Follow-up Report

Mission College
West Valley-Mission CCD
Santa Clara, California

The report represents the findings of the External Evaluation Team that visited Mission College on April 7th, 2016

Submitted to:
The Accrediting Commission for Community and Junior Colleges

Team Chair:
Anna Davies, Vice Chancellor, City College of San Francisco

Team Members:
Ms. Roanna Bennie, Vice President, Instruction, Las Positas College
Mr. Paul Wickline, Faculty and Interim Dean, Social and Behavioral Sciences, College of the Canyons
FOLLOW-UP VISIT REPORT

Date: 4/10/16

To: Accrediting Commission for Community and Junior Colleges

From: Anna Davies, Team Chair

Subject: Report of Follow-Up Visit Team to Mission College, April 7th, 2016

Introduction:

A comprehensive visit was conducted of Mission College in April 2014. At its meeting of June 4-6, 2014, the Commission acted to impose probation and require Mission College to submit a Follow-Up Report by March 15, 2015, followed by a visit of Commission representatives.

During the 2015 follow up visit, it was clear to the team that Mission College leadership had “taken ownership” over the Commission’s findings and recommendations from the 2014 Comprehensive Evaluation. The College began work immediately following the 2014 comprehensive visit; it had accomplished a significant amount of work to address the remaining recommendations and the team commended the administration, faculty and staff for their efforts.

The 2015 follow up visiting team also felt strongly that the College would benefit from a deeper institutional competency with the accreditation process and in particular with conducting a self-evaluation under the ACCJC Standards.

At its meeting of June, 2015 the Commission acted to remove Mission College from Probation and placed it on Warning are require Mission College to submit a Follow-Up Report by March 15th, 2016, followed by a visit of Commission representatives.

The Follow-Up Report was completed on February 16th, 2016 and submitted. A follow up visit occurred on April 7th, 2016. The purpose of the visit was to verify that the Follow-Up Report was accurate through the examination of evidence; to determine whether sustained, continuous improvements had been made at the College; and to determine whether the College had addressed the remaining recommendations made by previous evaluation teams, resolved deficiencies, and meets associated Standards.
The Follow-Up Report and Visit were expected to demonstrate resolution of the following:

**Recommendation #1 Institutional Planning:** In order to meet the Standard and achieve a level of sustainable continuous quality improvement in institutional planning, the team recommends that the College establish an integrated planning calendar (in accordance with its Actionable Improvement Plan), document and publish its planning processes ensuring broad dissemination, evaluate the planning processes to ensure alignment with College and District strategic goals and to ensure integration with facilities, technology and human resources planning and resource allocation to ensure ongoing and systematic evaluation and planning to refine institutional processes and improve student learning (I.B.2, I.B.3, III.B.2).

**Recommendation #2 Culture of Evidence:** In order to meet the Standard, the team recommends that the College develop a culture of evidence that fosters an institution wide understanding of data and analysis and its use in planning and institutional effectiveness and establish a research agenda that leverages the analysis of disaggregated data, institution-wide reflection and productive dialog on those analyses to refine institutional processes and improve student learning (I.B.5, I.B.6, I.B.7).

**Recommendation #3 Institution-set Standards of Student Achievement:** In order to meet the Standard, the team recommends that the College establish institution-set standards for student success and achievement and evaluate institution performance in regards to those standards as a measure of how well it accomplishes its mission (ER 10, II.A.1, II.A.2, I.B.2, I.B.3, I.B.5).

**Recommendation #4 SLO Assessment:** In order to meet the Standard move the entire institution beyond the developmental level and achieve proficiency in the assessment of student learning outcomes, the team recommends that the College establish a systematic and continuous cycle of outcomes assessment and institute a standing body to oversee the outcomes assessment process (in accordance with its “Actionable Improvement Plans”), establish and provide leadership and training in the development and assessment of Student Learning Outcomes in all instructional and student support services programs, assess all Course, Program, Certificate, Degree-level SLOs, evaluate results and foster and sustain institution-wide dialog on the results of assessment to ensure that decision-making aligns with institution-wide practices to support and improve student learning (II.A.2, II.A.6, II.B.1, II.B.3, II.B.4).

**Recommendation #9 Technology:** In order to meet the Standard, the team recommends that the College and District clarify the role and relationship of District and College technology planning, integrate technology planning with institutional planning to ensure alignment with College and District strategic goals, incorporate analysis of total cost of ownership, ensure faculty, staff and students are provided with quality training in the effective application of information technologies, systematically assess the effective use of technology resources and use the results of evaluation as a basis for improvement (III.C.1, III.C.2).
College Responses to the 2015 Follow Up Visit Team Recommendations

Recommendation #1 Institutional Planning: In order to meet the Standard and achieve a level of sustainable continuous quality improvement in institutional planning, the team recommends that the College establish an integrated planning calendar (in accordance with its Actionable Improvement Plan), document and publish its planning processes ensuring broad dissemination, evaluate the planning processes to ensure alignment with College and District strategic goals and to ensure integration with facilities, technology and human resources planning and resource allocation to ensure ongoing and systematic evaluation and planning to refine institutional processes and improve student learning (I.B.2, I.B.3, III.B.2).

Findings and Evidence:

The 2015 follow up visiting team found the College had made considerable progress toward addressing Recommendation #1; however, the team concluded the College was still in the process of addressing the recommendation, and/or correcting the deficiency, but was not yet in compliance, specifically related to assessment of its planning processes. While the college had established a Master Planning and Evaluation Calendar (MPEC) by the 2015 follow up visit, it had not undertaken a thorough evaluation of the MPEC or the plans included. Since that time, the College has made significant efforts to evaluate the efficacy of the MPEC and those plans.

At the December 4, 2015 Strategic Planning Summit, the chair of the Institutional Effectiveness Committee (IEC) presented an update on the status of the development of the plans and processes included in the MPEC. Attendees then took part in an evaluative discussion of the MPEC identifying the tool’s strengths and weaknesses and making recommendations for improvements. The IEC then developed an Evaluation and Action Template for committees to use to report the results of their evaluation to the IEC for more effective tracking of planned actions and to measure the impact of those actions.

The College cited many examples of evaluations and improvements directly related to the integration of facilities, human resource, and technology planning and resource allocation that took place as a result of the MPEC process. Examples included surveys from of the Hiring Committee on training, hiring processes, and quality of committee communication; Facilities and Safety Committee on issues and communications; and a survey of students’ technology use by Technology Committee.

In May 2015, the College Budget Advisory Committee (CBAC), the Program Review Committee (PRC) and the Institutional Effectiveness Committee (IEC) worked collaboratively to evaluate the integrated budget and program review resource allocation process. A task force was formed from this conversation resulting in changes to the program review template integrating and linking SLO assessment results to requests and allowing for a numerical ranking of budget requests within the program review documents. Additionally, the task force developed a rubric to assist in quantifying the strength of individual requests.
These and other meaningful changes and additions (Institutional Effectiveness Report, ongoing bi-annual Strategic Planning Summits) further increased the integration of assessment, planning and budget allocation. These improvements are a direct result of the College’s efforts to address Recommendation #1 and to more thoroughly evaluate processes and use that evaluation to initiate meaningful change.

**Conclusion:**

The team concludes that the College has addressed recommendation #1, resolved the deficiencies, and meets the Standards. The College has significantly addressed the concerns expressed in the 2015 site visit Follow Up Report. As discussed, the College developed and implemented a plan and timeline for assessing the effectiveness of the MPEC. The College has demonstrated successful, meaningful assessment and analysis of the efficacy of plans and processes.

While the College is still evaluating several of the MPEC plans (Student Equity, Student Success and Support, College Technology), the evidence the College provided in the 2016 Follow Up Report and interviews demonstrates a significant improvement in the number of evaluations completed and a specific plan of action to complete remaining evaluations by the end of spring 2016.

**Recommendation #2  Culture of Evidence:** In order to meet the Standard, the team recommends that the College develop a culture of evidence that fosters an institution-wide understanding of data and analysis and its use in planning and institutional effectiveness and establish a research agenda that leverages the analysis of disaggregated data, institution-wide reflection and productive dialog on those analyses to refine institutional processes and improve student learning (I.B.5, I.B.6, I.B.7).

**Findings and Evidence:**

The 2015 follow up visiting team found that while the institution had made considerable progress toward addressing Recommendation #2, the institution was still in the process of addressing the recommendation, and/or correcting the deficiency. The team concluded the institution was not yet in compliance with this recommendation, specifically related to assessment of its planning processes. Additionally, in 2015 the team did not find that there was pervasive dialog around and reflection on an assessment of the processes discussed in Recommendation #1. The College was in the early stages of evaluating the planning processes to ensure alignment with facilities, technology and human resources planning and resource allocation.

The College continues to make significant progress in developing a culture of evidence in which data drives decision making. The 2016 Follow Up Report and interviews demonstrate an institutional commitment to meeting the recommendation and accreditation standards. The College has established a four-year Research Agenda which the Office of Research, Planning and Institutional Effectiveness (ORPIE) reviews and updates regularly. This Research Agenda reflects the College’s commitment to fostering an institution-wide understanding of data (including
disaggregated student success and achievement data) and its use in enhancing institutional effectiveness.

The Disaggregated Student Performance Data Report is now integrated into the program review process. Program review leads, committee members, and directors of programs like Peer Mentor, Basic Skills, STEM, Asian American Native American Pacific Islander Serving Institutions grant, and Student Equity and Success are advised to look for gaps in performance, consider the implications and consider actions to address those gaps. The 2016 Follow Up Report cites several examples of academic and student support programs that identified gaps and developed action plans to address needs.

Additionally, the 2015-16 Integrated Budget and Program Review Resource Allocation Process now utilizes a rubric which includes opportunities for enhanced prioritization of resource requests based on the use of disaggregated data. Additionally, the College has purchased Tableau, a data visualization software package, to help render data to be more visually appealing, understandable and meaningful. This will further facilitate a culture of evidence at Mission College.

The College is currently participating in the Institutional Effectiveness Partnership Initiative’s technical assistance program and receiving support in the area of culture of evidence with a focus on the area of student learning outcomes.

**Conclusion:**
The team concludes that the College has addressed Recommendation #2, resolved the deficiencies, and meets the Standards. The team found evidence the College has developed a research agenda and assessed or is assessing the efficacy of its institutional plans and processes. The team found evidence that the College is discussing and disseminating the results of these evaluations college-wide.

Additionally, the College is leveraging the analysis of disaggregated data for institutional planning and resource allocation. The team finds there is now significant college-wide dialog to refine institutional processes and improve institutional effectiveness and student learning.

**Recommendation #3  Institution-set Standards of Student Achievement:** In order to meet the Standard, the team recommends that the College establish institution-set standards for student success and achievement and evaluate institution performance in regards to those standards as a measure of how well it accomplishes its mission (ER 10, II.A.1, II.A.2, I.B.2, I.B.3, I.B.5).

**Findings and Evidence:**
The 2015 follow up visiting found that the College had established a clear set of standards of student achievement based upon reliable and meaningful data. However, there was no evidence that the College was prepared to apply the standards in order to meet minimum student performance outcomes and ultimately improve student performance metrics. The team concluded that the College was in the process of addressing Recommendation #3, but was not in compliance.
In response to the Recommendation, the Institutional Effectiveness Committee (IEC) refined its committee charge to note the responsibility of evaluating performance on institutional effectiveness measures and work with the parties involved to develop improvement plans if a measured area falls short of the college standard. The IEC developed procedures to apply a standard when a minimum level of performance is not met by developing an Action Plan Timeline with an Action Plan Template and a process for a series of meetings for follow-up with the IEC.

The IEC also updated the Institutional-Set Standard (ISS) presentation of data to add the context of the data from the year prior for comparison, and the committee also set aspirational goals. This was done to assist in the dissemination and usefulness of the data. They printed large charts of the major results and placed them in the rooms where committees meet. The results were also presented to groups beyond the Governance and Planning Committee (GAP), such as the Academic Senate, Associated Student Government, and Classified Senate.

An annual IEC report was developed as a summary of the six major components of key indicator reports for use in accountability assessment and decision-making such as Institution-Set Standards, Student Success Scorecard, Transfer data, etc. Included in the report was an assessment of Strategic Foci and Goal Progress which was developed from alignment and achievement report summaries of college committee and Program Review work. The IEC used the two reports to determine the high, medium, and low progress on each goal. This report has been published one time, and could be developed over time to expand its’ usefulness.

Conclusion:

The Team concludes that the College has addressed Recommendation #3, resolved the deficiencies, and meets the Standards. The institutional-set standards have been reviewed by the Institutional Effectiveness Committee (IEC) and modified in their presentation for expanded context to provide understanding; they are published and reviewed more broadly. An Institutional Report document has been developed to summarize the data. The College is currently making application of the Standards by use of an IEC developed timeline of specific activities, forms, and policies to follow-up when a set standard is not reached.

Recommendation #4  SLO Assessment: In order to meet the Standard, move the entire institution beyond the developmental level and achieve proficiency in the assessment of student learning outcomes, the team recommends that the College establish a systematic and continuous cycle of outcomes assessment and institute a standing body to oversee the outcomes assessment process (in accordance with its “Actionable Improvement Plans”), establish and provide leadership and training in the development and assessment of Student Learning Outcomes in all instructional and student support services programs, assess all Course, Program, Certificate, Degree-level SLOs, evaluate results and foster, and sustain institution-wide dialog on the results of assessment to ensure that decision-making aligns with institution wide practices to support and improve student learning (II.A.2, II.A.6, II.B.1, II.B.3, II.B.4).
Findings and Evidence:

The 2015 follow up visiting team found that although the College had made progress on meeting the recommendation, the team concluded that the College was not yet in compliance with Standards referenced in Recommendation #4.

Although the College had made progress on meeting this Recommendation, in 2015 the team concluded that it was not yet in compliance. The College was commended for including the noncredit Older Adult Program in its SLO work; this program’s response was thorough and it continues to model appropriate outcomes and assessment work.

The College had established a permanent Outcomes and Assessment Committee (OAC) in the fall of 2014 and since that time has been able to move to the next step of recruiting faculty leadership by expanding the reassigned time from 20% for the Coordinator to 110% for the coordinator and faculty leadership for each Department. There were also subcommittees of the OAC that worked on specific problem areas such as training events and workflow.

In the summer of 2015, the College hired a full-time staff person for the Office of Instruction as a Distance Learning and Outcomes Assessment Coordinator who offers assessment notification, maintains mapping documents, and keeps tracking charts of courses and SLOs to be assessed; this accountability measure adds structure to the process of SLO and assessment work. The College also requested assistance from a Partnership Resource Team (PRT) through the Institutional Effectiveness Partnership Initiative (IEPI) and hosted a visit from the PRT in the fall of 2015. Following that, leadership from the statewide Academic Senate addressed the faculty and challenged them to take the lead in this important and ongoing work.

An institutional document was developed that includes instruction on writing SLOs and SAOs and best practices for assessment for course and program outcomes. This document was approved and posted on the College website. Forms were developed and are now used as part of a paper process to house the SLO, SAO, PLO, and assessment work. This paper process will not be sustainable although the adoption of a management software system is already underway to sustain the work.

Training for faculty in outcomes and assessment work has been expanded significantly. The adjunct faculty received a stipend for participating in fall 2015 training, and funding was again provided in spring 2016 and fall 2016 to participate in further trainings. Training was conducted in various formats (such as large groups and small groups) and by various trainers including the OAC team members who went to specific discipline faculty to work individually with faculty.

As noted in the ACCJC Annual Reports, the College has moved from 33% of their courses having ongoing assessment in 2014 to 98 % of the active courses in 2015. Also, they now report 100% of programs have ongoing assessment. This is due in part to extensive catalog clean-up work that was conducted and the hiring of an additional Senior Administrative Assistant in the Office of Instruction. This work can be verified by the SAO and SLO work that is on file.

There has been significant improvement of the Program Review process as the overarching location for housing, consideration, and advancement of the results of outcomes work to become part of the integrated budget allocation process. There is evidence of program and course outcomes that have been assessed, the data analyzed and decisions being made for improvement.
There are multiple examples of course SLOs that data analysis indicated an area for improvement, this was discussed and then tied to a resource request to provide support; resources were then allocated for this aspect of the coursework improvement. This sequence of analysis and improvement is not reflected in all programs; some continue to note resource requests and then look back to the SLO work for verification. There is also the beginning of work with use of disaggregated data, analysis and resource requests. The College will need to continue to refine processes and to bring all programs into proficient use of data.

New Institutional Learning Outcomes (ILO) were written and published although the assessment of the outcomes has not progressed beyond their indirect connection to CSSEE results. The College does have the plans and structure in place through the OAC roles and responsibilities, the tracking done in the Office of the Vice President, additional office staff, and timelines to advance this work.

**Conclusion:**
The Team concludes that the College has addressed Recommendation #4, resolved deficiencies, and meets Standards. The College will want to sustain the momentum by continuing to advance the work done to this point in order to fully institutionalize this work. A permanent committee is functioning and has membership and support of all the Departments. There has been a significant increase in training and involvement by all faculty. Several structural supports have been set in place to sustain the process for the outcomes and assessment cycle and there is clear evidence that proficient use of data is beginning to work into the budget cycle.

**Recommendation #9 Technology:** In order to meet the Standard, the team recommends that the College and District clarify the role and relationship of District and College technology planning, integrate technology planning with institutional planning to ensure alignment with College and District strategic goals, incorporate analysis of total cost of ownership, ensure faculty, staff and students are provided with quality training in the effective application of information technologies, systematically assess the effective use of technology resources and use the results of evaluation as a basis for improvement (III.C.1, III.C.2).

**Findings and Evidence:**

The 2015 follow up team found that the College was moving toward full compliance of the Standards with action in areas of: clarifying the roles and relationships of District and College technology planning; incorporating total cost of ownership; ensuring faculty, staff, and students are provided with quality training in the effective application of information technologies; and launching assessment of the use of technology resources. However, there lacked planning integration to ensure alignment of technology with institution and district strategic goals, such as the case with the far-reaching implications of the new ERP system. The team did not see a full cycle of evaluation such that improvement plans are developed based on appropriate assessment followed by actions taken to implement those improvements, such as the case with the training efforts or the new method of advancing prioritized budget requests.
The 2016 follow up team found the College had continued to progress toward full compliance with the Standards. The College has formally defined and implemented a process of linking technology requests to planning through the college-wide program review process. A process map has been created to confirm how technology requests are documented in program review, move to educational testing services for technical review (total cost of ownership, feasibility, etc.), then move to overall institutional prioritization procedures. Members of the Technology Committee as well as the Budget Committee report the effectiveness of this process. The College has a plan to evaluate the process and continue to improve and refine.

Over the past year, technology training has been focused on topics which align and support the college and district’s overarching technology goals. For example, the conversion to the learning management system Canvas as well as the upcoming transition from Colleague to Banner have required large scale college technology training. Both formal and informal professional development activities have been programmed to assist in the preparation of both faculty and students to effectively utilize the new learning management system.

The College and district have collaborated to organize broad professional development opportunities in support of the transition to the Banner student information system. It is clear that technology initiatives are at the forefront of the college’s work, and thoughtful planning has made access to technology training available to all faculty, staff, and students.

Conclusion:

The team concludes that the College has addressed Recommendation #9, resolved the deficiencies, and meets Standards. There is evidence the college has linked technology requests to the program review and budget allocation procedures. The team was able to identify examples of institutional improvement which were directly linked to the evaluation of planning related to technology.

The College has clarified roles and responsibilities of both the College and district and has fully incorporated total cost of ownership into the technology request processes. The College has also focused its training program for faculty, staff, and students into core areas which support overall institutional priorities (converting to Canvas LMS, Banner implementation).