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MEMO TO: Dr. Jackie Fisher, Sr.
Superintendent-President
Antelope Valley College
3041 West Avenue K
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FROM: Barbara A. Beno, Executive Director

DATE: December 16, 2004

SUBJECT: Enclosed Report of the Evaluation Team

Previously, the chairperson of the evaluation team sent you a draft report, affording you the opportunity to correct errors of fact. We assume you have responded to the team chair. The Commission now has a final version of the report.

The Accrediting Commission for Community and Junior Colleges follows a policy of providing a copy of the final evaluation visit report to the chief executive officer of the visited institution prior to consideration by the Commission. Please examine the enclosed report.

- If you believe that the report contains inaccuracies, you are invited to call them to the attention of the Commission. To do so, a letter stating recommended corrections should be directed to the Executive Director and signed by the chief executive officer of the institution. The letter should arrive at the Commission office one week prior to the Commission meeting in order to be included in Commission materials.
- ACCJC policy provides that, if desired, the chief administrator may request an appearance before the Commission to discuss the evaluation report. The Commission requires that the institution notify the Commission office by January 7, 2005 of its intent to attend the meeting. This enables the Commission to invite the team chair to attend. The next meeting of the Accrediting Commission will be held on January 13-14, 2005 at the San Francisco Airport Westin Hotel.

Please note that the Commission will not consider the institution as being indifferent if its chief administrator does not choose to appear before the Commission. If the institution does request to be heard at the Commission meeting, the chairperson of the evaluation team will also be asked to be present to explain the reasons for statements in the team report. Both parties will be allowed brief testimony before the Commission deliberates in private.

The enclosed report should be considered confidential and not given general distribution until it has been acted upon by the Accrediting Commission and you have been notified by letter of the action taken.

BAB/tl
Enclosure

cc: Ms. Patricia Sandoval, Accreditation Liaison Officer (w/o enclosure)

DEC 16 2004

EVALUATION REPORT
ANTELOPE VALLEY COLLEGE

**A Confidential Report Prepared for
The Accrediting Commission for Community and Junior Colleges
Western Association of Schools and Colleges**

**This report represents the findings of the evaluation team that visited
Antelope Valley College from October 19 - 21, 2004.**

Dr. Rose Marie Joyce, Chair

**Antelope Valley College
List of Team Members**

Dr. Rose Marie Joyce (**CHAIR**)
Superintendent-President
Rio Hondo College

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Executive Vice President of Academic Services
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Mr. Randal Lawson
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Dean of Student Learning Support
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Mr. Brian Thieboux
Professor, English, Business & Articulation Officer
Palo Verde College

Dr. Jocelyn Towler
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West Los Angeles College

Mr. Michael Unebasami
Associate Vice President for Administrative & Comm. College Ops
University of Hawaii Comm. Colleges

Summary of the Report

INSTITUTION: Antelope Valley College

DATE OF VISIT: October 19 – 21, 2004

TEAM CHAIR: Dr. Rose Marie Joyce
President, Rio Hondo College

A ten-member accreditation team visited the Antelope Valley College in mid-October for the purpose of evaluating the institution's request to reaffirm accreditation. Antelope Valley College is a single college district located 70 miles northeast of Los Angeles. The district covers about 2,000 square miles of semi-arid terrain in Northern Los Angeles County and a small section of Southern Kern County. The campus sits on 135 acres of land in Lancaster. The entire Antelope Valley community has experienced extraordinary growth. As a result, the college enrollment has been increasing.

Antelope Valley College was well prepared for the visit and the staff greeted the accrediting team in a warm and friendly manner. The team was provided with open access to all documents needed to gather evidence related to the accreditation standards and additional forms of evidence needed to evaluate assertions made in the self study report. College faculty, staff, administrators, and students were very generous with their time and assistance.

Over the course of the three days at Antelope Valley College, the team had the opportunity to observe classes at AVC, Fox Field and Palmdale. In addition to formal interviews, the team spoke informally to staff and students. The team was impressed with comments from students on their high regard for the excellent teaching occurring in classes. The team was also impressed with the level of commitment to students expressed by staff. In all of the discussions, the team felt that individuals were candid and open. In addition, the team wishes to especially thank both the IT and support staff for their hospitality and generous help.

For the most part, the self study report addressed the accreditation standards. However, the document was contradictory; some sections did not address the questions asked and the plan section failed to supply sufficient specificity to outline the college's next step for effective action. Two sections were significantly incomplete, Standard III, section A, Human Resources and Standard IV, section B Leadership and Governance. These limitations of the self study report made it difficult for the team to assess whether the college was meeting the standards.

During the interviews, college members expressed concerns about the lack of college wide participation in the preparation of the self study document. They described apathy on the part of most staff members and an unwillingness to assume responsibilities for institutional participation in such activities as hiring committees. While the team recognizes the leadership challenges, the unusually high administrative turnover and the union unrest that existed in 2003 and up to September 2004, the team is obligated to use the self study report

as a primary source document for the evaluation visit. The team found that there was much that should have been included in the self study report which would have presented a more positive and accurate picture of the institution.

Commendations:

To acknowledge the good work that has been done, the team wishes to commend the college and staff for the:

- support services provided the college by the Information Technology division,
- quality of the comprehensive Facilities Master Plan,
- financial stability of the college,
- commitment of the faculty and staff in the Learning Centers and the IMC to improve student retention and success,
- creation of the “Information and Welcome Center” in the Student Services Building that better serves students,
- work being done in the STAR program,
- increase in outreach efforts to the local high schools, and
- renewed commitment to a Palmdale site.

Recommendations:

After carefully reading the self study, examining evidence, interviewing college personnel and students, and discussing the findings in light of the Accrediting Commission for Community and Junior Colleges of the Western Association of Schools and Colleges 2002 Standards, the team offers the following recommendations to Antelope Valley College. The recommendations are based on specific standards cited in parentheses following each component of the recommendation.

Recommendation #1

The college must develop a complete blueprint for planning that includes a review of the mission statement, and the research, planning, and evaluation processes and ensure clear communication of these processes to faculty, staff, and the community.

(Standard I.A.3, I.B, I.B.3, I.B.4, I.B.6)

Recommendation # 2

The college must improve communication by engaging in dialogue that is inclusive, informed and intentional about institutional quality and improvement. The dialogue should purposefully guide institutional change. This dialogue must include formal pathways for effective communication links so that information and recommendations are disseminated to all constituent groups.

(Standard I.A.4, I.A.4, I.B.1, I.B.2, I.B.3, I.B.4, I.B.5, I.B.6, I.B.7)

Recommendation # 3

The college must develop and implement student learning outcomes for all of its courses, programs, services, and for the institution as a whole while linking the outcomes to planning and the budgeting process. Equally important, the college must develop mechanisms for measuring those outcomes and commit to using the findings to improve student learning for its diverse students. (Standards I.B, I.B.2, I.B.3, II.A.1c, IIA.2a, IIA.2b, IIA.2d, IIA.2e, IIA.2f, II.B.3, II.B.3c, II.B.4, and II.C.2)

Recommendation #4

The college must provide and sustain an environment in which all persons in the college community can interact on a basis of accepting differences, respecting each individual and valuing diversity. It is imperative to identify and implement the processes that actively promote diversity in the everyday environment and the academic programs of the college. (Standards II.A.1, II.A.1a, II.B.3d, III.A.4, III.A.4a, III.A.4b)

Recommendation #5

The college must provide the following organizational structures that are congruent with institutional effectiveness: (1) a fully functional human resource division, (2) adequate research capacity to gather and analyze the college's data as the basis for dialogue and informed decision making. (Standards I.B.3, II.A.1a, II.A.1c, IIA.2b, IIA.2e, II.A.2f, II.B.3, II.B.3c, II.B.3c, II.B.4, II.C.2, III.A.1b, III.A.3, III.A.4, III.A.4a, III.A.4b, IV.A. Preamble, IV.A.5, IV.B.1, IV.B.1b)

In summary, the accreditation team appreciates the hospitality and extra efforts by so many staff members to facilitate our work and to make our visit such a pleasant one. The major commendations are for financial stability, student support services, information technology, and the facilities plan. Recommendations are in the areas of student learning outcomes, organizational structures, diversity, and communication in the form of purposeful dialogue.

INTRODUCTION
ANTELOPE VALLEY COLLEGE VISIT
October 19 – 21

Antelope Valley College is a single college district located 70 miles northeast of Los Angeles. The district covers about 2,000 square miles of semi-arid terrain in Northern Los Angeles County and a small section of Southern Kern County. The college serves the communities of Acton, Antelope Acres, Lake Hughes, Lake Los Angeles, Lancaster, Leona Valley, Llano, Palmdale, Pearblossom, Quartz Hill, Rosamond and Sun Valley.

The campus sits on 125 acres of land in Lancaster. The college is planning a second campus for the Palmdale area to better meet the needs of residents of the southern portion of the Antelope Valley. Associate degree and certificate programs are offered in more than 40 subject areas. A locally elected five-member Board of Trustees governs the college. Students annually elect a student trustee to serve on the board. Antelope Valley College held its first classes in September 1929 at the campus of Antelope Valley High School; this year they are celebrating their 75th anniversary.

An accreditation team visited Antelope Valley College November 17-19, 1998. This visit was followed by a focused Midterm Report submitted by the college on October 8, 2001. The focused report responded to the six recommendations from the 1998 site visit. The Commission accepted the midterm report but required the college to submit a progress report by November 2002 addressing concerns with institutional effectiveness measures, especially student learning outcome information. The Commission, in a report responding to the November midterm report, stated that the college had not fully addressed the issues surrounding student learning outcomes and institutional effectiveness measures. As a result, the college was required to submit an Amended Progress Report by April 1, 2003 and address that one concern. The Commission accepted the amended progress report submitted by the college.

Since the last accreditation visit, the college has experienced frequent and numerous changes in leadership at the highest levels. A new president was appointed last spring that has resulted in guarded optimism about what new leadership will accomplish over the next years. During these tight fiscal times, the college has maintained fiscal integrity and continues to support its mission.

The college is currently going for a bond measure on November 2004 to support the college's building program.

REPORT ON COMPLETION OF PRIOR RECOMMENDATIONS

1. Planning Processes

Accreditation visit of November 1998

“The Antelope Valley Community College District has completed a planning process document with strong buy-in and participation by college constituents. Nevertheless, considerable work remains to be accomplished in the area of strategic planning. The site visit team recommends to the Antelope Valley Community College District that its planning process be implemented and a plan produced and acted upon without undue delay.”

Commission findings of January 1999:

The institution is asked to report on the implementation of its planning efforts.

Current status:

While institutional planning has been initiated, planning is not linked to research, evaluation, and resource allocation. The next step the college must take is cited under recommendation #1.

2. Institutional Effectiveness Measures (in particular student learning outcomes)

Accreditation visit of November 1998:

“Effectiveness and efficiency across the college is compromised by the lack of information available and used in decision-making. It is imperative that the comprehensive and systematic information retrieval, management, and utility in the college’s day-to-day operations, as well as in long-range planning, be a priority.”

Commission findings of January 1999:

“The institution is asked to report evidence of the development of institutional effectiveness measures, in particular student learning outcome information.”

Focused Midterm Report of October 2001:

“The institution is asked to report evidence of the development of institutional effectiveness measures, in particular student learning outcome information.”

Progress Report Commission findings of January 2003:

“The institution is asked to report evidence of the development of institutional effectiveness measures, in particular student learning outcome information.”

Current status:

The college has not fully addressed the issues surrounding student learning outcomes and institutional effectiveness measures. See recommendation #2.

3. Management Information System

Accreditation visit of November 1998:

“The college should develop its management information system to provide information that will be used to better inform decision-making processes. Further, the college needs to begin the development and use of a comprehensive student outcomes/assessment information system. Such information should be used for program review, program development and improvement, institutional planning, and communication to the college’s publics.”

Current status:

The team commends the college for meeting this recommendation.

4. Financial Aid and Admissions and Records services

Accreditation visit of November 1998:

“The college should identify ways to more effectively deliver financial aid and admissions and record services and take action to insure that new related technology is carefully planned and must include adequate technical support staff throughout the planning and implementation process.”

Current status:

In the visit of October 2004, the team found the college to be in compliance with improving financial aid and admissions and records systems.

5. Goals and Plans for Advancing Diversity

Accreditation visit of November 1998:

“The college should do a comparison study of the ethnic and gender composition of its staff and faculty and compare findings to student and community demographics and establish goals and plans for advancing diversity among all faculty and staff.”

Current status:

The college has not addressed these issues as reflected in Recommendation #3 on diversity.

6. Shared Governance Practices

Accreditation visit of November 1998:

“The site visit team recommends that Antelope Valley Community College District define its shared governance practices within board policy and continue efforts for their full implementation without delay.”

Current status:

The college has addressed this recommendation. Findings in Standard IV validate that the college now has a Board Policy that defines shared governance, BP 2051.

7. Academic Freedom

Commission Findings, January 1999:

“The institution is asked to report on the development and implementation of a clear policy on academic freedom, and to resolve conflicts between policy and practice as reported in the institutional self study and in the team report.”

Current status:

The college has addressed this recommendation. Antelope Valley College has an Academic Freedom Policy in place

ELIGIBILITY REQUIREMENTS

1. AUTHORITY

Antelope Valley College currently operates under public law of the state of California and is accredited by the Accrediting Commission of Community and Junior Colleges of the Western Association of Schools and Colleges.

2. MISSION

The team confirmed that the college has a mission statement that is reviewed regularly and approved by the Board of Trustees. The statement contains the information specified in the accreditation Eligibility Requirements.

3. GOVERNING BOARD

Antelope Valley College Board of Trustees is a five-member elected body. The team confirmed that the Board makes policy for the district and exercises oversight of its operations. Board members are precluded from participating in any action involving a possible conflict of interest or from realizing a financial gain from their position as a Board member.

4. CHIEF EXECUTIVE OFFICER

As of March 2004 Antelope Valley College has a new college president, appointed by the Board of Trustees, whose primary responsibility is guiding the college. During the visit, the team found that the president was also serving as the interim Vice President of Student Services.

5. ADMINISTRATIVE CAPACITY

The team determined that the college has sufficient administrative staff, all adequately prepared and experienced, to operate the college.

6. OPERATING STATUS

The team certifies with no reservation that Antelope Valley College is fully operational with students actively pursuing degree and certificate programs.

7. DEGREES

According to admissions information, a majority of students enter Antelope Valley College with the intent of pursuing a degree or certificate program, or preparing for transfer to a four-year institution. Substantial portions of the college's educational offerings are programs that lead to degrees, certificates, or transfer and a significant proportion of its students are enrolled in them.

8. EDUCATIONAL PROGRAMS

The team certifies that Antelope Valley College offers a range of degree and certificate programs that are consistent with the college mission and are provided in a manner conventional to community colleges and consistent with the Eligibility Requirements.

9. ACADEMIC CREDIT

Antelope Valley College awards academic credit based on generally accepted practices conventional for community colleges and in accordance with the Education Code of the state of California.

10. EDUCATIONAL OBJECTIVES

The team examined course outlines and syllabi as well as the college catalog. The evidence indicates that the college does define measurable course objectives.

11. GENERAL EDUCATION

The team certifies that Antelope Valley College has a clear general education component in its degree programs and that writing and computational skills are reflected in these requirements.

12. ACADEMIC FREEDOM (new)

The team examined the issue of academic freedom and found that Antelope Valley College maintains an atmosphere in which intellectual freedom and independence exist.

13. FACULTY

Antelope Valley College has a faculty that is qualified, experienced and sufficient in size to support the college's educational programs. Faculty responsibility is clearly defined in job descriptions and in the faculty contract.

14. STUDENT SERVICES

The team reviewed the student services provided at Antelope Valley College and found them to be consistent with the needs of the student body and the college mission statement.

15. ADMISSIONS

The team found admission policies in the Catalog and other publicly available documents. These policies are consistent with the Education Code of the state of California.

16. INFORMATION AND LEARNING RESOURCES

The team certifies that Antelope Valley College provides sufficient information and learning resources and services to support its mission and educational programs.

17. FINANCIAL RESOURCES

Antelope Valley College has the financial resources and funding base to adequately support student learning programs and services, improve institutional effectiveness, and ensure financial stability.

18. FINANCIAL ACCOUNTABILITY

The team examined the latest external audit and found no material findings. An outside-certified public accounting firm in accordance with the standards contained in Government Auditing Standards conducted the audit.

19. INSTITUTIONAL PLANNING AND EVALUATION

Antelope Valley College understands the need for planning for improvement. It is in the process of achieving that goal. The college makes public through the Strategic Planning and Budget Committee Annual Report the degree to which it is reaching its goals.

20. PUBLIC INFORMATION

Antelope Valley College has a catalog and web site in which all of the requisite information is contained.

21. RELATIONS WITH THE ACCREDITING COMMISSION

The self study contained a statement, signed by the President of the Board of Trustees and the President of the College, which assures that the institution adheres to the Eligibility Requirements, Standards and Policies of the Accrediting Commission.

EVALUATION OF ANTELOPE VALLEY COLLEGE USING ACCJC 2002 STANDARDS

This report is a response to a request for reaffirmation of accreditation for Antelope Valley College. Following are the general observations, findings and evidence, conclusions and recommendations from the visiting team.

In keeping with the theme based approach, the visiting team presents recommendations holistically, weaving standards and the issues into five themes in need of improvement: (1) develop a complete blueprint for planning, (2) identify and assess student learning outcomes, (3) improve communication, (4) promote diversity, and (5) create the organization to support institutional effectiveness.

STANDARD I INSTITUTIONAL MISSION AND EFFECTIVENESS

General Comments for Standard I:

The college has an approved mission statement that is consistent with the mission of a comprehensive California community college. It is communicated to the campus and the community through campus publications and is included in planning documents. It defines the broad educational purposes of the college and its commitment to student learning, but is unclear about its intended student population. (Standard I.A.1)

Relating to institutional effectiveness, the sheer volume of documents that have been produced to establish program review, planning, and budgeting processes demonstrates the college's sincere effort to comply with the accreditation standards. However, there is still a gap between research, planning, budget decisions, and evaluation that is not likely to be filled by the strategies identified in the self-study alone. While the college can be proud of its many faculty and staff who have demonstrated their commitment to the process, there is a need for improved clarity and alignment of research, planning, and evaluation processes. (Standard I.B., I.B.3)

While the college is aware of the emphasis on student learning outcomes in the new standards and has a process in place, as of 2000, for the inclusion of measurable student learning outcomes in the course outlines of record, the college has not consistently determined what the measures of effectiveness will be nor has it linked the outcomes to planning, budgeting, implementation, and reevaluation. While the college recognizes that this link is critical to continuous program improvement, it is unclear as to how to proceed to make it happen. (Standard I.B., I.B.3)

There is a need for data driven dialogue related to institutional effectiveness in the various college committees: College Coordinating Council (CCC), Strategic Planning and Budget Committee (SPBC), and Academic Policies and Procedures Committee (AP&P). The flow of work and decision making processes within the college was unclear to the team and to the college community; there are no clear lines of communication between and among those committees. (Standard I.B.1)

Standard I.A Mission

Findings and Evidence:

The team confirmed that the mission statement was approved by the Board and is generally understood by the campus as a whole. There is evidence that the mission is communicated to internal and external constituencies. The mission statement is included in planning and budgeting documents (Educational Master Plan, Facilities Master Plan, Information Technology Plan, Institutional Strategic Plan, and unit Operational Plans), but interviews verified that the connection of the mission statement to planning and the budget is not universally understood. (Standard I.A.4) The campus is currently reviewing the mission statement as part of a three-year cycle. It is not clear that there will be broad-based campus dialogue about the mission statement that was initiated by the Academic Senate nor if it will go through the planning cycle. (Standard I.A.3) The self study states that the interests of the community are incorporated into the mission statements through periodic external scans; however, the team found that the last scan was completed in 1998. It was professionally led, but there is no evidence that any changes were made as a result of the community discussion. (Standard I.)

The team also found that there was some initial confusion among the writers of the self study because there are so many "mission statements" on the campus. Individual units developed their own mission statements as they were preparing their unit plans. The units clearly did not understand that the "mission statements" needed to be aligned with the campus mission statement. (Standard I.A.4)

Standard I. B Improving Institutional Effectiveness

Findings and Evidence:

There is evidence that the departments and the college as a whole set goals consistent with the colleges mission. In some, the goals have measurable terms attached to them. What the self study does not make clear is the college's planning process. The self study report states that neither the reasons behind nor the mechanics of the planning process are well understood by the campus as a whole. (Standard I.B.1, I.B.2)

The Annual Strategic Planning and Budget Committee (SPBC) publication makes clear what the goals are for each of the subcommittees of the SPBC. It is not clear to the team how these goals were determined, with whom and where the dialogue took place that arrived at these goals, and to what extent the goals of SPBC interface with the unit goals mentioned above. The team found little evidence that the planning process is broad-based, offers opportunity for input by appropriate constituencies, allocates necessary resources, and leads to improvement of institutional effectiveness. (Standard I.B.2, I.B.4)

There is a clear message that the college has not been providing the research assistance and data to make informed decisions. At the same time, there is a fact book published annually

that has a great deal of data that would support decision making; but, in fact, the book has not been analyzed and used as a tool for decision making. The team frequently heard of the need for research support to lead the campus in the development of outcome measures and analysis of data. The team concurs with faculty and staff comments that training in the interpretation of research data is needed. (Standard I.B.1, I.B.3)

As of 2000, the college has begun to identify student learning outcomes and outcome measures and has addressed them at the course level. For that the college is to be commended. However, the college has not yet begun working at the program, service, degree or institutional levels. Continued education of the faculty and staff needs to occur in both structured and informal dialogues especially related to how outcomes differ at the various levels, how these outcomes are used for improvement, and especially how they impact student learning. (Standard I.B., I.B.1, I.B.3)

The college recognizes the need for the class syllabi to reflect the student learning outcomes listed in the core outlines of record. There is no formal process to ensure that this happens. The team found compliance to be spotty. (Standard I.B)

The college has conducted program reviews at various times, but not in a consistent manner. There is no clear evidence that the findings of the review were used to make changes that resulted in improved student learning. The exceptions are the learning resources and student services programs, which have evidence that they are linking program review to continuous improvement. (Standard I.B, I.B.2, I.B.3, I.B.4)

The college has held dialogues with the President, open forums, and several retreats. Still, the self study asserts and the team found that regular, meaningful participation that is inclusive of all segments of the college community in college-wide reflective dialogue is not occurring at this time. (Standard I.B. 1)

The self study cited and interviews confirmed that poor communication is a serious issue (Standard IA.2, IB, IB.5). Specifically, the staff feel that there is not enough two-way communication between the SPBC members and their constituencies and recommend enhancing the college web site and ensuring that minutes of meetings are regularly and promptly posted to the site as one way to address the problem. (Standard I.B.1)

Conclusions of Standard I:

The college meets Standard I A. However, the college should ensure that appropriate documents, whether internally or externally disseminated, contain the college's approved mission statement.

The team suggests that the college increase communication among its stakeholders to ensure that they are aware of their mission and its central role in institutional planning and decision making. The mission statement should be the overarching 'bar' to which all decisions made by the college need to be held. (Standard I.A.4)

The college has clearly put many hours into addressing institutional effectiveness. Still the college has not met standard IB. The college needs to develop and implement student learning outcomes for all of its courses, programs, degrees, services and the institution as a whole. In addition, the college needs to develop mechanisms to measure those outcomes, use the findings to improve student learning, and then link the outcomes to the planning and budget process. (Standard I.B, I.B.2, I.B.3)

Despite the documentation related to planning and the budget processes, the links between planning and resource allocation are still informal. The college has not yet created the culture of evidence where information is widely disseminated and used in planning and evaluation. Dialogue is critical to this transformation. (Standard I.B.1) The team could find no evidence (with the exception of the learning resource and student services programs) that data collected from assessing student learning outcomes at the course, program, and institutional levels is linked to planning and resource allocation. Providing those links is critical to continuous program improvement, enhanced student learning and improved college effectiveness as called for in the standard. (Standard I.B, I.B.2, I.B.3, I.B.4)

Recommendations for Standard I:

1. *The college must develop a complete blueprint for planning that includes a review of the mission statement, and the research, planning, and evaluation processes and ensure clear communication of these processes to faculty, staff, and the community. (Standard I.A.3, I.B, I.B.3, I.B.4, I.B.6)*
2. *The college must improve communication by engaging in dialogue that is inclusive, informed and intentional about institutional quality and improvement. The dialogue should purposefully drive institutional change. This dialogue must include formal pathways for effective communication links so that information and recommendations are disseminated to all constituent groups. (Standard I.A.4, I.A.4, I.B.1, I.B.2, I.B.3, I.B.4, I.B.5, I.B.6, I.B.7)*

Also, see recommendations from Standard II and Standard III

STANDARD II STUDENT LEARNING PROGRAMS AND SERVICES

General Comments for Standard II:

The college offers quality instructional programs that are consistent with the institution's stated missions of transfer education, vocational and technical education, workforce preparation and economic development, developmental education, personal enrichment, and professional development. Courses are offered at the main campus, at two satellite sites (Palmdale and Fox Field), and through instructional television, videoconferencing, and online distance education technologies. To support these instructional programs, the college provides a variety of student services that demonstrate a concern for student access, progress, learning, and success. These include admissions and records, assessment, orientation, counseling and advisement, financial aid, EOPS, disabled student services, career counseling and job placement, health services, outreach, and student development. The college reorganized since the last team visit to create an Instructional Resources Division within Student Services. The Learning Centers (Academic Skills, General Tutoring, Math Lab, Supplemental Instruction Program, Writing Center, and ESL), the Instructional Media Center (IMC), and the Library are consistent with the requirements of the College's educational program and meet the needs of different learning styles.

Standard IIA Instructional Programs

Findings and Evidence:

The college offers transfer, degree, certificate, developmental, noncredit, and continuing education programs that are consistent with its stated mission and are intended to meet the needs of a student population characterized by diversity of educational preparation, demographics, and socioeconomic status. Although the college has made attempts at processes and assessment activities to determine whether its instructional programs truly meet the needs of students, the self study reveals, and team observations confirm, that the lack of a viable institutional research function severely constricts its ability to assess effectiveness in this area. The 2004 Fact Book includes significant data regarding success levels of students of varying ethnicity and economic and academic backgrounds. The team found little evidence that the college made use of this data to assess whether its instructional programs meet the needs of particular categories of students and to make appropriate changes. Further, the team notes that there does not appear to be significant dialogue of a meaningful nature about other important areas of diversity, such as sexual orientation, gender, age, religion, national origin, and socioeconomic background. (Standard II.A.1, II.A.1a)

Classroom observations at all college sites revealed a dedicated faculty, creating an environment supportive of student learning in keeping with the college's mission, and a diverse, enthusiastic, and receptive student population. Team members noted that the college provides modest, but appropriate, support structures for students at its satellite sites.

Team members, through interviews, validated concerns expressed in the self study about the level of support provided to students and faculty for the small online course offering with various college personnel. (Standard II.A.1b, IIA.2c)

In response to a recommendation from the previous accrediting team, the college has made progress in documenting measurable objectives for recently developed courses and is in the process of implementing a plan to update the objectives for courses developed prior to 2000. Moreover, interviews with leaders of the Academic Policies and Procedures Committee revealed that the Committee has also initiated a rigorous process requiring that methods of presentation and evaluation for courses have a direct relationship to these measurable objectives, thereby ensuring the effectiveness of traditional classroom assessment through grading. At the class level, the college has begun to ensure that measurable objectives are being incorporated into course syllabi. These activities provide a foundation for the development, documentation, and assessment of student learning outcomes at the course level. However, much remains to be done to accomplish this standard's requirement for completing these activities at the course, program, degree, and institutional levels so that the results can be used to improve student learning and institutional effectiveness. The team observed that dialogue about student learning outcomes is occurring in various areas of the college, but the dialogue has not yet become institutionalized. (Standard II.A.1c, IIA.2a, IIA.2b, II A.2d, IIA.2e, II.A.2f, II.A.6)

Despite sporadic efforts to establish a viable institutional research function over the last several years, inconsistencies in staffing this function have prevented the creation of a data-driven culture to inform the dialogue. (Standard II.A.1c, IIA.2b, II.A.2f)

The team validated that the course approval process through the Academic Policies and Procedures Committee is well established, respected, and rigorous in ensuring the quality of the college's course offering and that delivery modes-such as lecture, laboratory, field trips, collaborative groups, demonstrations, seminars, technology-enhanced activities, and use of audio-visual media-are appropriately used for specific courses. (Standard IIA.2, IIA.2a, IIA.2b, and IIA.2d) Examination of program review documents submitted by various disciplines reveals thoughtful responses and some meaningful planning occurring at the department level. The college conducts program review for instructional, student services, and learning resources programs, but the team shares the concern expressed in the self study that the information resulting from the review process is not effectively used in college planning at the Strategic Planning and Budget Committee level. (Standard II.A.2e, II.A.2f)

The college's awarding of unit credit is consistent with accepted practices for higher education institutions, and all degree programs require a general education component consistent with the philosophy stated in the college catalog. This philosophy includes the usual areas of knowledge-natural sciences, social and behavioral sciences, humanities, and language and rationality. The college has a diversity studies requirement and is contemplating the adoption of an information competency requirement. (Standard II.A.2h, II.A.2i, II.A.3, II.A.3a, II.A.3b, and II.A.3c) In addition to using measurable course objectives, occupational certificate programs incorporate SCANS competencies,

recommendations from advisory committees representing business and industry, and, where appropriate, exit exams that have been validated by external agencies. (Standard II.A.5)

In addition to listing course requirements for each instructional program, the college catalog provides excellent supplementary information—a definition of each program, a program description, distinctive features, and career options. Information is also available to students through Counseling FACT Sheets and on the college web site. The self study reveals an institutional concern about the lack of a consistent process for updating information on the web site, but the team validated that the college has addressed this situation. (Standard II.A.6, II.A.6a, and II.A.6c)

Standard IIB Student Support Services

Findings and Evidence:

The college offers its full range of student support services to an increasingly ethnically diverse population of students, entering the college with varying degrees of academic preparedness and coming from widely divergent socioeconomic backgrounds. Although data are available for dialogue and program development to address this diversity, there is no evidence that informed dialogue is taking place. (Standard II.B.1, II.B.3, II.B.3a)

Through observations and interviews with college staff and students, team members found a number of areas worthy of commendation:

- Information and Welcome Center - Most student services are housed in the Student Services Building, and the college has used the first floor of this building to provide for a "one stop shop" concept so that students can have easy access to all support areas. This first floor of the building contains the Information and Welcome Center in a large open area at the entrance to the building. This center provides an information desk, staffed by trained "Student Ambassadors," who direct students to the appropriate support area and provide tours for visitors to the campus.
- S.T.A.R. (Student Transition and Retention) Program - Funded through a federal Student Support Services TRIO grant, this program provides academic and personal support to academically underprepared students from low socioeconomic backgrounds. Housed on the second floor of the Student Services Building and serving 160 students, the program has been successful in providing counseling and tutoring services to these students.
- Outreach Office- Increased outreach and communication with local high schools has resulted in a significant increase in the numbers of students from these high schools attending the college over the last three years. Relationships with high school counselors have also greatly improved.

The college's response to Standard IIB often contradicted itself. The following were areas of particular concern to team members:

- Information of the college web site - Statements in the self study questioned the accuracy of the information on the web site (supposedly not reviewed in six years), the accuracy of the FACT sheets for various majors, and whether the materials in other publications, such as the catalog, class schedule, and student handbook, matched each other. Interviews with the three Student Services deans revealed that they were well aware of the concerns cited in the self study, found them to have merit, and had been working with Information Technology staff during the spring to ensure that the student services web site was updated with correct information. As part of this process, the deans conducted many interviews with students and with classified staff so that any problems brought to their attention could be corrected. The team is satisfied that the problems cited in the self study in this area have been rectified. (Standard II.B.3c)
- Identifying student learning needs - Meeting this standard requires meaningful staff dialogue, rooted in analysis of data, to assist in identifying what kinds of programs and services would best meet student learning needs. Through interviews with staff members, it is clear that this approach was used in at least two areas-the applications for the Student Support Services TRIO grant and the Title V grant. Both of these documents identify areas of student learning needs and propose programs to address these needs. This approach should be more consciously used by other areas of student support services, not only in program review, but also in program development and expansion. (Standard II.B.3, II.B.3a)
- Discussion of diversity - It is clear from the self study that the college provides several different activities for student development in the area of diversity, but there was no indication in the self study of a culture of diversity. Also, it is unclear to what degree the topic of diversity infuses the curriculum, despite the diversity studies degree requirement. Interviews with college staff revealed that the discussion of diversity has focused mainly on the area of ethnic diversity. The team urges that the college expand this dialogue on diversity to provide and sustain an environment in which all persons in the college community can interact on a basis of accepting differences, respecting each individual and valuing diversity. (Standard IIB.3d., and Policy Statement on Diversity, *Accreditation Reference Handbook*, p. 70)

The self study contains a long discussion about problems with student dissatisfaction with the counseling function, as reported in internal satisfaction surveys and in the Noel Levitz survey. Much analysis is given about possible reasons for this dissatisfaction, and there are references to work disruptions and contract disputes with the counseling staff. Interviews with staff and a review of reorganization documents make it clear that the entire student services areas has undergone many changes over the past three years, but that, for the last year, there has been some stability in the area. The team encourages ongoing discussions to heal differences and forge a path for the dialogue on student learning outcomes that must occur. (Standards II.B.3c, II.B.4)

Standard II.C Library and Learning Support Services

Findings and Evaluation:

The college has reorganized since the last team visit to create an Instructional Resources Division within Student Services. The main components: Library, Learning Center, Instructional Multimedia Center and Basic Skills programs have embraced technology for learning support. These units all provide opportunities for students, faculty, and staff to utilize technology along with print materials in a variety of ways to meet needs of different learning styles. The Learning Centers (Academic Skills, General Tutoring, Math Lab, Supplemental Instruction Program, Writing Center, and ESL), the Instructional Media Center (IMC), and the Library are active places with a lot of energy and interaction as well as quiet individual and group study places. They are active places characterized by great energy and interaction, while simultaneously providing opportunities for quiet, individual and group study. (Standard II.C.1, II.C.1.a)

The librarians and staff are poised to move forward with information competency and assessment of student learning, an area in which they have been working for some time. The librarians have integrated professional knowledge of the role information resources play in support of instruction and curriculum activities. They provide an assessment of resources available for the support of any new curriculum offerings. The Library provides a rich selection of online electronic resources, online and classroom-based tutorials, and streaming video orientations. There is a plan to expand the online collection of information resources to include electronic copies of books. Remote access to the catalog and to most of the electronic resources is available for students, faculty, and staff. Such remote access serves the research needs of students taking both traditional coursework and distance learning courses. (Standard IIC.1, IIC.1.b)

The Learning Centers and the Instructional Media Center (IMC) have also put considerable effort into presenting and redesigning their services to reflect a consideration for learning outcomes. Notably, the Math, ESL, and Tutorial services have been involved with identifying learning objectives and pre-test and post-test tools for the purpose of collecting data on learning outcomes. Resource materials, handouts, and brochures are available online for all students. The Learning Centers, the Library and the IMC have been proactive in their use of the Web as a delivery system to provide access to information and improve communication with a wide variety of students. (Standard II.C.1a, II.C.2)

The IMC has begun an admirable project to provide remote access to the contents of its 4500 pieces of multimedia and other inventory by creating a "branch" database as a subset of the Horizon catalog that currently serves the Library. When completed, information about the holdings of the IMC (and its equipment) will be available over the Internet to students, faculty, and staff from any location. (Standard II.C.1a, II.C.1c)

The Library, the IMC, the Learning Center's faculty, learning specialists, tutorial specialists, and the computer technician work in an environment that fosters teamwork and constant updating of levels of services. Another notable achievement in the Learning Center and

Library is the coordination with Disabled Student Services and Information Technology Services to provide an onsite staff member and a specialized workstation for students with visual disabilities. There is a JAWS-equipped workstation in the Library and another in the Learning Center. (Standard II.C.1a)

Conclusions of Standard II:

The college meets most of the requirements of the Standard II instructional component, with the notable exception of the development, documentation, and assessment of student learning outcomes and the establishment of a culture of diversity.

The development and documentation of measurable course objectives since the year 2000, in response to a recommendation from the previous accrediting team, marks a first step toward meeting the requirement of this standard for the development, documentation, and assessment of student learning outcomes at the course, program, degree and institutional levels and for using the results to improve student learning and to drive institutional planning and resource allocation. In order to be in compliance with this standard prior to the next accreditation visit, the College must move immediately to build on its initial efforts to address this issue for its instructional programs and student support services. The recently improved institutional environment under the new administration provides an opportunity to move beyond past communication difficulties to establish the college-wide dialogue that must accompany the required planning and implementation activities. However, it is absolutely essential that this process be data-driven. The college must develop a viable institutional research function that goes beyond mere data retrieval on an ad hoc basis to encompass design of ongoing student learning outcome and achievement measures, assessment of the college's performance relative to these measures, reports to clearly communicate the results, and training in the appropriate use of this information. (Standard II.A.1c, IIA.2a, IIA.2b, II A.2d, IIA.2e, II.A.2f, II.B.3, II.B.3c, II.B.4, II.C.2)

The college has implemented program review for instructional and student services programs; however, the program review is not being conducted on an ongoing, systematic basis. There is also no evidence that program review is used to improve programs nor that it is linked to planning and the resource allocation processes. Program review reports must be prepared on a regular cycle and the report findings and recommendations must be disseminated campus-wide. Report recommendations must be actively incorporated into campus planning and decision making to enhance student learning. (Standard II.A.2e, II.A.2f, IV.B.1, IV.B.1b)

Team members were impressed with the rigorous course approval process conducted through the Academic Policies and Procedures Committee and with that group's significant contribution to the College's progress in responding to a recommendation of the previous accrediting team through the establishment of a course approval requirement of measurable course objectives. (Standard IIA.2, IIA.2a, IIA.2b, IIA.6) The college's catalog is well organized and provides excellent information for students about the college's degree, certificate, and transfer programs, and commendable efforts have been made to offer this information through the college's web site. (Standard II.A.6, II.A.6a, II.A.6c, II.B.2)

The college offers courses that make use of varied instructional modes and delivery systems, including online courses. Although the online course offering is small, it has reached the critical point at which the college must move to institutionalize this effort. (Standard II.A.1b)

The college must make use of available student success data to ensure that its instructional programs, student services, and learning resources are meeting the needs of a student population that is becoming increasingly diverse in terms of ethnicity, socioeconomic background, and level of academic preparation. The team urges that the college expand the dialogue on diversity to provide and sustain an environment in which all persons in the college community can interact on a basis of accepting differences, respecting each individual and valuing diversity. (Standard IIB.3d, and Policy Statement on Diversity, *Accreditation Reference Handbook*, p. 70) The accompanying dialogue must meaningfully address diversity in all of its manifestations, including, but not limited to, gender, sexual orientation, age, national origin, religion and socioeconomic background. (Standard II.A.1, II.A.1a, II.B.3d)

The student services area has gone through many organizational changes, some of them quite stressful and disorienting for staff, over the last five years. All in all, they have managed to continue to work as a team and keep up team morale. As a group, they have kept the interests of students and student success at the center of their endeavor, and they are committed to moving forward with broader and deeper discussions of how student support services can assist in the development, documentation, and assessment of student learning outcomes. (Standard II.B.3c, II.B.4) Student services faculty and staff have successfully implemented the student administration functions of a new MIS system; they have successfully validated a basic skills assessment instrument; and they have begun the implementation of course prerequisites. (Standard II.B.3e)

The Library and other learning support services for students meet and exceed sufficiency in supporting the college's instructional programs. They are to be commended for their effective utilization of technology and staff resources to meet both the service delivery objectives of the various units and the learning objectives of their various programs. (Standard II.C.2)

Recommendations for Standard II:

3. *The college must develop and implement student learning outcomes for all of its courses, programs, services, and for the institution as a whole while linking the outcomes to planning and the budgeting process. Equally important, the college must develop mechanisms for measuring those outcomes and commit to using the findings to improve student learning for its diverse students.*
(Standards I.B, I.B.2, I.B.3, II.A.1c, IIA.2a, IIA.2b, II A.2d, IIA.2e, II.A.2f, II.B.3, II.B.3c, II.B.4, and II.C.2)
4. *The college must provide and sustain an environment in which all persons in the college community can interact on a basis of accepting differences, respecting each individual*

and valuing diversity. It is imperative to identify and implement the processes that actively promote diversity in the everyday environment and the academic programs of the college.

(Standards II.A.1, II.A.1a, II.B.3d, III.A.4, III.A.4a, III.A.4b)

See recommendations to Standards I, II and III.

STANDARD III RESOURCES

General Comments for Standard III:

The college is not in compliance with several components of the Human Resources area. The self study itself was incomplete and failed to address some of the components in the standard; therefore, it was difficult to assess this area. Validation was made more difficult by the absence of the Interim Vice President for Human Resources and one of the two human resources technicians.

The team investigation revealed that most of the data was verifiable given the reports provided; however, no analysis of the data was provided making it difficult to judge that the college met Standard III A.

The college has a comprehensive Facilities Master Plan that identifies projects needed to meet the overall goals of the Master Plan. The college proactively seeks funding opportunities to assure implementation of its five year Construction Plan by applying for state scheduled maintenance funds, Bond measures, and actively participating in the planning processes facilitated by the Strategic Planning and Budget Council (SPBC). Through a recent survey, the college was able to appropriately assess the concerns the college community has over its facilities. As a result, the college was able to identify areas that needed to be addressed such as in the areas of maintenance, staffing and lighting, which are subsequently identified in the accreditation plans of the college.

The Technology Committee provides a good example of the shared decision making process in action.

The Technology Committee uses the shared decision making process to receive input from all constituency groups. This group establishes plans to maintain, and upgrade or replace technology to accommodate the demands of technology in instruction and daily operations of the college. Major efforts have been made to improve campus operations by implementing the Banner System, Human Resources System, and an on-line purchasing system.

The college is found to be in compliance with the standards related to Financial Resources. The self-study report provides a good background of the budgeting and planning process; and the institution's financial data was verified during the visit.

Standard III.A Human Resources

Findings and Evidence:

The need for Human Resource planning was identified in the self study and was validated in interviews. Policies and procedures governing human resources were formulated in 1994 and have not been updated. (Standard III.A.3) The need to update all policies and procedures was identified throughout the self study and was evidenced by the team. The college must begin immediately to review policies and procedures related to human resources especially in the

area of diversity and equal employment opportunity. The organization of the human resources office must be reviewed and staffing levels addressed to meet workload requirements. (Standard III.A.4, III.A.4a, III.A.4b)

Evidence that “assumes the integrity and quality of its programs and services by employing personnel who are qualified by appropriate education, training, and experience to provide and support these programs and services” could not be found. Position specifications and job descriptions are not consistently required. (Standard III.A.1) Performance evaluations have not been consistently applied in terms of rigor and timeliness. Since effective performance evaluations, especially for full-time and part-time faculty, have an impact on quality student learning and learning outcomes, it is essential that evaluations be performed systematically with the intent of assessing performance and encouraging improvement. (Standard III.A.1.b)

There is no college staffing plan. The college lacks any meaningful strategies relating to diversity and equal employment opportunity (Standard III.A.4b). There is evidence that a fair number of written policies and procedures exist to assure fairness in all employment procedures; however, many of these policies and procedures are out-dated. Based on the concerns raised by the faculty and staff, there is a lack of consistency in the application of these policies. (Standard III.A.3) In addition, there has been little or no training to ensure knowledge in the implementation of these policies, especially those related to diversity and equal employment opportunity.

Professional development and training is an area of concern. It is evident that training is not a very high priority at the college. (Standard III.A.5) The college conducts two sessions in the fall for faculty and staff. One is a one-day orientation for new faculty and the other is a college-wide event. However, attendance at these events is not mandatory. While the college offers various flex activities, the self study states that professional development at the college is not systematically evaluated. (Standard III.A.5b)

Standard III.B Physical Resources

Findings and Evidence:

The college is commended on the quality of its comprehensive Facilities Master Plan, which is supported by the college’s planning and shared decision making processes, that makes budget and implementation recommendations based upon the priorities of the college (Standard III.B.1, III.B.2b, III.B.1b).

The college has thoroughly assessed the conditions of its buildings and has established a list of priorities based upon the direction of the district in the Facilities and Campus Development Projects 1998 document (Standard III.B.1a)

The college is taking a proactive approach towards obtaining funds for the college and is relying on the passing of Measure R to fulfill the goals of its construction plans, including construction of new buildings and Facilities and Campus Development Projects (Standard III.B.4).

In addition, the college adequately assesses the safety issues of the work environment and has appropriately set a plan of action to address those issues stated in the self-study report (III.B.1b).

Physical resource planning is integrated into the planning process that prioritizes the overall needs of the college. Priorities are evidenced by the annual facility update reports, construction plan and Facilities and Campus Development Projects. (Standard III.B.2, III.B.2a, III.B.2b)

Standard III.C Technology

Findings and Evidence:

Technology resources are used to support student learning programs, which is evidenced by the expansion and standardization of the technology infrastructure of the college. Although the college remains at the beginning phase of development of student learning outcomes, the college seems prepared to support future needs of student learning outcomes. (Standard III.C, III.C.1, III.C.1a)

The technology division has a systematic mechanism to assess the conditions of both equipment and infrastructure to identify priorities within its operation plan, which subsequently get executed throughout the year. (Standard III.C.1c)

The college is in its final stages of publishing its Technology Information Plan. Through the workings of the Information Technology Committee, the college has used the shared decision making processes to recommend appropriate policy, procedures and guidelines for use of campus computing resources that are included in the plan. Again the college has appropriately addressed issues regarding the need for information technology training and has demonstrated the college's long-range commitment of support through its technology plan, which is in its final stage of development. (Standard III.C.1, III.C.1b)

The implementation of the Banner and Human Resource Systems reflects the level of commitment the college has in assisting instruction and services in meeting the needs of teaching, college-wide communications, and operational systems.

An area of concern is the lack of integration of research into the assessment and evaluation component of technology. As the college has taken great strides in improving its technological infrastructure, institutional research needs to be an integral part in planning and implementation, especially in the areas of program and service enhancement. To effectively execute the plan, the college must assess the impact that these new technologies will have on institutional effectiveness and student learning outcomes. (Standard III.C.1d, III.C.2)

Standard 3D Financial Resources

Findings and Evidence:

Annual budget allocations are developed based upon revenue projections for the fiscal year and submitted to the Strategic Planning and Budget Committee's Budget Task Force, while recommendations are submitted for review and approval by the SPBC. Budget recommendations are forwarded to the president, who presents final budget recommendations to the Board of Trustees for approval. (Standard III.D.1b, III.D.1d)

The college has successfully implemented the Los Angeles County's PeopleSoft finance program to effectively monitor expenditures against the approved allocation plan. The business office is presently phasing in various units within the college through an on-line purchasing system, which will provide electronic tracking of purchasing documents. The College is also developing a computerized integrated budgeting program, which will provide monthly fund status reports to program managers. This program is designed to provide financial management reporting and accountability of all funds allocated to programs. (Standard III.D.2) Financial audits are performed annually and no material weaknesses have been reported. (Standard III.D.2a) Finances are well managed and reserve requirements of 5% have been consistently maintained, even during years of budget reductions. Plans to expend surplus fund balances in excess of the 5% reserve requirements have been approved to address additional program requirements. (Standard III.D.2c)

The college is self-insured in the areas of worker's compensation, liability and property insurance and employee dental/vision plans. The college has joined the Joint Power Association (JPA) to mitigate the financial risks associated with these risks. (Standard III.D.2c)

The team voiced concerns regarding the accounting of funds expended by the Associated Student Organization (ASO). The ASO, and not the college's budget office, manage funds from student association dues and athletic event receipts. Budgets are presented through the Vice President of Students for approval by the Board of Trustees. Funds are expended directly by the ASO and expenditures are not reflected as part of the college's financial reports. This accounting structure is unusual; however, this accounting procedure is audited yearly and no exception has been noted.

The team validated that the college is financially solvent with sufficient reserves to meet fiscal emergencies, which may confront the college. (Standard III.D)

Conclusions to Standard III:

The college has suffered from the lack of consistent, capable leadership in human resources. While the staff in the human resource office are very capable and enthusiastic about their jobs and have supported the human resources effort to the best of their abilities, the lack of leadership over the past six to eight years has made the human resources programs and services dysfunctional. While every segment of the college community has applauded the

current part-time Interim Vice President for Human Resources, a permanent full-time person is required to provide leadership and continuity in human resource management. A comprehensive and effective human resources department is critical to the smooth operation of the college. The college must place the highest priority to ensure stability and capable leadership in human resources. (Standard III.A.1, III.A.2, III.A.3)

Personnel policies must be reviewed and updated, especially in the areas of recruitment, hiring, labor relations, classification, compensation, benefits, equal employment, diversity, evaluation, staff development and training. These policies need to be consistently applied. The college must consider the recommendations of the Technical Assistance Team Report designed to address current human resource issues and complete the proposed classification study and workload assessment for the classified personnel and implement the findings.

Physical resource planning requests are integrated into the planning process that prioritizes the overall needs of the college. (Standard III.B.2, III.B.2a, III.B.2b) The college is commended on the quality of its comprehensive Facilities Master Plan. The college thoroughly assessed the conditions of its buildings and established a list of priorities. (Standard III.B.1, III.B.2b, III.B.1b) The college is taking a proactive approach towards obtaining funds for the college and is very hopeful about the passage of Measure R to fulfill the goals of the college's Construction Plans, Facilities and Campus Development Projects. (Standard III.B.4) In addition, the college adequately assessed the safety issues of the work environment and has appropriately set a plan of action to address these issues as stated in the self-study report. (Standard III.B.1b)

The College has an impressive technology support system that includes all areas of the college. Although major efforts have been made to improve campus operations by implementing the Banner System and other technological programs, the college must consider how institutional research plays a part in measuring and evaluating institutional effectiveness and student learning outcomes, incorporate technology planning and implementation into the program review process, and proceed with identifying the plans of action published in the self-study report. (Standard III.C.1d, III.C.2)

The college meets the financial resources area of the standards. The college's resource allocation process is participatory and includes review and approval by the SPBC. (Standard III.D.1) The college meets the standard of financial integrity through effective management of its financial resources. Successful implementation of the PeopleSoft finance program along with the development of an on-line purchasing system and a computerized integrated budget program will insure better monitoring of expenditures against allocations and income against projected revenues (III.D.2). The college has sufficient cash flow and reserves to maintain financial stability and has appropriate risk management programs to mitigate large financial losses in the vulnerable areas of worker compensation, liability and property losses, and employee dental/vision plans. The college's unfunded liabilities are within manageable limits and should not pose long-term issues. (Standard III.D.2c)

Recommendations for Standard III:

5. *The college must provide the following organizational structures that are congruent with institutional effectiveness: (1) a fully functional human resource division, (2) adequate research capacity to gather and analyze the college's data as the basis for dialogue and informed decision making.*
(Standards I.B.3, II.A.1a, II.A.1c, IIA.2b, IIA.2e, II.A.2f, II.B.3, II.B.3c, II.B.4, II.C.2, III.A.1b, III.A.3, III.A.4, III.A.4a, III.A.4b, IV.A., Preamble, IV.A.5, IV.B.1, IV.B.1b)

See recommendations Standard I and Standard II.

STANDARD IV LEADERSHIP AND GOVERNANCE

General Comments for Standard IV:

The self study report for this standard was incomplete, inconsistent, and in some cases did not even address the question being asked. As a result it was difficult to assess this area. Occasionally, the self study keyed responses to specific documents that enabled the team to trace back statements to the source documents. Frequent changes in administrative personnel over the past few years have created leadership problems for the college. This resulted in apathy on the part of many on the campus. The team found evidence through interviews and forums that college-wide apathy was one of the explanations given for the incomplete sections of the self study

Since the writing of the Self Study Report, the college has encouraged an atmosphere of open communication that has the potential to promote effective discussion, planning and implementation of ideas and policies that have significant institutional implications.

Findings and Evidence:

The self study stated and the team confirmed that the college has a written policy providing for faculty, staff, administrator and student participation in a shared decision making process. (Board Policy 2051) This policy on participatory governance both defines the policies and procedures, and identifies committees that have participatory decision making responsibilities. The Strategic Planning and Budget Committee (SPBC) is the key committee charged with the responsibility to “manage the changes within the institution in order to accomplish the mission and goals of the college in the most efficient and effective way.” (Standard IVA.2)

While the structures for shared decision making are in place, in a survey taken on campus before the site visit, a majority of those surveyed stated that they have no opportunity or limited opportunities to offer input on campus planning and budget. The team confirmed that the Strategic Planning and Budget Committee (SPBC) was not as effective as it could be. Examination of several agenda packets showed that the topics listed on the agenda page fail to provide individuals outside the committee with adequate detail on issues to be discussed. Furthermore, although minutes are prepared for each meeting, there is inadequate tracking of follow-up on assigned tasks in the minutes. Members of the committee also stated a need for training in key areas such as planning and budget. Finally, minutes from the SPBC meetings are not distributed campus-wide.

The issue of a lack of effective communication on campus was confirmed by a staff survey. All campus constituents—faculty, staff, administrators, and students—must accept responsibility for taking the initiative, and remaining engaged, in the process of continued campus improvement of programs and services. (Standard IV.A.1)

Although many documents were listed that provided data for the college, there was no indication that these documents were utilized in the decision making processes. The absence of a institutional research function on the campus has created a sense of frustration among faculty, staff and administrators in attempts to apply comprehensive and reliable data to key planning and decision making processes. These processes include decisions affecting student learning programs and the rigorous evaluation of such programs. (Standards IB.3, II.A.1a, IV A.5)

The Board policy addressing program review (BP 5041) defines procedures for systematic program review. The team found no evidence that the results of the program reviews that have taken place are used to validate or improve practices that improve student learning and student learning outcomes. (Standard IV.B.1, IV.B.1b)

The Board began the process of revising Board Policies over a year ago but was dissatisfied with the product. The Board intends to review and revise the Board Policies this year; however, they have not begun to do so. To make up for lack of information in the self study, the team conducted extensive interviews with the president, members of the Board, and members of the SPBC. The team also did an analysis of the status of board policy revisions.

Conclusions for Standard IV:

The new leadership, with the support of the board, has improved campus environment.

There is a major void in the systematic collection and analysis of reliable, comprehensive, and timely data to provide for informed decision making. (Standards I.B.3; II.A.1a, IV.A.5) SPBC is not effectively communicating its findings and recommendations as a key shared decision making committee, nor is it effective in promoting action in improving campus governance. (Standards I.B.4; IV.A.2)

The goals of student learning and learning outcomes are not currently incorporated in relevant Board Policies. (Standard IV.B.1) The program review process is not operating effectively in achieving the objectives of quality, integrity and improvement of student learning programs and services. (Standard IV.B.1, IV.B.1b)

Board Policy review and development is needed in the following areas:

- Personnel policies and procedures, including but not limited to recruitment, hiring, labor relations, classification, compensation, benefits, and staff development and training is needed. (Standard III.A.3)
- Participatory governance (Board policy 2051), with an eye to incorporate a directive to include data, both qualitative and quantitative, in participatory governance planning and decision making. (Standards I.B.3; II.A.1a)

- Program review (Board policy 5041) to incorporate data-driven analysis. Furthermore, program review reports must be prepared on a regular cycle and the report findings and recommendations must be disseminated campus-wide. Report recommendations must be actively incorporated into campus planning and decision making to enhance student learning. (Standard IV.B.1, IV.B.1b)

In conclusion, the board must take action to revise the policies as planned.

Recommendations for Standard IV:

See Recommendations from Standards I, II, and III

