 2019