



**ANTELOPE VALLEY COLLEGE
ACCREDITATION (CHAIR) MEETING
November 5, 2012
11:30 p.m. – L201**

To conform to the open meeting act, the public may attend open sessions

- 1. CALL TO ORDER AND ROLL CALL**
- 2. OPENING COMMENTS FROM THE CO-CHAIRS**
- 3. OPEN COMMENTS FROM THE PUBLIC**
- 4. APPROVAL OF MINUTES**
 - a. October 8, 2012 (attachment)**
- 5. DISCUSSION ITEM**
 - a. New Group Index for Midterm Report – Ms. Tina McDermott**
 - b. Narrative draft submission dates – Ms. Tina McDermott**
- 6. REPORTS**
 - a. Standard IA/B: Institutional Mission and Effectiveness – Dr. Tom O’Neil, Dr. Ron Chapman, and Mr. Aeron Zentner**
 - b. Standard IIA/C: Academics/Library – Dr. Karen Cowell, Ms. Melanie Parker, and Ms. Maria Valenzuela**
 - c. Standard IIB: Student Services – Ms. LaDonna Trimble, Dr. Nancy Bednar, and Ms. Kim Fite**
 - d. Standard IIIA/B: Human and Physical Resources – Mr. Terry Cleveland, Dr. Joseph Esdin, and Gwenette Preston**
 - e. Standard IIIC/D: Technology and Financial Resources – Ms. Ann Steinberg, Dr. Susan Lowry, and Mr. Scott Tuss**
 - f. Standard IVA/B: Leadership and Governance – Dr. Les Uhazy, Mr. Mike Pesses, and Pamela Ford**
- 7. ACTION ITEM**

None
- 8. OTHER – OPEN FORUM**
- 9. ADJOURNMENT**

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**ACCREDITATION STEERING COMMITTEE
CHAIR MINUTES**

**November 5, 2012
11:00 a.m. – 12:30 p.m.
Room A 140**

ATTENDANCE: Tina McDermott - Faculty Co-Chair, Sharon Lowry – Administrative Co-Chair; **Standard IA & IB:** Dr. Tom O’Neil, Dr. Ron Chapman, and Aeron Zentner; **Standard IIA & IIC:** Melanie Parker; **Standard IIB:** LaDonna Trimble, and Kim Fite; **Standard IIIA & IIIB:** No Chairs present; **Standard IIIC & IIID:** Ann Steinberg; **Standard IVA & IVB:** Dr. Les Uhazy, Mike Pesses, and Pamela Ford; **Committee members:** Katherine Mergliano

Minutes: Gloria M. Kastner

1. CALL TO ORDER:

The November 5, 2012 Accreditation Steering Committee Chair Meeting was called to order at 11:35 a.m. by the Faculty Accreditation Co-Chair, Ms. Tina McDermott.

2. Opening Comments from the Co-Chairs

T. McDermott & S. Lowry

- Ms. McDermott welcomed Tri-Chairs to another meeting and extended her gratitude for attending the scheduled meeting.
- Ms. Lowry reported a small group of campus Faculty leaders were requested to attend a meeting on October 26, 2012 to discuss and review the ACCJC rubrics for Program Review, Planning, and Student Learning Outcomes to establish a full understanding of what elements of the Sustainability rubric requirements the District is meeting and what elements need to be finalized to ensure compliance by the established June 30, 2012 deadline. The invited participants were the SLO Faculty Co-Chair (Dr. Fredy Aviles), the Academic Senate President (Ms. Maria Clinton), the Director of Business Services (Ms. Diana Keelen), the Faculty Accreditation Coordinator (Ms. Tina McDermott), the Program Review Coordinator (Ms. Carol Eastin), the Research Technician (Mr. Aeron Zentner), and the Vice President of Academic Affairs (Ms. Sharon Lowry). The group identified some missing links needing to be addressed and will be working on addressing these missing elements and address communication efforts to ensure the District is meeting the sustainability level of the established ACCJC Program Review, Planning, and Student Learning Outcomes to meet the criteria established in the Sustainable Continuous Quality Improvement requirements. Ms. McDermott stated one of the key elements is creating a campus culture where these processes are an integral part of the daily activities in regards to Program Review, Planning, and Student Learning Outcomes. Ms. Lowry stated an area that needs more fine tuning is the Program Learning Outcomes process. It was discovered there were discrepancies on how PLOs are being established. There are areas where a discipline has an Associate’s Degree and a Certificate which is a subset of the associate’s degree. PLOs were established for the certificate portion of the degree but when establishing the PLO the connection to the general education component was omitted. The SLO Committee will be addressing this issue in the next couple of weeks.

3. Opening Comments from the Public

All

- None

4. Approval of Previous Minutes

All

a. October 8, 2012

A motion was made and seconded to approve the October 8, 2012 meeting minutes. Motion carried.

5. Discussion Items

All

a. New Group Index for Midterm Report

Ms. McDermott reported she has established a new group in MyAVC titled, “Accreditation 2013 Mid-Term Report.” Accreditation Steering Committee members need to request to join the group to access posted documents and information. This will be the primary location to upload Standard drafts and evidence documents. Ms. McDermott inquired whether the group should be designated open to the public or private. Members indicated it would be best to leave the group as private and only provide the campus community to finalized drafts of the written report.

b. Narrative draft submission dates

Ms. McDermott indicated at a previous Accreditation Tri-Chair meeting it was established that all completed written drafts need to be submitted no later than late January. After some consideration, Ms. McDermott indicated she would like all written drafts to be submitted to her no later than January 15, 2013 to facilitate ample time prior to the beginning of the spring semester to edit and fine tune reports into a uniform voice. She indicated written drafts can be submitted earlier if completed and this would be greatly appreciated although January 15, 2013 is the absolute latest she should be receiving drafted standard reports.

6. Reports

a. Standard IA/B: Institutional Mission and Effectiveness – Dr. Tom O’Neil, Dr. Ron Chapman, and Aeron Zentner

Dr. Tom O’Neil reported a meeting was established among standard committee members where the work needing to be completed was distributed among members. Two new members have been added to the standard group: Dr. Sherrri Zhu, Social and Behavioral Sciences Faculty; and a student member: Paige Morgan.

b. Standard IIA/C: Academics and Library – Dr. Karen Cowell, Ms. Melanie Parker, and Ms. Maria Valenzuela

Ms. Melanie Parker reported the last standard committee meeting had to be canceled. Currently, standard committee members are working with the Academic Policies and Procedures Committee Faculty Leader to discuss the assessment of the curriculum process. Currently, 91% of the campus engaging in the Program Review process have accessed WEAVE and completed the task necessary for reporting purposes. There are currently five or six areas that have not completed or performed the necessary Program Review process in WEAVE. Dr. Irit Gat and Ms. Wendy Rider will be reviewing the WEAVE database to determine which programs have requested funding and will be working on addressing how this can be integrated into the planning process. Dr. Karen Cowell will be working on the program survey needed for II.C and II.C.IB.

Ms. Sharon Lowry reported one issue in regards to requiring the completion of Program Review reports in efforts to request funding or staffing is that there are some areas that are not included in the Program Review process. Ms. Lowry indicated this needs to be taken into consideration when making a final determination on how to integrate the Program Review and Student Learning Outcomes process into the Planning process.

c. Standard IIB: Student Services – Ms. LaDonna Trimble, Dr. Nanacy Bednar, and Ms. Kim Fite

Ms. LaDonna Trimble reported standard committee members do not have a section to work on for the Mid-Term report therefore decided to coordinate a meeting with the Student Services faculty and staff to provide an overview of the Accreditation Commission’s requirements for the standard and ensure all documentation (evidence) is being obtained. One area being addressed is if accessibility services can be acquired online. Ms. Trimble stated this issue is being researched.

Ms. McDermott inquired if standard committee members are tying in the Student Success Task Force Recommendations into the current services being provided. Ms. Trimble indicated the recommendations are absolutely being reviewed for incorporation on campus where necessary.

d. Standard IIIA/B: Human and Physical Resources – Mr. Terry Cleveland, Dr. Joseph Esdin, and Ms. Gwenette Preston

No Tri-Chair members were present to provide a report update.

e. Standard IIC/D: Technology and Financial Resources – Ms. Ann Steinberg, Dr. Susan Lowry, and Mr. Scott Tuss

Ms. Ann Steinberg reported the standard committee met and Ms. Diana Keelen provided a PowerPoint presentation on GASBI and addressed the requirements needed to meet the Accreditation Commission’s GASBI funding requirements. The committee has not starting the writing process although is on target to begin writing and addressing the recommendations. At the next committee meeting members will be distributed among members for completion.

f. Standard IVA/B: Leadership and Governance – Dr. Les Uhazy, Mr. Mike Pesses, and Ms. Pamela Ford

Dr. Les Uhazy reported the standard committee members met and spent a great deal of time trying to solicit members from the Faculty Union. Ms. Maria Clinton has agreed to officially join the standard committee. The committee is still in need of a Confidential Management representative to serve on the committee. During the meeting there was a heated discussion regarding the definition of consensus and when it would be appropriately incorporated. Committee members discussed the incorporation the Brown Act to ensure all committee members

can adequately prepare for upcoming meetings. The committee determined there needs to be an annual discussion or review of committee role, responsibilities, and purpose so that when committee membership changes the committee does not have to spend a significant amount of time training or explaining the role, responsibilities, and purpose of the committee. The College Coordinating Council was charged with establishing committee composition sheets and formalizing a process to establish campus committees. It is apparent that a similar action needs to be taken in ensuring all committees adhere to providing minutes, posting pertinent documents or information, and provide definitions of terms. These important elements need to be addressed to standardize committee documentation and reporting process. There has been an issue with designated note takers and ensuring a concise interpretation of discussion is established to create a road map of work discussed, completed, and work needing to be completed.

Action items: Continue working on acquiring documentation to complete drafted reports.	Person responsible: All	Deadline: Jan. 15, 2013
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7. Action Items

None

Action items: None	Person responsible: None	Deadline:
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8. Other: Open Forum

- Ms. Pamela Ford stated there is a need to resolve the appointment of Classified Tri-Chairs for Standard IA/B and IIIA/B. The Classified Union was charged to appoint Classified Tri-Chairs. Ms. Ford indicated the Classified Chair for Standard IIIA/B is no longer serving as the Classified Chair. Ms. McDermott indicated she was informed the classified member in fact wanted to continue serving in the capacity of Chair for this standard by the Administrative and Faculty Chairs. There seems to be some misunderstanding on how this process and appointment is established. Ms. McDermott requested to discuss the issue of the appointment of classified chairs with Ms. Ford at a later date.
- The next Accreditation Chair meeting date is established for Monday, December 3, 2012 at 11:00 a.m. in A140. Ms. McDermott indicated she would perform a doodle poll to ensure this date and time would be best to facilitate a final meeting prior to the winter break.

9. Adjournment

The Accreditation Chair meeting was adjourned at 12:42 p.m. The next Tri-Chair meeting will be coordinated for December 3, 2012.

STANDARD COMMITTEE – I

IA – Mission IB – Institutional Effectiveness
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IMPROVEMENT PLANS: None

RECOMMENDATION FOLLOW UPS: None

STANDARD COMMITTEE – II A & C

IIA – Academics IIC – Library

IMPROVEMENT PLANS:

II.A.1.b: Each year develop and administer a questionnaire that will collect perceptions of students to determine their degree of satisfaction regarding the various methods of delivery and how effectively these methods of delivery meet students academic and support services needs. Incorporate questions regarding both on campus and online delivery systems, with possible modification from the instrument used at Palmdale in 2007-2008. Results collected from the questionnaire will be used to improve the delivery of existing programs and services, and add new methods when funding is available.

Progress:

Has someone checked with Agnes at the Learning Center

II.A.1.c:

- Increase Student Learning Outcomes assessment and reporting to at least 50% of courses offered by the end of the 2010-2011 academic year. Goal is to have reached 100% prior to the midterm accreditation report due 2013.

Progress:

THIS IMPROVEMENT PLAN HAS BEEN FULFILLED. COPY AND PASTE FROM FOLLOW UP REPORT? BUT THEN HOW IS THIS DIFFERENT FROM FOLLOW UP TO THAT FURTHER DOWN IN THIS REPORT? NEED TO DISCUSS TO AVOID REDUNDANCY.

- As spring 2012, assessment of student learning outcomes and documentation of action plans was at about 94%. I believe projections show that we should be at 100% by 2013.
- Develop Program learning Outcomes and assessment measures for all degree and certificate programs by spring 2011.

- As of spring 2012, about 61% of programs have approved program learning outcomes and measures. Assessment of program learning outcomes and documentation of action plans was also at about 47% e have much further to go before we get to 100% but we anticipate there will be a big “push” for this soon.
- Complete one cycle of assessment, for the Health Sciences and Technical Educational divisions, that currently have established Program Learning Outcomes, by spring 2011. This will provide a documentation of a full assessment cycle in WEAVE Online that will provide models for other campus programs to follow.
WHERE WAS THIS COPIED FROM? IT IS WRITTEN IN FUTURE TENSE THOUGH IT IS IN THE PAST ??
- Health Sciences has 78% and TEC has 55% of programs undergoing full cycles of assessment. ?? IS THIS A CURRENT ACCURATE FIGURE?
- Achieve full implementation of the WEAVE mapping functions by the end of fall 2011 that will allow all established programs to document the integration of course content, sequencing, and alignment with the stated outcomes of the programs and the college mission. HAS THIS OCCURRED? EVIDENCE?
- This information seems more relevant to Rec. # 1d: We have chosen to forego the curriculum mapping module within WEAVEonline due to the steep learning curve involved. We, at the time, did not have enough resources to train faculty members to use WEAVEonline’s curriculum mapping module and decided to build a curriculum mapping template locally. The current curriculum map captures courses eligible for the program, courses required for the program, and which courses PLOs are introduced, developed and/or mastered. What is the difference between WEAVE’s curriculum mapping module and “the current curriculum map” that is capturing courses?

II.A.2.a: Implement CurricUNET campus wide during the 2010-2011 academic year. Conduct training sessions to ensure that faculty play a central role in establishing and improving instructional courses and programs. Every two years administer an assessment process to determine how well these courses and programs are well documented and follow established procedures for the design, identification of learning outcomes, approval, administration, delivery, and evaluation.

Progress:

Need to have AP&P and SLO do formal assessment

–Has anyone spoken to AP&P, Melissa J?

II.A.2i:

- Complete General Education Program Learning Outcomes and related assessments by spring 2011, which will serve as a guide for administrators, faculty, and staff to begin assessing outcomes and to use the collected data and analysis for future planning and program improvement.

Progress:

Has someone checked with Lee G. and SLO Committee?

- Complete the establishment of Program Learning Outcomes for existing degree and certificate programs by 2011. This will further facilitate planning and quality improvement by allowing the assessment of Student Learning Outcomes in concentrated areas of study, supporting continuous quality improvement in all certificate and program areas.

PLOs have been slow going because they are overly cumbersome (in my opinion!) – need to discuss different method that might move this along

Also – need to identify which programs have approved but not entered in WEAVE. Need to contact each one and get them to do this – provide one on one training if needed.

We only have 62% of programs reporting approved outcomes in WEAVEonline. Need to specify which programs are completed and provided evidence in the form of WEAVE reports.

II.A.3b:

Within two years, develop and implement an Information Competency requirement through faculty dialogue and collaboration with the Academic Policies and Procedures Committee. After a year of implementation, conduct an assessment to its effect on how well students are competent in using various technology to improve learning.

Progress:

Library and AP&P? Has anyone talked to Carolyn B or other Library staff?

II.A.5: Each year the Institutional Research and Planning staff will lead the way in helping employees examine and improve current methods for systematically tracking student transfer rates, student performance on licensure examinations, and how employed graduates utilize their college experience. Results will demonstrate how well students are being appropriately prepared to meet current professional and industrial standards. The Department of Institutional Research and Planning, in conjunction with faculty, can thereby identify areas for program improvement.

Progress:

The Department of Institutional Effectiveness, Research and Planning worked closely with the Program Review Coordinator and Committee to establish common data elements for program review authors to respond to. With the help of the National Student Clearinghouse, transfer figures can be reported for the district, academic divisions as well as discipline. Student performance on licensure exams has proven to be a difficult metric to capture as exam attempts typically occur after a student leaves the institution.

Need minutes, WEAVE print out or online elements list, etc.

Have any areas for program improvement yet been identified?

II.C.1.: In conjunction with the Institutional Research and Planning staff, the Instructional Multimedia Center staff will seek out ways to identify and implement additional promotional strategies to educate the campus community of Instructional Multimedia Center services. By the end of 2012, evidence will be collected to assess how effective these promotional strategies have in increasing awareness of services provide by the Instructional Multimedia Center.

Progress:

Has anyone talked to Joseph West? Shirlene? Dr. Forte-Parnell?

II.C.1a: Every other year, librarians will review the Cataloging and Reclassification Project to determine if the entire media collection should be completed and placed

online for easy access. If completed, it should be further determined whether or not a change in the numbering system is necessary for effectiveness.

Progress:

Has Carolyn Burrell already done this?

II.C.1b: Every year staff assigned to the Instructional Multimedia Center will develop an assessment process that will measure the effectiveness of services to students. Data will be used as a method to improve services.

Progress:

The Department of Institutional Effectiveness, Research and Planning has just developed the first survey for the IMC and will be administered to the campus community during the Fall 2012 semester. In progress, when will this be calculated and finalized?

II.C.2: Beginning spring 2011, the name of the Writing Center Advisory Committee will change to a Learning Center Advisory Committee. The advisory committee members will consist of representation from all academic divisions as well as Student Services areas. Expanding the membership allows input and dialogue for a more coordinated mechanism for communication of the entire community.

Progress:

Has anyone checked with Learning Center – Diana Flores-Kagan, Agnes, Dr. Forte-Parnell? Get agendas, minutes, announcements, etc.)

Recommendations Follow Ups:

Rec #1d: Assess program learning outcomes (PLOs) and provide evidence of program, student service and administrative changes and improvements as a result of changes made (II.A.1.a.; II.A.1.c).

Progress:

See PLO figures above.

Need to reinsert them here, preferably in a chart, Aaron V or Z can provide for this and the above section. Need to follow up on the question of “changes and improvements” – need to find out what, if any programs made changes or improvements based on their

PLOs. If no changes since the date of the Follow Up report, we can say that, but need to make sure. This is also being researched by Aaron V and Z right now for a report that Sharon is filing with the ACCJC in October. So we all need this information.

Rec #2a: To meet the standards, it is recommended that the college establish clear connection with and document the involvement of members of professions, association and professional organizations when curriculum is being modified and at other appropriate points in time to demonstrate input from vocational/occupational advisory boards and experts in the field so that the College can verify the quality of educational programs is based on experts in the profession (II.A.2.b).

Progress:

Need to talk to Karen Cowell, she can provide this information

Rec. #2b: To ensure each department is being consistently evaluated under the program review process it is recommended that the college develop a list of minimum areas considered to ensure a rigorous self examination is conducted consistently across the college (II.C.1).

Progress:

This is being done currently by Program Review. Carol Eastin and DIERP has all the info. Need minutes, narratives, evidence of training on the new rollout, etc.

STANDARD COMMITTEE – II B

II B – Student Services

IMPROVEMENT PLANS: None

RECOMMENDATION FOLLOW UPS: None

STANDARD COMMITTEE – III A & B

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III A – Human Resources III B – Physical Resources

IMPROVEMENT PLANS:

III.A.1b: Confidential /Management/ Supervisory group and the vice president of human resources and employee relations, will establish a formal procedure and possibly revise the current evaluation form for Confidential/ Management/ Supervisory employees. This formal procedure will be incorporated into the district's Administrative Procedure.

Progress:

We have communicated with HR and got the history and the details regarding how they developed the plan. We are in the process of sorting the documents we have. We got side tracked a bit with the tri-chair issue that was finally resolved.

RECOMMENDATION FOLLOW UPS: None

STANDARD COMMITTEE – III C & D

III C – Technology III D – Financial Resources

IMPROVEMENT PLANS: None

RECOMMENDATION FOLLOW UPS:

Rec. #2d: To meet the standards and to enhance the effectiveness of its technology, it is recommended that the college adjust its technology advisory committee structure to ensure that the needs of administrative and instructional computing are equally well addressed, and that this dialogue then results in equitable priorities, implementation, and budget allocations for all technology needs (III.C.1 and III.C.1.d).

Progress:

Rec. #3: To enhance the effectiveness of its technology, a variety of different levels of network security should be implemented to permit more flexible responses to instructional computing requests, while maintaining appropriate security for administrative data (III.C.1 and III.C.1.d).

Progress:

Rec. #4: To comply with the standards it is recommended that the college, when making its short-range financial plan, e.g. the annual budget of the college, consider its long-range financial obligation to pay the cost of the GASB 45 – Other Post-Employment Benefits (OPEB) as the costs are incurred instead of delaying payment to some future date. Specifically, the college is encouraged to prepare a comprehensive plan to prevent disruption of services offered to students by paying the Annual Required Contribution (ARC) determined using generally accepted accounting principles into an irrevocable trust fund at the amount equal to the actuarially determined Annual required Contribution (III.D.1.c).

Progress:

STANDARD COMMITTEE – IV A & B

IV A - Leadership IV B - Governance
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IMPROVEMENT PLANS:

IV.A: During the 2010-2011 academic year, develop and complete a campus survey for college constituencies in identifying additional strategies that will encourage, empower, and stimulate innovation in meeting the college mission. College Coordinating Council will review the results, select and implement the strategies that can most benefit student learning.

Progress:

IV.A.3: At the beginning of each academic year, reaffirm the definition and application of consensus to use in making recommendations (decision making) by governance councils, campus wide participatory governance committees, and taskforces.

Progress:

IV.A.4: Complete the submission of the substantive change report to establish the Palmdale Center as a location that is geographically apart from the Lancaster campus. The Center offers at least 50% of an educational program and supports the addition of courses that constitute 50 percent or more of a program offered through a mode of distance or electronic delivery.

Progress:

(Tina's notes: Per Sharon Lowry – this is done)

IV.A.5: Each year reinforce AP 2510 for consistency of posting and distribution of meeting agendas and minutes for governance councils, campus wide participatory governance committees, and taskforces.

Progress:

(Tina's notes: improved – need evidence)

RECOMMENDATION FOLLOW UPS: None