



<h1>College Coordinating Council Meeting</h1>	<b>February 12, 2025</b> <b>9:30 a.m. – 10:30 a.m.</b> <b>L201</b>
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**Type of Meeting: Regular**  
**Note Taker: Patty McClure**  
**Please Review/Bring: Agenda, Minutes**

**Committee Members:**  
 Hal Huntsman, Academic Senate  
 Renelyn Wilson, ASO, and Veronica Orozco  
 Pamela Ford, Classified Union  
 Ashley Hawkins, Confidential/Management/Supervisory/Administrators  
 Kathryn Mitchell, Deans  
 Dr. Jason Bowen, Faculty Union  
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 Dr. Jennifer Zellet, CHAIR  
 Dr. Kathy Bakhit, Vice President of Academic Affairs  
 Shami Brar, Vice President of Administrative Services  
 Dr. Lauren Elan-Helsper, Vice President of Human Resources  
 Dr. Rebecca Farley, Vice President of Equity & Student Achievement  
 Idania Padron, Vice President of Student Services

## MEETING

| Items | Person(s) Responsible | Time | Action |
|-------|-----------------------|------|--------|
|-------|-----------------------|------|--------|

### APPROVAL OF AGENDA AND MINUTES & REPORT:

I. Approval of Minutes of January 22, 2025.

### RETURNING ITEMS:

|                                             |          |           |  |
|---------------------------------------------|----------|-----------|--|
| I. Federal Judge Vacates 2024 Title IX Regs | Lauren   | 5 minutes |  |
| II. Institutional Review Board              | Hal      | 5 minutes |  |
| III. BP 2330 – Quorum and Voting            | Jennifer | 5 minutes |  |
| IV. BP/AP 3300 – Public Records             | Jennifer | 5 minutes |  |
| V. BP/AP 3518 – Child Abuse Reporting       | Jennifer | 5 minutes |  |
| VI. BP/AP 5500 – Standards of Conduct       | Idania   | 5 minutes |  |

### DISCUSSION/ACTION ITEMS:

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| <b>STANDING ITEMS:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |           |  |
| I. Constituents Reports                                                                                                                                                                                                                                                                                                                                                                                                                                                        | All | 5 minutes |  |
| <b>POLICIES OUT FOR CONSTITUENT REVIEW:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |           |  |
| I. BP/AP 5510 – Off-Campus Student Organizations – from January 22, 2025, Meeting                                                                                                                                                                                                                                                                                                                                                                                              |     |           |  |
| <b>POLICIES IN PROCESS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                     |     |           |  |
| I. BP/AP 2510 – Participation in Local Decision Making – Hal/Meeta<br>II. BP/AP 3560 – Alcoholic Beverages - Jennifer<br>III. BP/AP 4010 – Academic Calendar<br>IV. Decision-Making Principle Document – Jennifer<br>V. BP/AP 4010 – Academic Calendar – Kathy<br>VI. BP/AP 4100 – Graduation Requirement – Idania<br>VII. BP/AP 4400 – Community Services – Kathy<br>VIII. BP/AP 7130 – Compensation – Shami & Legal<br>IX. BP/AP 7800 – Emeritus Status (NEW) – Jennifer/Hal |     |           |  |
| <b>NEXT MEETING DATE: February 26, 2025</b>                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |           |  |



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|---------------------------------------------------|-------------------------------------------------------------|
| <h1>College Coordinating Council<br/>Minutes</h1> | <p>January 22, 2025<br/>9:30 a.m. – 10:30 a.m.<br/>L201</p> |
|---------------------------------------------------|-------------------------------------------------------------|

**Type of Meeting:** Regular  
**Note Taker:** Angela Urbanoski  
**Please Review/Bring:** Agenda, Minutes

**Committee Members:**  
 Hal Huntsman, Academic Senate  
 Renelyn Wilson, ASO, and Veronica Orozco  
 Pamela Ford, Classified Union **Via Zoom**  
 Ashley Hawkins, Confidential/Management/Supervisory/Administrators  
 Kathryn Mitchell, Deans  
 Dr. Jason Bowen, Faculty Union - **Absent**

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Dr. Jennifer Zellet, CHAIR - **Absent**  
 Dr. Kathy Bakhit, Vice President of Academic Affairs  
 Shami Brar, Vice President of Administrative Services  
 Dr. Lauren Elan-Helsper, Vice President of Human Resources  
 Dr. Rebecca Farley, Vice President of Equity & Student Achievement  
 Idania Padron, Vice President of Student Services

## MINUTES

| Items | Person(s) Responsible | Time | Action |
|-------|-----------------------|------|--------|
|-------|-----------------------|------|--------|

**APPROVAL OF AGENDA AND MINUTES & REPORT:**

I. Approval of Minutes of November 20, 2024. - The committee began with a discussion-only session as quorum was not met to vote on the AP/BP. During this time, the committee reviewed constituent reports.

Quorum was later achieved with the addition of Dr. Kathy Bakhit and ASO representative Renelyn Wilson. The minutes were then approved as presented.

**RETURNING ITEMS:**

|                                                      |               |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
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| <p>I. BP 5510 – Off-Campus Student Organizations</p> | <p>Idania</p> | <p>3 minutes</p> | <p>The committee conducted a second review of BP 5510. This is a new policy recommended by the CCLC, as AVC did not previously have a BP 5510. The language is recommended by the CCLC and is unlikely to have a significant impact since AVC does not currently have campus student organizations with off-campus housing. However, once AVC develops student housing, this policy may need to be revisited. The recommendation from the CCLC is to have this policy in place.</p> |
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|-----------------------------------------|---------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                         |               |                  | <p>A question was raised about whether the policy has gone out for constituent review. The Vice President of Student Services has the policy reviewed by the deans and directors of student services, followed by cabinet and CCC. If desired, the policy can also go out for constituent review. It was noted that in previous discussions, the president may have wanted to make changes before bringing the policy back for review.</p> <p>There was also a comment regarding the language in the policy, specifically the phrase "owned or controlled by," which could extend to situations such as a campus club renting a house where misconduct occurs. In such cases, the policy would also cover that rented space. The language for BP 5510 is taken directly from the CCLC's recommendations, and no changes have been made since the last review.</p> <p>It was proposed that the policy be sent for constituent review to gather feedback before moving forward. A question was raised about whether the policy is necessary if it does not currently apply to AVC. The recommendation is to send the policy out for constituent review, gather feedback, and proceed from there. The policy will be sent out accordingly.</p> |
| <p>II. Committees &amp; Memberships</p> | <p>Pamela</p> | <p>3 minutes</p> | <p>The committee membership forms were explained. The process involves sending out a call for members and inviting people to fill terms. On the membership list, the purpose of the committee and its recommendations are outlined. Committees make recommendations rather than decisions, and the composition of representatives should be reviewed. It's recommended for the SPCBC (Special Planning Committee / Budget Committee), membership needs to be reviewed to determine if new members should be added, particularly since the committee has</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

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|  |  | <p>been collapsed into one. It was recommended that if VP of Equity is added to SPCBC that addition goes through this process.</p> <p>The roles of committee chairs and co-chairs should be listed, including the length of their terms. Members need to understand quorum requirements, and it was emphasized that meetings should be scheduled regularly rather than on an as-needed basis, as this causes confusion. Using tools like Doodle polls can be distracting. Meeting minutes, their location, and general committee operations should also be clarified. Each year, committees should complete a review of their purpose and operations.</p> <p>Many committee documents are outdated. Historically, these documents played a role in accreditation. The membership form, which comes from Patty's office, should be available on the website for all committees.</p> <p>While Senate committees are mostly up to date, they still need to submit their information sheets to the Senate, and not all of these sheets have been posted online. There was discussion about the timeline for updating committee documents, which should ideally happen at the beginning of the fall semester. Additionally, at the end of the academic year, committees should review their progress and prepare for the next term.</p> <p>Committees are responsible for updating their documents, which should make their way to CCC and be uploaded to the committee website. Committees reporting to CCC should submit their updates there, while Senate committees should submit theirs to the Senate. Reporting for committees is necessary, addressing their accomplishments, areas for</p> |
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|  |  | <p>improvement, and expectations. These updates should happen at the beginning and end of each academic year with input from the committee members.</p> <p>It was asked if AP 2510 was referenced as outlining the reporting structure, where non-academic Senate committees report to CCC. It was stated that the current procedures outlined in AP 2510 are outdated and not fully followed. It was noted that there used to be an onboarding process for committees, which no longer exists. Having a report and structure would help members understand the purpose and goals of their committees.</p> <p>There was concern that campus input is lacking, and the purpose of these efforts is to involve constituent groups and enhance understanding across campus. It was recommended that work be done to revise AP 2510. If the current procedures are followed, we may be able to identify where the issues are.</p> <p>The committee discussed whether CCC should reach out to committees for updates to their info sheets, providing a template and timeline for submissions. A calendar of due dates for reports should be established to ensure clarity for committee members, especially as many individuals take on multiple roles. A formalized process would help streamline communication and operations. The recommendation is for CCC to request updates, provide a clear timeline, and communicate that an updated list or report will be expected at the end of the semester. This process will allow committees to submit their information, identify gaps, and improve functionality moving forward.</p> |
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|                                       |          |           | The discussion concluded, and the meeting moved on to the next topic.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| III. BP/AP 3560 – Alcoholic Beverages | Jennifer | 3 minutes | The BP shows no changes, and the AP may have minor changes. It is believed that the policy has already undergone constituent review, with no objections raised. The next step will be to move it to the board for approval at the next board meeting on February 7, 2025.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| IV. Name Change for OSD Office        | Idania   | 3 minutes | There may have been concerns raised by Academic Affairs regarding the suggested OSD name. It is unclear where the discussion was left off, but the matter can be revisited once the president returns to determine if she had any additional conversations on the topic. This item will be brought back for further discussion.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| V. BP/AP 3515 – Reporting Crimes      | Jennifer | 3 minutes | <p>The policy has undergone constituent review, with no objections raised from the Senate. In the AP, there are two alternatives, and the Senate prefers Alternative 2.</p> <p>The Senate reviewed both alternatives and had significant discussion, noting concerns about Alternative 1. They feel Alternative 1 lacks due process, creates a record that could be misused, and prefer Alternative 2 for its safeguards. However, others believe there are no due process concerns with Alternative 1, as it only involves reporting and aims to provide statistics. It was emphasized that no action can be taken against a named aggressor without a victim coming forward. Confidential reports cannot result in action against an aggressor if no names are provided. Advocates for Alternative 1 believe collecting statistics is essential for community safety and that requiring names may discourage</p> |

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|                                                                  |          |           | <p>reporting, potentially putting individuals in danger.</p> <p>CMSA supports Alternative 1, highlighting that the main difference lies in the ability to report anonymously. They believe anonymous reporting contributes to safety, as requiring names could deter individuals from reporting due to fear of danger. Additionally, there are concerns that Alternative 2 may not fully align with Clery reporting laws, as Clery only requires statistical reporting and does not mandate names. Despite this, Alternative 2 uses CCLC language, suggesting it is likely legal.</p> <p>The Senate does not support Alternative 1, and PCT is requesting to bring the matter back to the Senate. Lauren will engage with the Senate to clarify that confidential reports do not create liability. It is recommended that Hal and Lauren convene a smaller meeting with select individuals to discuss the matter further. This could lead to potential language adjustments to make Alternative 1 more acceptable.</p> <p>The classified union representative supports Alternative 2. Lauren has also offered to speak and clarify processes, particularly addressing concerns about anonymous reporting. Further discussions and clarifications will be pursued to address the concerns of all parties.</p> |
| VI. BP/AP 3550 – Drug-Free Environment & Drug Prevention Program | Jennifer | 3 minutes | At constituent review, the Senate had no significant objections, though some faculty expressed concerns about the new language                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |



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|                                                                 |                |                   | <p>regarding opioid overdoses and addiction. Specifically, there are concerns about the lack of training and availability of anti-overdose drugs, such as Narcan, and whether staff are adequately prepared to administer these drugs effectively in emergency situations.</p> <p>A 10-minute segment on this topic will be included during Welcome Day. Currently, Narcan is available, and Jill is working on a training campaign to address these concerns. Additionally, the campus sheriffs have Narcan in their vehicles.</p> <p>The policy will move to the board for approval at the next board meeting on February 7, 2025.</p>                                                                                                                                                                 |
| <p>V. Added Agenda Item: Discussion of Queer Support at AVC</p> | <p>Renelyn</p> | <p>10 minutes</p> | <p><b>Addition to Agenda</b><br/> ASO representative Renelyn Wilson requested the addition of an item to discuss the need for more queer support at AVC. The request was approved, and the item was added as the final topic of the meeting.</p> <p>ASO representative Renelyn Wilson expressed the need for more queer support at AVC and provided a handout outlining key concerns. While the Pride Center in the Hub has had a positive impact, its small size, lack of visibility, and public setting create discomfort for many queer students. Negative experiences, misinformation, and internal struggles often prevent students from utilizing the space. These challenges significantly impact their mental well-being and academic focus, particularly for those without support at home.</p> |

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|  |  |  | <p>It was noted that current resources, such as academic counselors, may not meet the unique needs of queer students, as many feel uncomfortable seeking help from individuals who do not share or understand their experiences. The student-run Pride Center also presents challenges in providing adequate support.</p> <p>ASO proposed hiring a dedicated counselor specifically for queer support, preferably someone who identifies as queer and POC. This would reflect the intersectionality of the large POC community in the AV and address issues unique to queer POC.</p> <p>It was shared that students currently have access to TimelyCare, which allows them to request support based on demographic preferences. However, it was acknowledged that this is not equivalent to having in-person resources on campus. To address these concerns, it was suggested that a group dialogue or focus group be held to gather input and explore resources to better support the queer student population at AVC.</p> |
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**DISCUSSION/ACTION ITEMS:**

|     |                                          |          |           |  |
|-----|------------------------------------------|----------|-----------|--|
| I.  | Federal Judge Vacates 2024 Title IX Regs | Jennifer | 5 minutes |  |
| II. | Institutional Review Board               | Hal      | 5 minutes |  |

|      |                                    |          |           |  |
|------|------------------------------------|----------|-----------|--|
| III. | BP 2330 – Quorum and Voting        | Jennifer | 5 minutes |  |
| IV.  | BP/AP 3300 – Public Records        | Jennifer | 5 minutes |  |
| V.   | BP/AP 3518 – Child Abuse Reporting | Jennifer | 5 minutes |  |
| VI.  | BP/AP 5500 – Standards of Conduct  | Idania   | 5 minutes |  |

**STANDING ITEMS:**

|                                |            |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
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| <p>I. Constituents Reports</p> | <p>All</p> | <p>5 minutes</p> | <p>CMISA does not have a report at this time.</p> <p>The Senate does not have a significant report but would like to discuss student spaces and their use at future meetings.</p> <p>SSV mentioned that there is an announcement about the new Dean of Student Support Services, Leonardo Ayala. He is meeting with and working closely with the team to prepare for the Student Success Conference in the coming weeks. Additionally, Interim Dean Windy is focused on addressing fraud cases this semester. Over 400 people attended the recent registration event, and follow-up efforts are ongoing for those who were not seen in person. Work is also being done with the Palmdale Center to re-engage students who have not been attending classes in recent semesters.</p> <p>ASO reported that there is a conference in April run by the SSCCC, where resolutions are voted on and presented to Congress to become bills. ASO plans to bring two resolutions and seek two sponsors. They also intend to make changes to their cabinet and gather more feedback from students to bring to administration.</p> <p>Faculty Union had no report.</p> <p>Academic Affairs (AA) is fully engaged in preparations for Welcome Day on January 31. Two dynamic guest speakers will present on the theme of AI and its impact on teaching and learning, as well as refining the spring schedule to allow students to take additional sections. These topics were shared during the</p> |
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|  |  | <p>registration event last week, which contributed to an increase in enrollment. Kathy expressed confidence in the progress made, especially with ITS efforts to combat fraud. She also thanked Facilities for their continued work on campus structures. The AA office is working on preparing evaluations as the spring semester begins, along with chair elections.</p> <p>PCT shared that recruitment season is underway, with a job fair at LAX Weston this weekend. A large constituency will represent the college, and there is excitement about the prospects. There is also a new interim director, Ben, and the risk management department, led by Hootman, who joined last Tuesday. His depth of experience is appreciated, especially since he previously worked with the benefits provider.</p> <p>Administrative Services reported that construction on the Cedar project is progressing and is expected to be completed and occupied by the end of March. The team is working hard, and Fiscal is preparing for budget season. A think tank will be held in February to gather feedback.</p> |
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**POLICIES OUT FOR CONSTITUENT REVIEW:**

- I.

**POLICIES IN PROCESS**

- I. BP/AP 2510 – Participation in Local Decision Making – Hal/Meeta
- II. BP/AP 3560 – Alcoholic Beverages - Jennifer
- III. BP/AP 4010 – Academic Calendar
- IV. Decision-Making Principle Document – Jennifer
- V. BP/AP 4010 – Academic Calendar – Kathy
- VI. BP/AP 4100 – Graduation Requirement – Idania
- VII. BP/AP 4400 – Community Services – Kathy
- VIII. BP/AP 7130 – Compensation – Shami & Legal
- IX. BP/AP 7800 – Emeritus Status (NEW) – Jennifer/Hal

**NEXT MEETING DATE: February 12, 2025**



## Breaking News: Federal Judge Vacates 2024 Title IX Regulations – Striking Down Title IX Changes Nationwide

Jan 10, 2025 | Legal Developments and News | [🖨️ Print this article](#)

Yesterday, a federal district court in Kentucky issued a ruling striking down the 2024 “Final Rule” (i.e., the 2024 regulatory changes) in its entirety and is applicable nationwide ([Link Here](#)). As of January 9, 2025, all educational agencies receiving federal financial assistance, must revert to the 2020 Title IX regulations.

As many will recall, under the 2020 regulations Title IX did not include sexual orientation or gender identity within the scope of discrimination on the basis of sex. Further, the 2020 regulations required K-12 local educational agencies (LEAs) to comply with specific processes for Title IX recordkeeping and responding to complaints, including: providing written notice, a right to an advisor, and a two-step evidence inspection and question and answer phase, among other requirements. These processes, which were modified under the 2024 Final Rule, are now back in place. Notably, California law unequivocally prohibits harassment and discrimination on the basis of gender identity and sexual orientation. Therefore, while any complaints arising on these bases are no longer subject to Title IX, in California, LEAs are required to continue to honor state and local laws prohibiting bullying, harassment and discrimination on any protected basis, including gender identity and sexual orientation.

Practically, the implication of yesterday’s ruling for California K-12 LEAs depends on what steps the LEA has already taken to date. Specifically, LEAs that were current with the 2020 regulations and have not yet updated their policies to align with the 2024 Final Rule, need not take any action at this time. However, LEAs who made policy and training updates in compliance with the 2024 Final Rule should now revert back to their 2020 policies. Title IX Coordinators may wish to consider refamiliarizing themselves and their Title IX teams on the 2020 processes and procedures. Additionally, LEAs should review their websites and publications to ensure all public facing information is aligned with the 2020 regulations once again.

Finally, this ruling leaves some uncertainty about what regulatory scheme should be applied moving forward for any LEAs that have active Title IX cases. LEAs with active Title IX cases should contact legal counsel. If you have any questions about the Title IX regulations, please contact [Clientservices@dwkesq.com](mailto:Clientservices@dwkesq.com) or a DWK attorney in our [Labor, Employment, and Personnel \(LEAP\) Group](#) or [Students Group](#).

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January 10, 2025

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**Santa Clarita Community College District  
Institutional Review Board  
Charter and Standard Operating Procedures**

*September 4, 2008*

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**Santa Clarita Community College District  
Institutional Review Board  
Charter and Standard Operating Procedures**

**INTRODUCTION**

The Santa Clarita Community College District (SCCCD) encourages and supports the scholarly endeavors of students, faculty, and staff of the College. Pursuit of scholarly work and research will often involve the use of human subjects for data collection and analysis. The District’s Institutional Review Board (IRB) reviews human subjects research proposals to ensure that the rights and welfare of human subjects used in research studies by District personnel are protected; that risks have been considered and minimized; that the potential for benefit has been identified and maximized; that all human subjects only volunteer to participate in research after being provided with legally effective informed consent; that any research is conducted in an ethical manner and in compliance with established standards. Those individuals seeking to conduct such research may not solicit subject participation or begin data collection until they have obtained clearance by the SCCCDC Institutional Review Board.

Some research projects involving human subjects are exempt from IRB approval requirements. The types of research generally exempt from IRB approval requirements include normal educational practices such as work undertaken as a part of a course; educational tests when the subjects are not identified; and surveys or interviews in which the subjects volunteer and are not personally identified.

The Institutional Review Board (IRB) for Human Subjects Research at the SCCCDC has responsibility to oversee procedures for carrying out the District’s commitment to protect human subjects in research. The role of the IRB is to review proposed research projects that involve the use of human subjects; ensure that the individuals involved in the project are treated ethically; ensure that all subjects are provided with substantial information about the study and consent to be a subject in the study; and that all private information will be handled with confidentiality. The IRB is authorized to review, approve, require modifications in, or disapprove research activities conducted by or through the District using human subjects.

The IRB does not assume the role of evaluating the soundness of the proposed research study, the merits of the research design, nor the potential contribution of the research to the scholarly literature. Rather, the IRB is charged with evaluating each project’s compliance with ethical standards in regard to issues such as informed consent, confidentiality, and any risk to the participants.

**I. INSTITUTIONAL AUTHORITY.**

This Charter and Standard Operating Procedures establishes and empowers the Santa Clarita Community College District (SCCCDC) human subjects protection committee. Currently the District has one committee, registered with the federal Office for Human Research Protections (OHRP) as Institutional Review Board (IRB00005805). This committee is hereinafter referred to as “the IRB.”



According to the terms of the Federal Wide Assurance, the Santa Clarita Community College District adopts the following reporting procedure:

All Principal Investigator(s) and all District employees are required to report to the Co-chairs of the IRB Committee any of the following upon knowledge of:

1. Unanticipated problems involving risks to subjects or others; and
2. Serious or continuing noncompliance with the federal regulations or the requirements or determinations of the IRB.

Upon receipt of such information, or if a research project is suspended or terminated by the IRB, the IRB Co-Chairs will make a written report to the Santa Clarita Community College District IRB committee, the President of the District, the head of any department or agency conducting or supporting the research, any applicable regulatory body, and to OHRP.

## **II. PURPOSE.**

The primary purpose of the IRB is to protect the welfare of human subjects used in research.

## **III. BASIC PRINCIPLES.**

A. The basic principles that govern the IRB in assuring that the rights and welfare of subjects are protected are contained in *Ethical Principles and Guidelines for the Protection of Human Subjects of Research* (“The Belmont Report”), and The National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, April 18, 1979 [see <http://ohrp.osophs.dhhs.gov/humansubjects/guidance/belmont.htm>].

B. Therefore, the following principles apply to all research, including student projects, involving human subjects at the Santa Clarita Community College District to ensure that adequate safeguards are provided:

1. Subjects’ legal rights will be respected; their rights to privacy, dignity, and comfort will also be considered in approving proposed research.
2. Risks to subjects must be reasonable in relation to anticipated benefits, if any, to subjects, and the importance of the knowledge that may reasonably be expected to result.
3. Adequate provision(s) must be made for all facilities, procedures, and professional attention necessary for the protection of the individual as a research subject.
4. Adequate provisions should be made for recruiting a subject population that is representative of the population base in terms of gender and minority representation unless scientifically justified.

5. Research involving human subjects must be supervised by qualified persons, including qualified clinicians for all study-related healthcare decisions.

6. Participation of a human subject in research must be voluntary and the right to withdraw at any time must be provided. Information provided to gain subject consent must be adequate, appropriate, and presented in lay language appropriate to the subject population.

7. All research programs that involve human subjects must be reviewed by and must receive approval of a formally constituted review *prior* to their initiation or *prior* to initiating any changes to the protocol. Continuing research programs are subject to periodic review, to be carried out no less often than once a year.

#### **IV. THE AUTHORITY OF THE IRB.**

A. The Santa Clarita Community College District holds a Federalwide Assurance (FWA) through OHRP. As part of this Assurance, the District agrees to consider *all* research involving the use of humans as research participants as being subject to federal regulations regardless of the source of funding, if one or more of the following apply:

1. The research is sponsored by this institution (unless the research is conducted at another institution with which the Santa Clarita Community College District has an “IRB Authorization Agreement” as specified in the District’s FWA), or

2. The research is conducted by or under the direction of any employee or agent of this institution (unless the research is conducted at another institution with which the Santa Clarita Community College District has an “IRB Authorization Agreement” as specified in the District’s FWA), or

3. The research is conducted by or under the direction of any employee or agent of this institution using any property or facility of this institution, or

4. The research involves the use of this institution’s non-public information to identify or contact human research subjects or prospective subjects.

In some instances, students may be involved in course activities such as questioning, participation in minimally physically stressing classroom exercises, observing, and/or interacting with other individuals. The course instructor is responsible for determining whether such activity is classified as those kinds of activities that require Institutional Review Board (IRB) approval. If the instructor has any doubt concerning the classification of these activities, he/she is encouraged to complete an Exempt Protocol Summary Form for approval and submit it along with the protocol and any accompanying consent form(s), cover letter(s), and/or questionnaire(s) in order to obtain the guidance of the IRB regarding these activities.

B. The IRB reviews all projects and programs involving human subjects in accordance with this Charter and Standard Operating Procedures, applicable federal regulations, and sponsor policies and guidelines.

C. The IRB provides continuing advice and counsel to personnel engaged in activities involving human subjects.

D. The IRB has approval authority of human subject protocols, and can disapprove, modify or approve studies based upon consideration of any issue it deems relevant to human subject protection. Research that has been approved by the IRB may be subject to further appropriate review and approval or disapproval by the Assistant Superintendent/Vice President of Institutional Development, Technology and Online Services. However, the Assistant Superintendent/Vice President of Institutional Development, Technology and Online Services may not approve the non-exempt research if it has not been approved by the IRB.

E. The IRB has authority to require progress reports from the investigators and oversee the conduct of the study.

F. The IRB has authority to suspend or terminate approval of a study, or to place restrictions on a study, when this is deemed to be in the best interests of the subjects in that study.

G. The IRB has authority to observe the informed consent process as practiced by any investigator or authorized person in any approved protocol especially in cases where the consentee is from a vulnerable population.

H. The IRB has the authority to access, and to make copies of, records related to any research approved by the IRB (or another body under an IRB Authorization Agreement), regardless of the location of those records, for any reason. Where feasible, appropriate notice will be given of the need to review, copy or duplicate records while being sensitive to causing the least inconvenience or disruption of on-going research.

## **V. THE IRB'S FUNCTIONAL RELATIONSHIPS.**

A. The IRB functions administratively through the Office of Institutional Research. This structure provides for administrative coordination for the IRB with the various academic and administrative units at the Santa Clarita Community College District.

B. The IRB advises and makes recommendations to the Chancellor, to policy and administrative bodies, and to any member of the Santa Clarita Community College District on all matters related to the use of human subjects in research.

## **VI. THE MEMBERSHIP OF THE IRB.**

A. The IRB is composed of at least five voting members. Alternates and non-voting members may also be appointed, with alternates authorized to vote at convened meetings

only in the absence of the member for whom they are the designated alternate. Although an alternate may be designated for more than one IRB member, each alternate may represent only one regular member at a convened meeting. All appointments are made by Executive Memorandum and reported to OHRP.

B. The IRB is composed of members with varying backgrounds and expertise in special areas to provide complete and adequate review of the research. Committee members should possess not only broad specific competence sufficient to comprehend the nature of the research, but also other competencies necessary for judgments as to acceptability of the research in terms of the District's regulations, relevant law, ethical standards, and standards of professional practice. Consultants may be used to review proposals for which additional expertise is needed.

C. The IRB must include both men and women, at least one member whose primary concerns are in science areas, one whose primary concerns are nonscientific areas, and at least one member who is not otherwise affiliated (either directly or through immediate family) with the District.

D. No person shall be excluded from serving on the IRB based on sex, race, color or national origin.

## **VII. MANAGEMENT OF THE IRB.**

A. The IRB Co-Chairs are the Director of Institutional Research and the Counseling Department Chair and Counseling Faculty Member. The Co-chairs have authority to sign all IRB action items.

B. The IRB Co-Chairs are voting members of the IRB and preside over all convened IRB meetings. The Co-Chairs have authority to sign all IRB action items in the absence of the other Co-Chair.

C. Members and alternates of the IRB shall be appointed by the Co-Chairs of the IRB for a tenure of three (3) years. However, the term of appointment may be terminated by notice of the Committee member to the Co-Chairs or by notice from the Co-Chairs. If a member finds that he/she is unable to attend meetings for an extended period, as a consequence of unavoidable conflicting activities, the IRB Co-Chairs must be informed so that a replacement may be appointed. Additionally, members may be removed from the IRB before their term is completed for reasons of poor attendance for which there is not reasonable justification, or for other manifestations of unwillingness or incapability to serve the committee adequately. In either event, the Co-Chairs will appoint a replacement. Tenure on the IRB may be extended by mutual agreement between the member and the Co-Chairs.

D. All IRB members are required to undergo formal training at the time of their initial appointment. Training that satisfies this requirement is the online training through CITI at [CITI Program.org](http://CITIProgram.org). The IRB Co-Chairs will receive electronic confirmation of training

completion dates. Continuing education of IRB members is accomplished through course refreshers online at [CITI Program.org](http://CITI Program.org). The CITI program will automatically notify IRB Co-Chairs electronically when training is complete for each IRB member.

E. IRB members do not receive compensation for their service.

F. Liability coverage for IRB members is provided through the District's liability insurance coverage, whether or not the IRB member is an employee of the District.

G. Consultants with competence in special areas may be used when deemed appropriate.

H. Conflict of interest policy and procedure

1. Investigators shall not be involved in the selection of IRB members.

2. Investigators will be asked in the District's Conflict of Interest form, "The Report Form for Financial Disclosure" whether they have a vested interest in any commercial enterprise associated with any aspect of the protocol, and, if yes, to fully explain and identify the safeguards taken to prevent investigator bias in subject recruitment and/or the consent process.

3. Investigators and IRB members who are District employees and who apply for federal grants and contracts are subject to the District's Conflict of Interest Policy [**Does COC have such a policy?**].

4. The Office of Institutional Research will forward to the IRB any financial interest disclosures received in connection with proposals for extramural funding that involve human subjects.

5. Other conflict of interest guidelines specifically for IRB members are found in section XIV of this Charter and Standard Operating Procedures.

## **VIII. PROCEDURES OF THE IRB.**

A. Initial Review.

1. No or Minimal Risk:

Under the auspices of the IRB, the IRB Chair will review Exempt Protocol Summary Forms eligible for "exempt" (see below) or expedited review or, if significant risk is inherent in the study, refer the petition to the IRB for full board review.

Under federal regulations, certain types of research are exempt from federal policy unless the appropriate federal agency heads have determined otherwise [see <http://ohrp.osophs.dhhs.gov/humansubjects/guidance/45cfr46.htm#46.101>]. Exempt types of research include:

(1) Research conducted in established or commonly accepted educational settings, involving normal educational practices, such as (i) research on regular and special education instructional strategies, or (ii) research on the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods.

(2) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior, unless: (i) information obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects; and (ii) any disclosure of the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation.

(3) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior that is not exempt under paragraph (2) of this section, if: (i) the human subjects are elected or appointed public officials or candidates for public office; or (ii) Federal statute(s) require(s) without exception that the confidentiality of the personally identifiable information will be maintained throughout the research and thereafter.

(4) Research involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available or if the information is recorded by the investigator in such a manner that subjects cannot be identified, directly or through identifiers linked to the subjects.

(5) Research and demonstration projects which are conducted by or subject to the approval of Department or Agency heads, and which are designed to study, evaluate, or otherwise examine: (i) Public benefit or service programs; (ii) procedures for obtaining benefits or services under those programs; (iii) possible changes in or alternatives to those programs or procedures; or (iv) possible changes in methods or levels of payment for benefits or services under those programs.

(6) Taste and food quality evaluation and consumer acceptance studies, (i) if wholesome foods without additives are consumed or (ii) if a food is consumed that contains a food ingredient at or below the level and for a use found to be safe, or agricultural chemical or environmental contaminant at or below the level found to be safe, by the Food and Drug Administration or approved by the Environmental Protection Agency or the Food Safety and Inspection Service of the U.S. Department of Agriculture.

The IRB Co-Chairs, not the investigator, shall make the determination as to whether a project is or is not exempt. To obtain an exemption, an investigator must Petition with an exemption request citing the specific exemption category and providing justification for the exemption.

Under federal regulations certain types of research qualify for an ‘expedited’ review [see <http://ohrp.osophs.dhhs.gov/humansubjects/guidance/expedited98.htm>]. These are activities that (1) present no more than minimal risk to human subjects, and (2) involve only procedures specified in federal regulations. The activities listed should not be deemed to be of minimal risk simply because they are included on this list. Inclusion on the list merely means that the activity is eligible for review through the expedited review procedure when the specific circumstances of the proposed research involve no more than minimal risk to human subjects.

The list of categories of research that may be reviewed by the IRB through an expedited review is as follows:

(1) Clinical studies of drugs and medical devices only when condition (a) or (b) is met.

(a) Research on drugs for which an investigational new drug application (21 CFR Part 312) is not required. (Note: Research on marketed drugs that significantly increases the risks or decreases the acceptability of the risks associated with the use of the product is not eligible for expedited review.)

(b) Research on medical devices for which (i) an investigational device exemption application (21 CFR Part 812) is not required; or (ii) the medical device is cleared/approved for marketing and the medical device is being used in accordance with its cleared/approved labeling.

(2) Collection of blood samples by finger stick, heel stick, ear stick, or venipuncture as follows:

(a) from healthy, nonpregnant adults who weigh at least 110 pounds. For these subjects, the amounts drawn may not exceed 550 ml in an 8 week period and collection may not occur more frequently than 2 times per week;  
or

(b) from other adults and children, considering the age, weight, and health of the subjects, the collection procedure, the amount of blood to be collected, and the frequency with which it will be collected. For these subjects, the amount drawn may not exceed the lesser of 50 ml or 3 ml per kg in an 8 week period and collection may not occur more frequently than 2 times per week.

(3) Prospective collection of biological specimens for research purposes by noninvasive means.

Examples: (a) hair and nail clippings in a nondisfiguring manner; (b) deciduous teeth at time of exfoliation or if routine patient care indicates a need for extraction; (c) permanent teeth if routine patient care indicates a need for extraction; (d) excreta and external secretions (including sweat); (e) uncannulated saliva collected either in an unstimulated fashion or stimulated by chewing gumbase or wax or by applying a dilute citric solution to the tongue; (f) placenta removed at delivery; (g) amniotic fluid obtained at the time of rupture of the membrane prior to or during labor; (h) supra- and subgingival dental plaque and calculus, provided the collection procedure is not more invasive than routine prophylactic scaling of the teeth and the process is accomplished in accordance with accepted prophylactic techniques; (i) mucosal and skin cells collected by buccal scraping or swab, skin swab, or mouth washings; (j) sputum collected after saline mist nebulization.

(4) Collection of data through noninvasive procedures (not involving general anesthesia or sedation) routinely employed in clinical practice, excluding procedures involving x-rays or microwaves. Where medical devices are employed, they must be cleared/approved for marketing. (Studies intended to evaluate the safety and effectiveness of the medical device are not generally eligible for expedited review, including studies of cleared medical devices for new indications.)

Examples: (a) physical sensors that are applied either to the surface of the body or at a distance and do not involve input of significant amounts of energy into the subject or an invasion of the subjects privacy; (b) weighing or testing sensory acuity; (c) magnetic resonance imaging; (d) electrocardiography, electroencephalography, thermography, detection of naturally occurring radioactivity, electroretinography, ultrasound, diagnostic infrared imaging, doppler blood flow, and echocardiography; (e) moderate exercise, muscular strength testing, body composition assessment, and flexibility testing where appropriate given the age, weight, and health of the individual.

(5) Research involving materials (data, documents, records, or specimens) that have been collected, or will be collected solely for nonresearch purposes (such as medical treatment or diagnosis). (NOTE: Some research in this category may be exempt from federal regulations for the protection of human subjects. This listing refers only to research that is not exempt.)

(6) Collection of data from voice, video, digital, or image recordings made for research purposes.



(7) Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies. (NOTE: Some research in this category may be exempt from federal regulations for the protection of human subjects. This listing refers only to research that is not exempt.)

(8) Continuing review of research previously approved by the convened IRB as follows:

(a) where (i) the research is permanently closed to the enrollment of new subjects; (ii) all subjects have completed all research-related interventions; and (iii) the research remains active only for long-term follow-up of subjects; or

(b) where no subjects have been enrolled and no additional risks have been identified; or

(c) where the remaining research activities are limited to data analysis.

(9) Continuing review of research, not conducted under an investigational new drug application or investigational device exemption where categories two (2) through eight (8) do not apply but the IRB has determined and documented at a convened meeting that the research involves no greater than minimal risk and no additional risks have been identified.

Prospective Principal Investigators (PIs) seeking an exemption or an expedited review must submit the “Expedited Review of Research Form” using the District’s electronic submission process at least fourteen (14) days prior to any proposal or study deadline in order to provide time for review and processing. Copies of the form are available via the online proposal submission process at the [Institutional Review Board website](#). The [District’s Office of Institutional Research website](#) has links to those categories of research that may qualify for exemption or expedited review.

The IRB Co-Chairs may recommend a protocol to the IRB for expedited review, for expedited review pending recommended changes/clarifications, or for review by the full board. The IRB Co-Chairs cannot “disapprove” of a protocol but may table action pending further information/clarifications. The IRB Co-Chairs will inform the PI of its actions. Any disagreement between the PI and the IRB Co-Chairs must be resolved by the IRB.

The PI will be notified of the IRB decision by the Co-Chairs.

If it is determined that one of these protocols require IRB review, it will be returned to the PI, with comments, for revision and submission to the full board. Upon receipt of the material from the PI, the IRB Co-Chairs will distribute copies to each IRB member.

## 2. More Than Minimal Risk

Protocols for **full-board (IRB) review** must be submitted three weeks (21 days) prior to the proposal or study deadline. The prospective PI will submit the “Full-Board” form using the District’s IRB electronic submission process. The forms are available via the [Institutional Review Board website](#). In the Petition, the investigator assures the IRB that he/she will follow the principles, procedures and guidelines established in the present document and agrees to allow the IRB access to pertinent records or research. In addition, the investigator should present any information that will aid in evaluating the proposal for compliance with this policy.

The PI must be available to discuss the protocol and/or consent forms at the discretion of the IRB.

## 3. Actions of the IRB:

The IRB may take one of the following four actions in regard to the proposed protocol and consent form: *Approved, Approved Subject to Restrictions, Tabled, or Disapproved.*

### *Approved*

When a protocol has been approved, the Co-Chairs complete the “Action of the IRB” form, signs and dates it, and distributes one copy of the form to the principal investigator, the IRB files, and, if appropriate, the performance site.

Approval of the protocol will be based on the following:

- a. The extent to which the protocol makes explicit in design and procedures the protection of subjects’ rights.
- b. Should a degree of deception and/or withholding of information be necessary for adequate testing of the hypotheses and in the absence of any practical alternative, sufficient justification that the potential benefits to the subject or the importance of the knowledge to be gained outweighs any potential risks that may be present as a result of any such deception.
- c. Assurances of acceptable debriefing, if appropriate.

It is the responsibility of the PI to give each subject an explanation to questions ensuing from participation in the research project following its

conclusion. It is strongly recommended that this occur immediately following participation for each subject, but if, in the judgment of the IRB, such information could adversely affect subsequent data collection in the same study, the full explanation may be delayed for a reasonable period of time.

There is an exception to this delay: In those cases in which it is unavoidable to mislead the subjects and/or in which it is possible that the experimental treatment may result in emotional stress for the subjects, it is mandatory that they receive a full debriefing immediately following participation.

d. The adequacy of facilities and other resources necessary for completion of the study and protection of subjects' rights.

e. Anticipated benefits, if any.

f. The personal risk to the subject in relation to expected benefits.

g. The adequacy of procedures for securing informed consent from the subject.

h. The adequacy of measures for minimizing of risk and the protection of the health, safety, comfort, and legal rights of the subject.

i. The adequacy of measures for protecting the privacy of subjects and maintaining confidentiality of data.

#### *Approved Subject to Restrictions*

If the protocol is approved subject to restrictions, then the Co-Chairs complete the appropriate form, sign and date it, and send the form with a memo to the PI outlining the restrictions using the District's electronic submission process. The PI then must respond to the restrictions as indicated by the IRB. Upon receipt and approval of the responses, the restrictions are removed and the protocol is then processed as an approved protocol and distributed as described above.

#### *Tabled*

Tabled action means that the protocol was not sufficiently complete for the IRB to reach a final decision. In this case, the PI is notified by the Co-Chairs of the IRB and the additional information necessary for completion of the IRB review is requested. In the case of a tabled protocol, the PI may be invited to attend an IRB meeting to present/clarify the protocol for the Board.

#### *Disapproved*

If the protocol is disapproved, the PI will be informed in writing of the reasons for disapproval. The PI may revise and resubmit his/her protocol for another review.

## B. Continuing Review.

The IRB may conduct continuing review of research at intervals appropriate to the degree of risk, but not less than once per year. Principal Investigators will be informed of the annual review by receipt of a Continuing Review Questionnaire. This Continuing Review Questionnaire is to be completed and returned electronically using the District's electronic submission process along with the informed consent document currently in use with the project being reviewed. The PI will be notified of the action taken (e.g., Approved, Approved Subject to Restrictions, etc.).

When a Continuing Review request is submitted, the IRB Co-Chairs shall consider the following: changes to the research, protocol deviations and violations, since the last scheduled review; adverse event reports; reports of unanticipated problems involving risks to subjects and, if available, data safety monitoring reports; and investigator compliance.

If the protocol and/or other documents used in the project have been amended within the past five years, the PI will be requested to submit a new protocol incorporating these amendments if such have not previously been submitted.

Pursuant to OHRP guidelines, the IRB approval period may be held constant from year to year throughout the life of each project. When continuing review occurs annually and the IRB performs continuing review within 30 days before the IRB approval period expires, the IRB may retain the anniversary date as the date by which the continuing review must occur. However, if an investigator has failed to provide continuing review information to the IRB or the IRB has not reviewed and approved a research study by the continuing review date specified by the IRB, the research must stop, unless the IRB Co-Chairs find that it is in the best interests of individual subjects to continue participating in the research interventions or interactions, and this finding is ratified at the next convened IRB meeting. However, after the expiration of IRB approval, the protocol will be considered closed and enrollment of new subjects cannot occur nor can any data collected be used for research purposes.

## C. Procedures Pertaining to both Initial and Continuing Review.

1. The IRB shall have authority to determine which studies need verification from sources other than the investigators that no material changes have occurred since previous IRB review, particularly: (i) complex projects involving unusual levels or types of risk to subjects; (ii) projects conducted by investigators who previously have failed to comply with the requirements of the HHS regulations or the requirements or determinations of the IRB; and (iii) projects where concern about possible material changes occurring without IRB approval have been raised based upon information provided in continuing review reports or from other sources.

2. PIs shall be informed at the time of protocol approval (both initial and continuing) that changes in approved research may not be initiated without IRB review and approval except where necessary to eliminate apparent immediate hazards to subjects;

3. PIs shall be informed at the time of protocol approval (both initial and continuing) that any serious or on-going problems are to be reported promptly to the IRB.

4. Serious or continuing noncompliance by an investigator, or any suspension or termination of activities, is to be reported promptly to the Assistant Superintendent/Vice President of Institutional Development, Technology and Online Services so that appropriate remedial action can be taken, including, but not limited to, appropriate reporting to the granting agency.

#### D. Adverse Event Reporting Guidance.

1. The Office of Human Research Protections (OHRP) recognizes that any adverse event in a trial is a potentially important occurrence because it may reflect additional risks to subjects. In accordance with their requirements, these regulatory bodies have charged Institutional Review Boards with the responsibility of conducting continuing review of research. Included in this review is the monitoring of adverse reactions and unexpected events (21 CFR 56.108 and 45 CFR 46.103).
2. Principal Investigator(s) and any District employee will report to the Co-Chairs of the IRB Committee any of the following upon knowledge of such:
  - a. Unanticipated problems involving risks to subjects or others; and
  - b. Serious or continuing noncompliance with the federal regulations or the requirements or determinations of the IRB.

### **IX. OPERATIONS OF THE IRB.**

A. IRB meetings are scheduled as required.

B. The place and time of meeting, agenda, and study material to be reviewed are distributed to IRB members at least seven (7) days prior to the meeting.

C. All proposals seeking exemption or expedited review will be reviewed by all committee members with exception of special circumstances in which the next meeting date for the Committee is not within the deadline of the project's start date. Under this exception, the one or both Co-Chairs has the authority to review all exempt and expedite reviews. For all full-board reviews, the IRB Co-Chairs assign one primary reviewer and at least one secondary reviewer for each new protocol that is submitted for full-board review, who receive the complete study documentation for review. The primary reviewer is assigned consistent with protocol content and reviewer expertise. Secondary reviewer(s) may be assigned using additional factors such as their ability to provide a valuable perspective on salient non-scientific aspects of the research. The reviewers, who are assigned based on

their expertise, lead the discussion of that protocol. Other IRB members review summary information only, but have access to complete study documentation upon request. If external reviewers are also assigned, they must be subject to the same conflict of interest policies as IRB members.

#### D. Voting requirements

1. Except when an expedited review procedure is used, a quorum of the IRB, duly convened through written notice, shall be a majority of voting members with varying backgrounds to promote complete and adequate review of research activities, including at least one member whose primary concerns are in nonscientific areas.
2. In order for the research to be approved, it shall receive the approval of a majority of those voting members present at the meeting. IRB meetings conducted via telephone conference call are permitted pursuant to OHRP guidelines.
3. Principal Investigators, including those who are also IRB members, may offer information and answer questions about their protocols at a convened meeting, but may not be present during voting (even if this means being unable to continue the meeting because of quorum requirements).
4. Although convened meetings of the IRB are open to the public, materials submitted for review, discussions of protocols, and individual votes are considered confidential and should not be discussed outside of the meeting context. If during an IRB meeting the Co-Chairs move the meeting to executive session then any visitors will be asked to leave the room until the executive session has ended.

#### E. Appeals

The PI may appeal the decision of the IRB when a protocol has been disapproved or approved subject to restrictions and mutual agreement cannot be reached as to an acceptable alternative. Upon written notification of appeal from the PI, the IRB shall name an *ad hoc* committee of three or more faculty and/or consultants to review the protocol a second time. The *ad hoc* committee members must be acceptable to both the PI and the IRB. The protocol will be reviewed in accordance with the guidelines established herein and the decision of the *ad hoc* committee will be referred to the IRB. The PI will be promptly notified of actions of the *ad-hoc* committee and final action by the IRB. Final disapproval of the IRB cannot be overridden by any institutional official.

#### F. Amendments

1. Amendments are categorized into minor changes and significant changes.

**Minor modification/change** - A proposed change in research related activities that does not significantly affect an assessment of the risks and benefits of the study and does not substantially change the specific aims or design of the study.

**Significant modification/change** - A proposed change in research related activities that significantly affects an assessment of the risks and benefits of the study or substantially changes the specific aims or design of the study.

Examples of **minor changes** to a research study include but are not limited to, the following:

- Addition or deletion of study team members;
- Addition of procedures that do not significantly increase risk to subjects, considering the original purpose and study design of the approved study;
- Removal of research procedures that would thereby reduce the risk to subjects;
- Addition of non-sensitive questions to unvalidated survey or interview procedures;
- Addition of or revisions to recruitment materials or strategies;
- Administrative changes to the approved documents (e.g., correction of spelling, grammatical or typographical errors).

Examples of **significant changes** to a study may include, but are not limited to, the following:

- Addition of a new and/or separate subject population (e.g., control group, additional cohort, vulnerable population, etc.);
- Addition of research procedures that involve greater than minimal risk to subjects;
- Addition of surveys/questionnaires/interview procedures that could have adverse psychological consequences for subjects or damage their financial standing, employability, insurability, or reputation;
- Removal of follow-up visits that appear necessary for monitoring subject safety and welfare.

## **2. Level of Review for Amendments**

Significant modifications/changes will generally be reviewed at the same level of review in which the study was first reviewed, either by the screening committee or by the full IRB. However, if an amendment by the screening committee is determined to increase the level of risk beyond minimal risk, the screening committee will refer the amendment to the full IRB.

Minor modifications/changes may be reviewed and approved using an “administrative approval” process. Administrative approval may be given by the IRB Coordinator. Such approvals are then put on the agenda of the next IRB or screening committee, as appropriate, for concurrence.

## **3. Sponsor Agency Modifications**

Modifications can be made only to IRB approved studies. A sponsor agency may modify the research protocol before the study has received final approval from the IRB. If this occurs, it is recommended that investigators await receipt of the IRB approval letter before making changes to the research protocol.

Sponsor agency generated modifications (or addenda) require review and approval by the IRB or Screening Committee, as appropriate. The investigator should provide all sponsor documentation and summarize how the changes affect the approved protocol, recruitment, enrollment, treatment and follow-up of participants.

#### G. Grievances

The IRB shall be informed of all grievances (e.g., of a research subject against a PI) and, if requested, the board will act in an advisory capacity.

#### H. Cooperative Activities

Cooperative activities relating to human subjects are those which involve the Santa Clarita Community College District and another institution. Normally, the research must be reviewed and approved by the IRBs at both institutions before it can be initiated. However, the IRB of one institution may rely on the IRB of the other institution under the following conditions:

1. Both institutions have Federalwide Assurances (FWAs) approved by OHRP;
2. Both institutions have entered into an Authorization Agreement (or equivalent document) that stipulates the responsibilities of both parties; and
3. The appropriate section of the FWA of the deferring institution designates the IRB of the approving institution.

In the absence of these conditions, the PI must secure the approval of the IRB at each institution engaged in the research and submit documentation of such approvals to the other IRBs. The IRB Co-Chairs will verify (via the OHRP website) that the other institutions have approved FWAs.

### **X. RECORD REQUIREMENTS.**

A. The IRB prepares and maintains adequate documentation of IRB activities, including the following:

1. Copies of all research proposals reviewed, approved sample consent documents, and continuing reports submitted by investigators.
2. Detailed minutes of IRB meetings, showing:
  - a. Members present (any consultants/ guests/others shown separately).
  - b. Results of discussions on debated issues and record of IRB decisions.



c. Record of voting (showing votes for, against and abstentions).

3. Records of continuing review activities, updated consent documents and summaries of on-going project activities. Consent documents are stamped to show IRB approval and date of approval expiration.

4. Copies of all correspondence between IRB and the investigators.

5. Any statements of significant new findings (unanticipated risks or adverse reactions) provided to subjects.

6. Adverse reactions reports and documentation that the IRB reviews such reports.

7. Emergency use reports.

8. General project information provided to subjects (e.g., fact sheets, brochures).

These documents and records shall be retained for at least three (3) years after completion of the research, and the records shall be accessible for inspection and copying by authorized representatives of the Department of Health and Human Services, the Food and Drug Administration, the Department of Veterans Affairs, and other federal regulatory agencies, at reasonable times and in a reasonable manner.

In addition, the IRB maintains a permanent record of the list of current IRB members, written procedures for the IRB, and self-assessments.

B. All forms submitted or retained as evidence of informed consent must be preserved by the investigator indefinitely. Should the PI leave the District, signed consent forms are to be transferred to the IRB Co-Chairs.

## **XI. INFORMATION THE INVESTIGATOR PROVIDES TO THE IRB.**

A. Professional qualifications to do the research (including a description of necessary support services and facilities);

B. Appropriate District review form including protocol summary.

C. Complete study protocol which includes/addresses:

1. Title of the study and summary of the research to be conducted,

2. Purpose of the study (including the expected benefits obtained by doing the study and how risks are reasonable in relation to expected benefits),

3. Sponsor of the study,

4. Subject inclusion/exclusion criteria (including scientific and ethical reasons for excluding subjects who might otherwise benefit from the research),
5. Justification for use of any special/vulnerable subject populations (such as children [under age 18], prisoners, or handicapped, economically/educationally disadvantaged, or mentally disabled persons),
6. Study design (including, as needed, a discussion of the appropriateness of research methods),
7. Description of procedures to be performed,
8. Provisions for managing adverse reactions,
9. Circumstances surrounding consent procedure, including setting, subject autonomy concerns, language difficulties, vulnerable populations,
10. Procedures for documentation of informed consent, including any procedures for obtaining assent from minors ('minor' is defined in Ohio as an individual under the age of 18), using legally authorized representatives (see XII.B.&C.), witnesses, translators and document storage,
11. Remuneration to subjects for their participation,
12. Any compensation for injured research subjects,
13. Provisions for protection of subject's privacy,
14. Extra costs to subjects for their participation in the study,
15. Inclusion/exclusion of women, minorities, and/or children;

D. Investigator's brochure (when one exists);

E. The case report form (when one exists);

F. The proposed informed consent document, including translated consent documents, as necessary, considering likely subject population(s); or request for waiver of the requirement to obtain informed consent;

G. Copies of advertisements and surveys, questionnaires, or other materials provided to subjects;

H. Copies of relevant grant applications (if any);

I. Requests for changes in study after initiation including changes to consent forms;

J. Reports of unexpected adverse events and unanticipated problems involving risks to subjects, including, if available, data safety monitoring reports;

K. Progress/interim reports that include reports of protocol violations and/or deviations and any other instances of investigator non-compliance.

## **XII. PRINCIPLES OF INFORMED CONSENT.**

A. When an activity does not involve therapy, diagnosis, or management, and a professional/subject relationship exists, e.g., participation in a research project, the subject is entitled to certain information. This information includes a full and frank disclosure of all the facts, probabilities, options, and opinions which a reasonable person might be expected to consider before giving his/her consent. A copy of the signed consent form must be given to the person signing the form and a copy must be kept on file with the investigator or District as indicated below.

B. The informed consent of subjects will be obtained by methods that are adequate and appropriate. Consent must be obtained from the subjects themselves except when the subjects are not legally capable of giving informed consent because of age, mental incapacity, or inability to communicate. In the case of a minor, the IRB may accept the permission of the minor's parents (or parent) or legal guardian, along with the assent of the minor, in accordance with applicable federal regulations. In the case of other subjects not legally capable of giving informed consent, the IRB may accept the consent from a legally authorized representative ("LAR"). The LAR must be authorized either by a power of attorney or a court order.

C. "Informed consent" means insuring that potential subjects and/or their legally authorized representatives are fully informed of all aspects of their participation in a research project so as to be able to exercise free power of choice without undue inducement or any element of force, fraud, deceit, duress, or other form of constraint or coercion. The basic elements of information necessary to such consent are found at <http://ohrp.osophs.dhhs.gov/humansubjects/guidance/45cfr46.htm#46.116>.

The IRB may approve a telephonic consent procedure under which the subject's legally authorized representative ("LAR") is sent a faxed or hand-carried version of the informed consent document, a consent interview is conducted by phone while the LAR has the document in hand, and the LAR signs and returns the signed document to the investigator by return fax (or courier) before the subject is enrolled in the study. In cases where this process is used, a witness who is not connected to the study (e.g., as an investigator, coordinator, etc.) should monitor the consent process.

D. The IRB shall determine whether the consent is adequate in light of the risks to the subject and the circumstances of the research. The IRB shall also determine whether the information to be given to the subject or to qualified third parties, verbally or in writing, is a fair explanation of the procedure, its possible benefits, and its attendant hazards. Where

debriefing procedures are considered as a necessary part of the research plan, the IRB will ascertain that any such debriefings will be complete and prompt. In addition, the language used should be clear and unambiguous with every attempt to eliminate technical terms and jargon (i.e., use lay language appropriate to the subject population).

E. For research involving more than minimal risk to subjects or if determined by the IRB during the ordinary review process to involve more than minimal risk, a compensation for injury statement will be required in the consent form. This statement should clarify who is responsible for any costs associated with any medical treatments required or any personal compensation for injuries received as a result of participation in the research.

F. Some research may not impose on the rights and welfare of human subjects so as to make informed consent a requirement. Therefore, the IRB may choose to waive the requirement to obtain a signed consent form for some or all subjects in some cases when it finds either:

1. That the only record linking the subject and the research would be the consent document and the principal risk would be potential harm resulting from a breach of confidentiality. Each subject will be asked whether the subject wants documentation linking the subject with the research, and the subject's wishes will govern; or
2. That the research presents no more than minimal risk of harm to subjects and involves no procedures for which written consent is normally required outside of the research context. In cases where the documentation requirement is waived, the IRB may require the investigator to provide subjects with a written statement regarding the research (e.g., a cover letter). Examples of such research where use of a cover letter is generally appropriate are collecting data by survey or interview.

Any waiver of documentation by the IRB must be based upon clearly defensible grounds. A request for waiver of documentation by the PI must include justifiable reasons in the protocol.

The IRB may also choose to approve a consent procedure which does not include, or which alters, some or all of the elements of informed consent, or waive the requirements to obtain informed consent provided the IRB finds and documents that:

- (1) The research involves no more than minimal risk to the subjects;
- (2) The waiver or alteration will not adversely affect the rights and welfare of the subjects;
- (3) The research could not practicably be carried out without the waiver or alteration; and
- (4) Whenever appropriate, the subjects will be provided with additional pertinent information after participation.

G. Informed consent need not be based on full pre-study information. However, it is the responsibility of the IRB to set limits on the incompleteness of such information. Further, in those studies in which it is proposed to mislead the subjects during data collection, the IRB has the responsibility of assessing the degree to which this violates the rights of the subjects, and then setting the limits for such procedures.

### **XIII. CONFLICT OF INTEREST GUIDELINES FOR IRB MEMBERS.**

A. An IRB member is said to have a conflicting interest whenever that IRB member, or spouse, or dependent child of the member:

1. Is an investigator or sub-investigator on the protocol;
2. Has a “significant financial interest” in the sponsor or agent of the sponsor of a study being reviewed by the IRB, whereby the outcome of the study could influence the value of the financial interest;
3. Acts as an officer or a director of the sponsor or an agent of the sponsor of a study being reviewed by the IRB; or
4. Has identified him or her self for any other reason as having a conflicting interest.

B. It is the responsibility of each IRB member to identify and avoid any situations in which he or she, either personally or by virtue of their position, might have a conflict of interest, or may be perceived by others as having a conflict of interest, arising in connection with a matter before an IRB of which they are a member. If assigned as a reviewer for a matter with which the IRB member feels that he or she may have a conflict of interest, the IRB member must notify the IRB Co-Chairs immediately so the matter may be reassigned to another reviewer. In order not to delay the review process, it is essential that potential reviewers peruse the matters for which they are assigned reviewers immediately upon receipt to determine whether they may have a conflict.

C. Typically, there are three distinct phases of an IRB's consideration of a matter: discussion, deliberation and actions (including vote). In general, IRB member(s) who have a real, or perceived conflict of interest may remain in the meeting room, at the discretion of the IRB Chair, during the discussion of the matter, in order to provide answers to questions, clarifications, etc. However, said member must leave the meeting room for deliberations and actions/votes regarding the matter.

D. Minutes of IRB meetings will reflect the absence of a member (by name) when he or she leaves the meeting during deliberations and actions regarding matters for which they have, or may be perceived to have, a potential conflict of interest.



## BP 2330 Quorum and Voting

### References:

Education Code Sections 15266, 72000 subdivision (d)(3), 81310 et seq., **81360**, 81365, 81511, and 81432;  
Government Code Sections 53094 and 54950 et seq.;  
Code of Civil Procedure Section 1245.240;  
~~California Constitution Article XIII A, Section 1, subdivision (b), paragraph (3) and Article XVI, Section 18, subdivision (b)~~

A quorum of the Board of Trustees shall consist of a simple majority, three (3) members.

The Board of Trustees shall act by majority vote of all of the membership of the Board of Trustees, except as noted below.

No action shall be taken by secret ballot. The Board of Trustees will publicly report any action taken in open session and the vote or abstention of each individual member present.

The following actions require a two-thirds (2/3) majority of all members of the Board of Trustees:

- ~~• Resolution of intention to sell or lease real property (except where a unanimous vote is required);~~
- ~~• Resolution of intention to dedicate or convey an easement;~~
- ~~• Resolution authorizing and directing the execution and delivery of a deed;~~
- ~~• Action to declare the District exempt from the approval requirements of a planning commission or other local land use body;~~
- ~~• Appropriation of funds from an undistributed reserve;~~
- ~~• Resolution to condemn real property;~~
- ~~• Resolution to pursue the authorization and issuance of bonds pursuant to paragraph (3) of subdivision (b) of Section 1 of Article XIII A of the California Constitution and subdivision (b) of Section 18 of Article XVI of the California Constitution.~~
- Resolution of intention to sell or lease District real property, which is not or will not be needed by the District for school classroom buildings (except where a unanimous vote is required);
- Resolution of intention to dedicate or convey an easement;
- Resolution authorizing and directing the execution and delivery of a deed;
- Action to declare the District exempt from the approval requirements of a planning commission or other local land use body;
- Appropriation of funds from an undistributed reserve;
- Resolution to condemn real property;
- Resolution to pursue the authorization and issuance of bonds pursuant to paragraph (3) of subdivision (b) of Section 1 of Article XIII A of the California Constitution and subdivision (b) of Section 18 of Article XVI of the California Constitution.



The following actions require a unanimous vote of all members of the Board of Trustees:

- Resolution authorizing a sale or lease of District real property to the state, any county, city, or to any other school or community college district;
- Resolution authorizing lease of District property under a lease for the production of gas.

Also see BP 2310 Regular Meetings of the Board.

Adopted: 7/5/05



Reviewed: 8/8/16  
Revised: 5/13/19  
Revised: 9/9/19





## BP 3300 Public Records

### References:

Government Code Sections ~~6250~~ 7920.000 et seq.

The Superintendent/President shall establish procedures for records management, including access by the public that comply with the requirements of the California Public Records Act.

Also see AP 3300 Public Records and BP/AP 3310 Records Retention and Destruction.

Adopted: 11/7/05  
Reviewed: 11/14/16  
Reviewed: 12/12/16  
Revised: 1/13/19

[CCLC Recommended Language](#)  
[AVC Recommended Language](#)



## AP 3300 Public Records

### References:

Government Code Section ~~6250~~ 7920.000 et seq.; Penal Code Sections 832.7 and 832.8

Members of the public may request to inspect or copy public records. A request by a member of the public may be delivered by mail, **email**, or in person to the Office of the Superintendent/President or designee.

Any request shall identify with reasonable specificity the records that are sought. If additional information is needed, the Superintendent/President or designee may request it be provided in writing.

Any request to inspect records shall be made sufficiently in advance of the date of inspection to allow staff time to assemble the records and identify any records that may be exempt from disclosure.

Records that are exempt from disclosure under the Public Records Act or any other provision of law may not be inspected or copied by members of the public. Social security numbers must be redacted from records before they are disclosed to the public.

Members of the public shall be assisted in identifying records or information that may respond to their request. Assistance that will be provided includes: the information technology and physical location in which the records exist; practical suggestions for overcoming denial of access to the records or information; and the estimated date and time when the records will be made available.

Within ten days, the Superintendent/President or designee will determine whether or not the records can be produced and will communicate the determination to the member of the public requesting the record(s).

*The most common exemptions for community colleges include:*

- Student records (Education Code Section 76243)
- Preliminary drafts, notes, or interagency or intra-agency memoranda that are not retained by the public agency in the ordinary course of business, provided that the public interest in withholding the records clearly outweighs the public interest in disclosure. (Government Code Section ~~6254(a)~~ 7927.500)
- Records pertaining to pending litigation ...or to claims...until the pending litigation or claim has been finally adjudicated or otherwise settled. (Government Code Section ~~6254(b)~~ 7927.200)

- Personnel, medical or similar files, the disclosure of which would constitute an unwarranted invasion of personal privacy (Government Code Section ~~6254(c)~~ 7927.700)
- Test questions, scoring keys, and other examination data used to administer a licensing examination, examination for employment, or academic examination [except for standardized tests provided for by Education Code Sections 99150 et seq.]. (Government Code Section ~~6254(g)~~ 7929.605)
- The contents of real estate appraisals or engineering or feasibility estimates and evaluations...relative to the acquisition of property, or to prospective public supply and construction contracts, until all of the property has been acquired or all of the contract agreement obtained. (Government Code Section ~~6254(h)~~ 7928.705).
- Internet posting of home address or telephone numbers of local elected officials (Government Code Section ~~6254.24~~ 7928.205)
- Home addresses and home telephone number of employees of a school District or county office of education (other than to an agent or family member of the employee, to an officer of another school District, when necessary, to an employee organization, or to an agency or employee of a health benefit plan.) (Government Code Section ~~6254.3~~ 7928.300)
- ~~Personal email addresses (other than to an agent or family member of the employee, to an officer of another school district when necessary, to an employee organization, or to an agency or employee of a health benefit plan) unless the email address is used by the employee to conduct public business, or necessary to identify a person in an otherwise disclosable communication. (Government Code Section 7928.300 subdivision (b))~~
- Records regarding alternative investments (i.e. an investment in a private equity fund, venture fund, hedge fund, or absolute return fund; limited partnership, limited liability company or similar legal structure) involving public investment funds, unless already publicly released by the keeper of the information.
- Information security records, if disclosure of these records would reveal vulnerabilities to, or otherwise increase the potential for an attack on, the District's information technology system.
- ~~Identification number, alphanumeric character, or other unique identifying code that a district uses to identify a vendor or contractor, or an affiliate of a vendor or contractor, unless the identification number, alphanumeric character, or other unique identifying code is used in a public bidding or an audit involving the public agency. (Government Code Section 7928.715)~~

The District will comply with the provisions of Penal Code Sections 832.7 and 832.8 regarding the disclosure of specified peace officer and custodial officer personnel records when responding to Public Records Act Requests.

The Public Records Guidelines can be viewed at:

[https://www.avc.edu/sites/default/files/information/Guidelines\\_Record\\_Request.pdf](https://www.avc.edu/sites/default/files/information/Guidelines_Record_Request.pdf)

11/7/05

Revised: 5/8/06

Revised: 5/12/08

Revised: 10/10/11

Revised: 12/12/16

Revised:

CCLC Recommended Language

AVC Recommended Language



## BP 3518 Child Abuse Reporting

### References:

~~Penal Code Sections 261, 264.1, 273a, 273d, 285, 286, 288, 288a, 289, 647a, and 11164-11174.3;~~

~~Welfare and Institutions Code Sections 300, 318, and 601;~~

~~Family Code Sections 7802, 7807, 7808, 7820-7829, 7890, and 7892.~~

**Penal Code Sections 11164 et seq.**

The Superintendent/President shall establish procedures related to the responsibility of employees, within the scope of employment or in their professional capacity, to report suspected abuse and neglect of children.

Also see AP 3518 Child Abuse Reporting.

Adopted: 11/7/05  
Revised: 5/12/08  
Reviewed: 12/12/16  
Revised: 1/13/20



## AP 3518 Child Abuse Reporting

### References:

~~Penal Code Sections 261, 264.1, 273a, 273d, 285, 286, 288, 288a, 289, 647a, and 11164-11174.3;~~

~~Welfare and Institutions Code Sections 300, 318, and 601;~~

~~Family Code Sections 7802, 7807, 7808, 7820-78297, 7890, and 7892.~~

**Education Code Sections 76200 et seq. and 87044;**

**Penal Code Sections 11164 et seq.**

The Antelope Valley Community College District recognizes the responsibility of its staff to report to the appropriate agency when there is a reasonable suspicion that an abuse or neglect of a child may have occurred. Mandated reporters include faculty, educational administrators and classified staff. Volunteers are not mandated reporters, but are encouraged to report suspected abuse or neglect of a child.

Child abuse is defined as physical abuse, neglect, sexual abuse and/or emotional maltreatment. This procedure addresses the sexual assault, sexual exploitation, and/or sexual abuse of a child; the willful cruelty or unjustifiable punishment of a child; incidents of corporal punishment or injury against a child; abuse in out-of-home care; and the severe and/or general neglect of a child (definitions contained in Penal Code Section 11165).

“Reasonable suspicion” occurs when “it is objectively reasonable for a person to entertain such a suspicion, based upon facts that could cause a reasonable person in a like position drawing when appropriate on his/ her training and experience, to suspect child abuse” (Penal Code Section 11166 subdivision [a]).

A child protective agency is a police or sheriff's department, a county probation department, or a county welfare department. School district police, Community College Police departments, or security departments are not child protective agencies (Penal Code Section 11165.9).

Any person not mandated by law to report suspected child abuse has immunity unless the report is proven to be false and the person reporting knows it is false, or the report is made with reckless disregard of the truth or falsity of the incident (Penal Code Section 11172 subdivision (a)). Reporting is an individual responsibility. An employee making a report cannot be required to disclose his/ her/ **their** identity to the employer (Penal Code Section 11166 subdivision (h)). However, a person who fails to make a required report is guilty of a misdemeanor punishable by up to six (6) months in jail and/or up to a \$1,000 fine (Penal Code Section 11172 subdivision (e)).



Mandated reporters must report immediately any reasonable suspicion of child abuse to a local child protective agency and follow up with a written report within thirty-six (36) hours. Students who will receive college credit for coursework are mandated reporters while volunteers are not. The written report may be mailed or submitted by facsimile or electronic transmission.

Child abuse reporting forms are available in the Antelope Valley Community College Campus Sheriff's Office in the T800.

No mandated reporter who reports a known or suspected instance of child abuse shall be civilly or criminally liable for any report required or authorized by the Penal Code. Any person other than a child care custodian reporting a known or suspected instance of child abuse shall not incur any liability as a result of making any report of child abuse, unless it can be proven that a false report was made and the person knew that the report was false. (Penal Code Section 11172 subdivision (a))

When an official of AVC releases a minor pupil to a peace officer for the purpose of removing the minor from the campus, the district official shall take immediate steps to notify the parent or guardian regarding the release of the minor to the officer, and regarding the place to which the minor is reportedly being taken (Education Code Section 87044), except when a minor has been taken into custody as a victim of suspected child abuse, as defined in Penal Code Section 11165 or pursuant to Welfare and Institutions Code Section 305. In those cases, the official shall provide the peace officer with the address and telephone number of the minor's parent or guardian.

Non-accidental physical injury is considered to be a health and safety emergency, and parental consent is not required for release of student information under the Family Education Rights and Privacy Act, or the California Student Records Act (Education Code Sections 76200 et seq.).

Information relevant to the incident of child abuse may be given to an investigator from a child protective agency who is investigating the known or suspected cause of child abuse (Penal Code Section 11167 subdivision (b)).

The Antelope Valley Community College District shall provide a mandated reporter with a statement informing the employee that he/she/**they** is a mandated reporter and inform the employee of his/her reporting obligations under Penal Code Section 11166 and of his/ her/**their** confidentiality rights under subdivision (d) of Penal Code Section 11167. The Antelope Valley Community College District shall provide a copy of Penal Code Sections 11165.7, 11166, and 11167 to the employee. Prior to commencing his/ her/**their** employment and as a prerequisite to that employment, employee shall sign and return the statement to the Antelope Valley Community College District. The signed statements shall be



retained by the Antelope Valley Community College District (Penal Code Section 11166.5).

The District will distribute this procedure to all employees.

Also see BP 3518 Child Abuse Reporting.

Approved: 11/7/05  
Revised: 5/8/06  
Revised: 1/8/07  
Revised: 4/14/08  
Revised: 4/11/16  
Reviewed: 12/12/16  
Revised: 12/9/19



# BP 5500 Standards of **Student Conduct**

## References:

*Education Code Sections 66300, 66301, and 76120;*  
*ACCJC Accreditation Standard 11.C.8. and 10A.2*

## Section 1 - General Provisions

The Superintendent/President shall establish procedures for the imposition of discipline on students in accordance with the requirements for due process of the federal and state law and regulations.

The procedures shall clearly define the conduct that is subject to discipline, and shall identify potential disciplinary actions, including but not limited to the removal, suspension, or expulsion of a student.

The Board of Trustees shall consider any recommendation from the Superintendent/President for expulsion. The Board shall consider an expulsion recommendation in closed session unless the student requests that the matter be considered in a public meeting. Final action by the Board on the expulsion shall be taken at a public meeting.

The procedures shall be made widely available to students through the college catalog and other means.

The following conduct shall constitute good cause for discipline, including but not limited to the removal, suspension, or expulsion of a student, except for conduct that constitutes sexual harassment under Title IX, which shall be addressed under BP 3433 Prohibition of Sexual Harassment under Title IX.

- .1 The Board of Trustees of the Antelope Valley Community College District expects students to conduct themselves in a manner consistent with the educational purposes of the college. Student conduct must reflect the standards of behavior as defined in pursuant sections (Education Code Section 76030 - 76037). Student conduct should reflect consideration for the rights of others and students are expected to cooperate with all members of the college community.
- .2 Students shall also respect federal and state laws, board regulations, college regulations, and applicable provisions of civil law.
- .3 College personnel are responsible for communicating appropriate student conduct and for reporting violations thereof. The ~~vice president of student services~~ Director of Student Development/Conduct Officer or designee has the right to administer suitable and proper corrective measures for misconduct .
- .4 Nothing in this article shall be construed to limit the authority of the board of trustees to adopt additional rules and regulations as long as they are not inconsistent with the requirements of this article. These additional rules may, among other things, prescribe specific rules and regulations governing student behavior, along with applicable penalties for violations of the adopted rules and regulations, and may clarify appropriate due process procedures, including procedure by which students shall be informed of these rules and regulations. (CA Ed. Code 76037).
- .5 A student may be removed, suspended, or expelled only for conduct associated

with college activities or college attendance. Students may be disciplined for harassment, threats, or intimidation, unless constitutionally protected. Violation of any law, ordinance, regulation or rule pertaining to the parking of vehicles shall not be cause for suspension or expulsion of a student from the college. (CA Ed. Code 76034, 66301(d)).

- .6 A student may be suspended by the board of trustees, the college president, or vice president of student services or [Director of Student Development/Conduct Officer](#) for *good cause*, or when the presence of the student causes a continuing danger to the physical safety of the student or others. The board of trustees may exclude students of filthy or vicious habits, or students suffering from contagious or infectious diseases, or any student whose physical or mental disability is such as to cause his or her attendance to be inimical to the welfare of other students. (CA Ed. Code Sections 76020 and 76030).
- .7 "Good Cause" may be established by using appropriate investigation standards, such as:
  - a) Interview of witnesses.
  - b) Review of a Campus Security Report(s), if applicable.
  - c) Review of written statements, if applicable.
  - d) Review of pertinent documents, if applicable.
  - e) Review of any other evidence, if applicable.

## Section 2 - Guidelines for Student Conduct

Good cause includes, but is not limited to, the following offenses:

### .1 Academic Violations

~~a. Violation of the Academic Honesty Policy: Dishonesty, including but not limited to, cheating, or plagiarism. Plagiarism - from the Latin word for "kidnap" - involves using another's work without giving proper credit, whether done accidentally or on purpose. This includes not only words and ideas, but also graphs, artwork, music, maps, statistics, diagrams, scientific data, software, films, videos and the like. Plagiarism is plagiarism whether the material is from published or unpublished sources. It does not matter whether ideas are stolen, bought, downloaded from the Internet, or written for the student by someone else - it is still plagiarism. Even if only bits and pieces of other sources are used, or outside sources reworded, they must still be cited. To avoid problems, students should cite any source(s) and check with the instructor before submitting an assignment or project. **Students are always responsible for any plagiarism in their work.**~~

(a) Cheating, plagiarism (including plagiarism in a student publication), or engaging in other academic dishonesty.

Violation of the Academic Honesty Policy: Dishonesty, including but not limited to, cheating, or plagiarism. Plagiarism, from the Latin word for "kidnap", involves using another's work without giving proper credit, whether done accidentally or on purpose. This includes, but is not limited to, words and ideas, graphs, artwork, music, maps, statistics, diagrams, scientific data, software, films, videos, photography, and the like. Plagiarism is plagiarism whether the material is from published or unpublished sources, including Artificial Intelligence ("A.I."). It does not matter whether ideas are stolen, generated by A.I., bought, downloaded from the Internet, or written for the student by someone else - it is still plagiarism. Even if only bits and pieces of other sources are used, or outside sources reworded, they must still be cited. To avoid problems, students should cite any source(s) and check with the instructor before submitting an assignment or project; it is especially important that a student understands an instructor's individual A.I. policy. Students are always responsible for plagiarism in their work. An instructor who determines that a student has cheated or plagiarized has the right to assign any score or grade deemed appropriate by the instructor for the assignment or examination only. Instructors cannot drop the student from class or fail them from the class for a single violation of the Academic Honesty Policy.

An instructor who determines that a student has cheated or plagiarized has the right to give an "F" grade, or numerical equivalent, for the assignment or examination.

Antelope Valley College reserves the right to utilize electronic means to investigate possible academic violations. Enrollment in any class implies student agreement and consent that all assignments are subject to submission for textual similarity review to an electronic database. (Board Approved 6/21/04)

i. Violation of class assignments, examination rules, e.g., communicating or transferring information to another student, using any materials such as books, notes, etc., other than those expressly

allowed for the exam, looking at another student's exam, etc.

- (b) Unauthorized preparation, giving, selling, transfer, distribution, or publication, for any commercial purpose, of any contemporaneous recording of an academic presentation in a classroom or equivalent site of instruction, including but not limited to, handwritten or typewritten class notes, except as permitted by any college policy or administrative procedure.

## .2 General College Violations

- a) ~~Forgery, alteration, or misuse of college documents, records, identification, or knowingly furnishing false information to the college. Abuse of and/or tampering with the registration process.~~ Dishonesty, forgery, alteration or misuse of college documents, records or identification; or knowingly furnishing false information to the District.
- b) ~~Obstruction or disruption of teaching, research, administration, disciplinary procedures, or other college activities, including, but not limited to, its community service functions, or of other authorized activities on college premises.~~ Disruptive behavior, willful disobedience, habitual profanity or vulgarity, or the open and persistent defiance of the authority of, or persistent abuse of, college personnel.
- c) Engaging in expression which is obscene, libelous or slanderous, or which so incites students as to create a clear and present danger of the commission of unlawful acts on college premises, or the violation of lawful ~~college~~ District administrative procedures, or the substantial disruption or the orderly operation of the college.
- d) Unauthorized entry ~~into or use of college~~ upon or use of college facilities. ~~supplies, equipment, and or facilities.~~
- e) Violation of college policies or of campus regulations including, but not limited to, campus regulations concerning student organizations, the use of college facilities, or the time, place, and manner of public expression, library procedures, college bills, debts, and parking.

- (f) ~~Theft of, or damage to, property of the college, or of a member of the college community, or campus visitor, or knowingly receiving stolen college or private property on campus.~~ Stealing or attempting to steal District property or private property on campus or knowingly receiving stolen District property or private property on campus.
- (g) Causing or attempting to cause damage to District property or to private property on campus.
- (h) Use of personal portable sound amplification equipment and other electronic devices (radios, cell telephones, pagers, and tape players, etc.) in a manner that disturbs the privacy of other individuals and/or the programs of the college.

### .3 Computer Usage Violations

Theft or abuse of computer resources, including, but not limited to:

- a) Unauthorized access to a file, database, or computer to use, read, or change the contents, or for any other purpose.
- b) Unauthorized transfer of a file.
- c) Unauthorized use of another person's identification and password.
- d) Use of computing facilities to interfere with the work of another student, faculty member, or college official.
- e) Use of computing facilities to send obscene or abusive messages, or to defame or intentionally harm other persons.
- f) Use of computing facilities to interfere with normal operation of the college computing system.
- g) Use of computing facilities for student's personal financial gain or for solicitation of any kind.
- h) Violation of applicable AVC "Computer Use Guidelines."

### .4 Behavior Violations

- (a) ~~Disorderly, lewd, indecent or obscene conduct, or habitual profanity or vulgarity on college-owned or controlled property, or at college-sponsored or supervised functions.~~ Lewd, indecent, or obscene conduct on District-owned or controlled property or at District-sponsored or supervised functions.
- (b) Assault, battery, or verbal abuse or conduct that threatens or endangers the health or safety of a student, college personnel, or campus visitor.
- (c) Hazing or any act that injures, degrades, or disgraces or tends to injure, degrade, or disgrace any student, college personnel, or campus visitor.
- (d) Causing, attempting to cause, or threatening to cause physical injury to another person.
- (e) Gambling on District property.
- (f) Failure to identify oneself when on college property or at a college-sponsored or supervised event, upon the request of a college official acting in the performance of their duties.
- (g) ~~Actions, which result in injury or death of a student, college personnel, or~~

~~campus visitor, or damage to property owned by the district.~~ Willful misconduct which results in injury or death to a student or to college personnel or which results in cutting, defacing, or other injury to any real or personal property owned by the District or on campus.

- (h) ~~Failure to comply with directions of college officials acting in the performance of their duties, open and persistent defiance of the authority of college personnel, or persistent, serious misconduct where other means of correction have failed to bring about proper conduct.~~ Persistent, serious misconduct where other means of correction have failed to bring about proper conduct.
- (i) Unauthorized entry on the campus or into the facility to which access has been denied after suspension or dismissal, during the suspension period. (CA Penal Code 626.2).
- (j) Committing or attempting to commit robbery or extortion.
- (k) ~~Engaging in harassing or discriminatory behavior based on disability, gender, gender identity, gender expression, nationality, race or ethnicity, religion, sexual orientation or any other status protected by law.~~ Engaging in harassing or discriminatory behavior based on disability, gender, gender identity, gender expression, nationality, race or ethnicity, religion, sexual orientation, or any other status protected by law.
- (l) Engaging in intimidating conduct or bullying against another student through words or actions, including direct physical contact; verbal assaults, such as teasing or name-calling; social isolation or manipulation; and cyberbullying.
- (m) Committing sexual harassment as defined by law or by District policies and procedures.
- (n) Sexual assault or sexual exploitation regardless of the victim's affiliation with the district.

## .5 Substance Violations

- (a) Unlawful possession, use, sale, offer to sell, or furnishing, or being under the influence of, any controlled substance listed in Chapter 2 (commencing with Section 11053) of Division 10 of the California Health and Safety Code, an alcoholic beverage, or an intoxicant of any kind; or unlawful possession of, or offering, arranging, or negotiating the sale of any drug paraphernalia, as defined in California Health and Safety Code Section 11014.5, ~~on college property, or at any college sponsored event.~~
- (b) Willful or persistent smoking, including the use of electronic cigarettes (vapers) in any area where smoking has been prohibited by law or by regulation of the ~~governing board of the college or the District.~~

## .6 Weapons Violations

- a) Possession, sale or otherwise furnishing any firearm, knife, explosive or other dangerous object, including but not limited to any facsimile firearm, knife, or explosive, unless, in the case of possession of any object of this type, the student has obtained written permission to possess the item from a District employee, which is concurred in by the college president.
- ~~b) Possession or use of any dangerous or deadly weapon or instrument on any college-owned or controlled property or at any college-sponsored or~~

~~supervised function. For purposes of these guidelines, a "dangerous or deadly weapon or instrument" includes, but is not limited to any: firearm, shotgun, rifle pistol, air rifle, BB gun, folding pocket knife with a blade longer than two and one-half inches, dirk, dagger, locking blade knife, switch blade knife; brass knuckles, blackjack, billy club, nun-chuck sticks, sling shot, tazer, stun gun, shocker, razor blade, acid, metal pipe, sharpened wood or metal trap, or any other weapon, instrument or object designed or modified to inflict physical harm on another person or animal. In the interest of protecting students, college personnel, or campus visitors, the college retains discretion to determine what constitutes a dangerous or deadly weapon or instrument. Certain exceptions can be made for classes or college-sponsored events. Prior written authorization from the vice president of student services, or designee, must be obtained before these items can be brought on-campus or to a college-sponsored event.~~

- (b) Possession or use of replica or imitation weapons on any college-owned or controlled property or at any college-sponsored or supervised function.
- (c) Possession or use of firecrackers, fireworks, pyrotechnics, or any other explosive device on any college-owned or controlled property or at any college-sponsored or supervised function.

Students who engage in any of the above are subject to the measures outlined in Administrative Procedure 5520.

**See Administrative Procedure #5520**

**Adopted: 2/6/06**

**Revised: 9/10/07**

**Revised: 9/12/16**

**Revised:12/5/24**

\* CCLC Recommended Language

\*\* AVC Recommended Language



## AP 5500 Standards of Student Conduct

### References:

Education Code Sections 66300 and 66301;  
ACCJC Accreditation Standard 2

**Definitions:** The following conduct shall constitute good cause for discipline, including but not limited to the removal, suspension or expulsion of a student, except for conduct that constitutes sexual harassment under Title IX, which shall be addressed under AP 3433 Prohibition of Sexual Harassment under Title IX, and AP 3434 Responding to Harassment Based on Sex under Title IX.

Good cause includes, but is not limited to, the following offenses:

#### 1. Academic Violations

a.) **Cheating, plagiarism (including plagiarism in a student publication), or engaging in other academic dishonesty as defined by in the Violation of the Academic Honesty Policy:** Dishonesty, including but not limited to, cheating, or plagiarism. Plagiarism, from the Latin word for “kidnap”, involves using another’s work without giving proper credit, whether done accidentally or on purpose. This includes, but is not limited to, words and ideas, graphs, artwork, music, maps, statistics, diagrams, scientific data, software, films, videos, photography, and the like. Plagiarism is plagiarism whether the material is from published or unpublished sources, including Artificial Intelligence (“A.I.”). It does not matter whether ideas are stolen, generated by A.I., bought, downloaded from the Internet, or written for the student by someone else - it is still plagiarism. Even if only bits and pieces of other sources are used, or outside sources reworded, they must still be cited. To avoid problems, students should cite any source(s) and check with the instructor before submitting an assignment or project; it is especially important that a student understands an instructor’s individual A.I. policy. Students are always responsible for plagiarism in their work. An instructor who determines that a student has cheated or plagiarized has the right to assign any score or grade deemed appropriate by the instructor for the assignment or examination only. Instructors cannot drop the student from class or fail them from the class for a single violation of the Academic Honesty Policy.

An instructor who determines that a student has cheated or plagiarized has the right to give an "F" grade, or numerical equivalent, for the assignment or examination.

Antelope Valley College reserves the right to utilize electronic means to investigate possible academic violations. Enrollment in any class implies student agreement and consent that all assignments are subject to submission for textual similarity review to an electronic database. *(Board Approved 6/21/04)*



- i. Violation of class assignments, examination rules, e.g., communicating or transferring information to another student, using any materials such as books, notes, etc., other than those expressly allowed for the exam, looking at another student's exam, etc.
- b.) Unauthorized preparation, giving, selling, transfer, distribution, or publication, for any commercial purpose, of any contemporaneous recording of an academic presentation in a classroom or equivalent site of instruction, including but not limited to, handwritten or typewritten class notes, except as permitted by any college policy or administrative procedure.

## 2. General College Violations

- a) Dishonesty, forgery, alteration or misuse of college documents, records or identification; or knowingly furnishing false information to the District.
- b) Disruptive behavior, willful disobedience, habitual profanity or vulgarity, or the open and persistent defiance of the authority of, or persistent abuse of, college personnel.
- c) Engaging in expression which is obscene, libelous or slanderous, or which so incites students as to create a clear and present danger of the commission of unlawful acts on college premises, or the violation of lawful District administrative procedures, or the substantial disruption or the orderly operation of the college.
- (b) Unauthorized entry upon or use of college facilities.
- (c) Violation of college policies or of campus regulations including, but not limited to, campus regulations concerning student organizations, the use of college facilities, or the time, place, and manner of public expression, library procedures, college bills, debts, and parking.
- (d) Stealing or attempting to steal District property or private property on campus or knowingly receiving stolen District property or private property on campus.
- (e) Causing or attempting to cause damage to District property or to private property on campus.
- (f) Use of personal portable sound amplification equipment and other electronic devices (radios, cell telephones, pagers, and tape players, etc.) in a manner that disturbs the privacy of other individuals and/or the programs of the college.

## 3. Computer Usage Violations

Theft or abuse of computer resources, including, but not limited to:

- a) Unauthorized access to a file, database, or computer to use, read, or change the contents, or for any other purpose.
- b) Unauthorized transfer of a file.
- c) Unauthorized use of another person's identification and password.

- d) Use of computing facilities to interfere with the work of another student, faculty member, or college official.
- e) Use of computing facilities to send obscene or abusive messages, or to defame or intentionally harm other persons.
- f) Use of computing facilities to interfere with normal operation of the college computing system.
- g) Use of computing facilities for student's personal financial gain or for solicitation of any kind.
- h) Violation of applicable AVC "Computer Use Guidelines."

#### 4. Behavior Violations

- (a) Lewd, indecent, or obscene conduct on District-owned or controlled property or at District-sponsored or supervised functions.
- (b) Assault, battery, or verbal abuse or conduct that threatens or endangers the health or safety of a student, college personnel, or campus visitor.
- (c) Hazing or any act that injures, degrades, or disgraces or tends to injure, degrade, or disgrace any student, college personnel, or campus visitor.
- (d) Causing, attempting to cause, or threatening to cause physical injury to another person.
- (e) Gambling on District property.
- (f) Failure to identify oneself when on college property or at a college-sponsored or supervised event, upon the request of a college official acting in the performance of their duties.
- (g) Willful misconduct which results in injury or death to a student or to college personnel or which results in cutting, defacing, or other injury to any real or personal property owned by the District or on campus.
- (h) Persistent, serious misconduct where other means of correction have failed to bring about proper conduct.
- (i) Unauthorized entry on the campus or into the facility to which access has been denied after suspension or dismissal, during the suspension period. (CA Penal Code 626.2).
- (j) Committing or attempting to commit robbery or extortion.
- (k) Engaging in harassing or discriminatory behavior based on disability, gender, gender identity, gender expression, nationality, race or ethnicity, religion, sexual orientation, or any other status protected by law.
- (l) Engaging in intimidating conduct or bullying against another student through words or actions, including direct physical contact; verbal assaults, such as teasing or name-calling; social isolation or manipulation; and cyberbullying.
- (m) Committing sexual harassment as defined by law or by District policies and procedures.
- (n) Sexual assault or sexual exploitation regardless of the victim's affiliation with the district.

#### 5. Substance Violations

- (a) Unlawful possession, use, sale, offer to sell, or furnishing, or being under the influence of, any controlled substance listed in Chapter 2 (commencing with Section 11053) of Division 10 of the California Health and Safety Code, an alcoholic beverage, or an intoxicant of any kind; or unlawful possession of, or offering, arranging, or negotiating the sale of any drug paraphernalia, as defined in California Health and Safety Code Section 11014.5
- (b) Willful or persistent smoking, including the use of electronic cigarettes (vapers) in any area where smoking has been prohibited by law or by regulation of the college or the District.

6. Weapons Violations

- a) Possession, sale or otherwise furnishing any firearm, knife, explosive or other dangerous object, including but not limited to any facsimile firearm, knife, or explosive, unless, in the case of possession of any object of this type, the student has obtained written permission to possess the item from a District employee, which is concurred in by the college president.
- b) Possession or use of replica or imitation weapons on any college-owned or controlled property or at any college-sponsored or supervised function.
- c) Possession or use of firecrackers, fireworks, pyrotechnics, or any other explosive device on any college-owned or controlled property or at any college-sponsored or supervised function.

Students who engage in any of the above are subject to the procedures outlined in AP 5520 Student Discipline Procedures.

**Adopted: 12/5/2024**

\* CCLC Recommended Language

\*\* AVC Recommended Language