

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 16 and 17, 2015

Submitted to:

The Accrediting Commission for Community and Junior Colleges

Team Chair:

Dr. Douglas Houston, Chancellor, Yuba Community College District

Team Members:

Ms. Roanna Bennie, Vice President, Instruction, San Diego Miramar College
Dr. Greg Peterson, Vice-President, Student Support Services, Long Beach City College
Ms. Christine Tinberg, Health Faculty and SLO Coordinator, LA City College
Mr. Paul Wickline, Theater Department Chair, College of the Canyons

FOLLOW-UP VISIT REPORT

Date: May 8, 2015

To: Accrediting Commission for Community and Junior Colleges

From: Douglas B. Houston, Team Chair

Subject: Report of Follow-Up Visit Team to Mission College, April 16 and 17, 2015

Introduction:

A comprehensive visit was conducted of Mission College in March 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.

The Follow-Up Report was completed and submitted on March 10, 2015. The current visiting team consisted of: Dr. Douglas Houston, Ms. Roanna Bennie, Dr. Gregory Peterson, Ms. Christine Tinberg and Mr. Paul Wickline. 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 recommendations made by previous evaluation teams.

It is clear to the team that Mission College leadership have “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 has accomplished a significant amount of work to address the remaining recommendations and the team commends the administration, faculty and staff for their efforts. In addition to the work to orient the College faculty and staff to the ACCJC Standards and process, the College President and the Accreditation Liaison Officer (ALO) have both served recently on accreditation visiting teams to improve the College leadership team’s accreditation expertise. The team observed a high level of engagement, among key leaders throughout the College, in the work to address Commission recommendations.

That being said, as with the previous visit, the team feels strongly that the College will benefit when the broader College leadership, administrators and faculty, develop a deeper institutional competency with the accreditation process and in particular with conducting a self-evaluation under the ACCJC Standards. The institution’s Follow-up Report was not sufficiently reflective of College work and did not adequately describe actual progress in many key areas and, in many cases, cited evidence that was not actually illustrative of accomplishments; in most of those cases, the team was able to obtain corroboratory evidence, identified through interviews once on site.

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 #5 Distance Education: In order to meet the Standard and comply with Commission Policy, the team recommends that the College establish policy regarding regular and effective student contact for Distance Education courses (II.A).

Recommendation #6 Student Support Services: In order to improve, the team recommends that the College replicate the practices of its own successful special programs, particularly the Academic Success for Asians Program (ASAP) and scale these efforts in order to close the achievement gap with other underserved student populations (II.B.3.a, II.B.3.d).

Recommendation #7 Student Learning Outcomes: In order to meet the Standard, the team recommends that the College and the District ensure that faculty and others directly responsible

for student progress toward achieving stated student learning outcomes have, as a component of their evaluation, effectiveness in producing these learning outcomes (III.A.1.c).

Recommendation #8 Facilities Planning: In order to meet the Standard, the team recommends the institution evaluate its facilities and equipment on a regular basis, taking utilization and other relevant data into account and reflecting projections of total cost of ownership (III.B.2, III.B.2.a).

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).

Recommendation #10 Organization and Communication: In order to meet the Standards, the team recommends that the College regularly evaluate governance and decision-making structures and processes, including internal controls that implement District policy, to assure their integrity and effectiveness, to ensure these processes facilitate effective communication among the Colleges' constituencies and between the College and District, and that the College widely communicates the results of these evaluations and uses them as the basis for improvement (III.D, IV.A).

College Responses to the 2014 External Evaluation 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:

Since the spring 2014 ACCJC team visit, Mission College has focused its efforts and made significant progress on improving the institutional planning and resource allocation processes. The recent hire of a Director of Institutional Research has provided the College with increased capacity for handling the research needs of the programs and services of the College. Those interviewed praised the leadership of the director who was instrumental in analyzing the strategic planning processes and developing the Master Planning and Evaluation Calendar.

Through considerable collaboration at a planning meeting in April 2014 and Strategic Planning "summit" meetings in May 2014, August 2014 and December 2014, members of participatory governance groups, committee chairs, administrators and faculty closely examined the ACCJC

recommendation on institutional planning. Summit participants examined and recommended improvements to the committee reporting structure to improve the College organization structure and facilitate communication, and presented a revised Umbrella Chart that included all decision-making bodies of the College.

Additionally, participants in these summits reviewed and revised the Strategic Plan's *Comprehensive Listing of Goals* and evaluated the planning processes to ensure alignment with College and District strategic goals. At the December 2014 summit participants examined and evaluated the progress made since the May 2014 summit toward improving institutional planning and addressing Recommendation #1. The group approved a revised Umbrella Chart reflecting changes to improve and facilitate committee reporting and aligned College strategic goals with District goals. At these summits, committees reported on their "Mid-Year Self-Evaluation of Institutional Effectiveness" to identify changes, updates or additions to their committee goals. Due to the success of these summits, the College has decided to continue these twice each year.

In accordance with its Actionable Improvement Plan from its 2014 Self-Study and per ACCJC Recommendation #1, the College, with guidance from the Institutional Effectiveness Committee (IEC), whose charge includes reviewing institutional planning activities and processes for effectiveness, efficiency, and adherence to Accreditation Standards and making recommendations to the College on possible revisions, established an integrated Master Planning and Evaluation Calendar, providing both an annual and a ten-year view. The IEC drafted this calendar by conducting a content analysis of the College's planning documents and identifying the frequency with which they needed to be updated, by whom, and where they fit within the College's overall planning cycle. The IEC shared this document with multiple and diverse constituency groups, including four readings at the highest participatory governance group, the Governance and Planning Council (GAP), receiving approval April 15, 2015. Additionally, the Office of Research, Planning and Institutional Effectiveness (ORPIE) created a summary chart of action items and dates for evaluation to clarify, monitor progress, and assure completion on the Master Planning and Evaluation Calendar.

While the College has created these documents, they have not yet fully evaluated the plans and/or processes identified. They have provided a timeline for evaluation, but much of this evaluation is scheduled to occur spring 2015. Moreover, the College has failed to identify a plan and timeline for assessing the effectiveness of its Master Planning and Evaluation Calendar. For these reasons, the team is unable to analyze the College's assessment of the efficacy of its plans and processes.

Concerning resource allocation, in spring 2014, the College examined the budget allocation model to more closely connect it to the program review process. In fall 2014, the College Budget Advisory Council (CBAC) began including grant money and other resources into the budget model. The College improved this process by more directly involving department and division chairs during the prioritization period of budget development. CBAC relies on the feedback of these individuals who provide the rationale for the prioritization. A final ranked list of budget requests is then jointly prioritized by the combined Student Services-Instruction Committee (SSI) and forwarded to CBAC which reviews and recommends these and forwards them to GAP. GAP then reviews and forwards recommendations to the College president for

fund allocation. In October 2014, CBAC approved this new integrated budget allocation and program review process which was also approved by the Academic Senate and the Governance and Planning Council.

Conclusion:

The College has made considerable progress toward addressing Recommendation #1; however, as detailed in the Findings and Evidence section, the team concludes the College is still in the process of addressing the recommendation, and/or correcting the deficiency, but not yet in compliance, specifically related to assessment of its planning processes.

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 College has made significant progress in developing a culture of evidence by improving the access to and use of data and analysis throughout the College for use in enrollment management and for identifying and addressing issues of student equity and access. The College has also instituted a common note-taking template used in committees, departments, and programs; and implemented the use of a shared server to improve documentation and dissemination of information and data. As noted in the findings for Recommendation #1, the College hired a permanent research director which enabled the Office of Research, Planning and Institutional Effectiveness (ORPIE) to increase data and analysis support and data coaching provided to college faculty, staff, and administrators.

The College has improved its use of research data to analyze enrollment trends and to develop methods to increase efficiency. For example, the Performance Goals Committee (PGC) uses this data to provide report cards to departments to determine FTES targets and to support enrollment management efforts. The College has used survey results to improve fill rates in evening classes by revising the course scheduling time blocks. ORPIE has worked with faculty and staff to facilitate development of surveys, conduct studies, and create research briefs to further implement a culture of evidence throughout the College. Recent survey efforts include the College's first comprehensive facilities survey, a student technology survey, and a collaborative survey with other South Bay colleges to determine why students take courses at institutions outside of their respective service areas which is planned for implementation in fall 2015. Recognizing the possibility of "survey fatigue", ORPIE has provided incentives for survey participants and developed a three-year plan for survey implementation to identify when and how often ORPIE will plan, develop, and release surveys.

In fall 2014, the College developed a Disaggregated Performance Data Report, also referred to as a Data Dashboard. This report provides departments with a view of student performance data by ethnicity for all courses. In January 2015, ORPIE introduced the report to department and

division chairs and delivered lecture capture presentations (available on the ORPIE website), and individual training upon request. In spring 2015, the ORPIE staff will distribute versions specific to divisions and departments and hold road shows throughout the College to demonstrate how to use the tool and make meaning of the data.

College personnel have begun using data for program planning and the creation of new programs. For example, analysis of Asian American and Pacific Islander student success rates in department and division meetings resulted in the proposal of a Peer Mentor Program with tutors embedded in targeted courses. Personnel are currently evaluating survey results and additional data to determine the efficacy of the program.

In fall 2014, the Institutional Effectiveness Committee, under the guidance of the research director, established a Research Agenda to begin to leverage the analysis of disaggregated data, encourage institution wide reflection and facilitate productive dialogue to improve institutional effectiveness and improve student learning. The agenda identifies and prioritizes more than 30 research projects. The IEC submitted the draft agenda to the President's Cabinet, Governance and Planning Council (GAP), the Academic Senate, the Classified Senate, and the December 2014 Strategic Planning Summit. These groups gave feedback, and GAP approved the agenda in February 2015.

Recognizing the College's challenges in establishing a sustainable model and changing the culture around student outcomes assessment, the College submitted a Letter of Intent requesting technical assistance as part of the Institutional Effectiveness Partnership Initiative (IEPI).

Through interviews, the team learned that ORPIE and the IEC are developing an Institutional Effectiveness Report and template to assess department and program attainment of Institution Set Standards. These groups will be tasked with developing action plans to address concerns. These action plans would then be part of the annual Institutional Effectiveness Report. While these plans are alluded to in the IEC meeting minutes, the concept is still under development at this time.

The team did not find that there is pervasive dialog around and reflection on an assessment of the processes. The College is in the early stages of evaluating the planning processes to ensure alignment with College and District goals and to ensure integration with facilities, technology, and human resources planning and resource allocation. While the College has developed and launched surveys on facilities, student perception of technology on campus, and program review processes, many processes are still in the planning stage and remain unassessed.

Overall, the team believes that the College is now using data and analysis for program planning, enrollment management, and evaluation of institutional effectiveness. Those interviewed, including faculty, staff, and administrators, commented on a deeper understanding of the importance of data-driven decision making and expressed an appreciation for the data now available from ORPIE and on the shared network drive. ORPIE noted their intention to utilize student focus groups in the near future to add qualitative data and narrative to the quantitative information they currently provide.

Finally, the IEC is charged with reviewing institutional planning activities and processes for effectiveness, efficiency and adherence to Accreditation Standards, and with making recommendations to the College on possible revisions. With the institutional researcher providing oversight of this committee and process, and the evidence of the work accomplished by the researcher and ORPIE thus far, the team feels that the College has shown the capacity for meeting this Standard and for fully addressing the recommendation. College institution likely needs additional time to do so.

Conclusion:

While the institution has made considerable progress toward addressing Recommendation #2, as detailed in the Findings and Evidence Section, the institution is still in the process of addressing the recommendation, and/or correcting the deficiency. The team concludes the institution is not yet in compliance with this recommendation, specifically related to assessment of its planning processes.

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 regard 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:

In response to this recommendation, the College tasked the Institutional Effectiveness Committee (IEC) to develop student achievement standards using metrics adopted by the U.S. Department of Education, ACCJC's instructions to evaluating team members, and best practices in current use at other community colleges. The IEC was mindful to identify meaningful metrics of student achievement where reliable data were readily available. This resulted in an initial ten (10) indicators grouped into two areas: institution wide metrics, including degree and certificate completion, transfer rates, and successful course completion rates; and metrics drawn from the Chancellor's Office's Scorecard, which is based on smaller student cohorts. The IEC chose to set standards and "aspirational goals" for each metric using standard deviations and a five-year mean to ensure that the standards accurately reflected the work of the institution and that aspirational goals were realistically achievable. There is evidence that these standards were reviewed by the various institution governance groups, including the Academic Senate, Classified Senate, GAP, and Student Services.

ACCJC's *Guide to Evaluating Institutions* outlines ten areas of evidence a college should provide when measuring student achievement and student learning. The College's ten initial indicators address eight of the areas listed; the remaining two areas are student scores on licensure exams and student job placement rates. In response, the IEC included four (4) additional indicators within the institution-set standards to capture licensing exam pass rates for Psychiatric Tech, LVN to RN, Vocational Nursing, and Emergency Medical Technician. The follow-up report also notes that conversations occurred regarding capturing job placement data within the standards, but that a reliable source for these data was lacking. The IEC did explore

the use of Launchboard data or CTE program-level survey data, but felt these data would not be meaningful at this time.

In order to disseminate data on the standards, the College has committed to include the standards, the aspirational goals, and the current number/rate for each metric in its annual institutional effectiveness report. This report is slated to be shared with all major participatory decision-making committees for discussion; however, there is no process outlined yet for an annual evaluation of the institution-set standards, nor a clear structure by which improvement plans would be created if the College's performance were to fall below a standard. In discussion, the IEC members spoke to a potential approach to evaluating and addressing issues with the standards, but this approach is not captured in writing, nor have the responsible parties been identified. While "Student Learning, Completion, and Institutional Accountability" is a focus area in the College's strategic plan with a goal to facilitate metrics that appear to be in alignment with the institution-set standards, there is no obvious connection between these efforts; similarly, neither members of IEC or GAP could explain how the institution-set standards were integrated into the College's broader planning and continuous improvement processes. Without this integration, the College is unable to use the institution-set standards to measure how well it accomplishes its mission.

Conclusion:

The College has established a clear set of standards of student achievement based upon reliable and meaningful data. However, there is no evidence that the College is prepared to apply the standards in order to meet minimum student performance outcomes and ultimately improve student performance metrics. The team concludes that the College is in the process of addressing Recommendation #3, but is not yet in compliance.

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:

In response to the recommendation to institute a standing body to oversee assessment, the College established the Outcomes and Assessment Committee (OAC) as a subcommittee of the Governance and Planning Council (GAP) in October 2014 meeting approximately every two weeks to discuss and determine assessment processes for course, program, institutional, and service area outcomes. Despite recruitment efforts, at present, there are no full-time teaching faculty on the six-member committee, beyond the SLO Coordinator. The team encourages the

committee continue these recruitment efforts. Although multiple reference materials and documents are available at the Student Learning Outcomes & Assessment webpage, the link on the committee's webpage to Documents and Minutes is nonfunctional and thus committee minutes are not readily accessible.

The team believes there may be potential for OAC to increase dissemination of work to participatory decision-making bodies. Meeting minutes show that the OAC reported to GAP only once on October 1, 2014. The only other occasion where assessment was clearly documented was when the Vice President of Instruction spoke on outcomes assessment as part of an accreditation report to GAP on October 15, 2014. According to Academic Senate minutes, the Vice President of Academic Affairs spoke at meetings of the Academic Senate; however, the OAC provided no reports to the Academic Senate. The team encourages OAC to deliver reports to more GAP and Senate meetings to increase awareness, understanding and commitment to outcomes assessment.

The College provides leadership in the development and assessment of student learning outcomes by employing a full-time faculty member with a .2 release time to serve as SLO Coordinator. The Coordinator delivers trainings and regular reports at department chair meetings and is available to help individual faculty. A temporary staff member supports documentation of outcomes and assessments. Soon, the College will hire a Distance Education and Outcomes Assessment Coordinator to support the two areas. Last month, the SLO Coordinator began training faculty to be the "point person" for their respective areas. While the team recognizes that responsibility for assessment is spreading across the institution, it is concerned that the SLO Coordinator does not have sufficient release time to maintain the momentum to establish a continuous assessment cycle. After some time has passed, the team encourages the College to evaluate the sustainability of its leadership model. The College recognizes it has room for improvement and is commended for taking the initiative to ask for help from a Technical Assistance Team through the Institutional Effectiveness Partnership Institute.

Regarding instructional programs, the Follow-Up Report gave examples of training that occurred since the team's initial visit: presentations on assessment of SLOs and SAOs during two All College Flex Day events August 2014 and to department chairs in January. To increase understanding, Adjunct Faculty were provided stipends to also participate in these trainings. October 1, 2014 meeting minutes state there "is a great need for training of faculty college wide on assessment," with an action item to "schedule at least two brown-bag lunch training sessions;" however review of the 2015 Brown Bag Schedule did not include any topics on outcomes assessment. The January 2015 FLEX Day topics did include a workshop on Bloom's Taxonomy to improve test questions and the relation to outcomes assessment. The team saw evidence that department chairs are being trained on processes for PLOs at some monthly meetings as indicated in September 17, 2014, OAC meeting minutes. The team identified additional topics that could have been covered in faculty training, i.e. how write an SLO or create a rubric and reviewing the SLO handbook. Given that the College received a specific recommendation to provide such trainings, the team expected that there would have been a more robust schedule of offerings to faculty than the two FLEX day presentations noted above.

The Team commends the College for improving communication on outcomes and assessment for noncredit courses and programs. Training and progress in assessment for the Older Adult program is excellent, and the class survey is an adequate form of assessment for the communication education program. The Team expects that the spring assessment and survey results will be analyzed and discussed among the noncredit faculty and administrators.

The College has made progress at assessing program outcomes and has written program outcomes for degrees and certificates and mapped course outcomes to program outcomes, and program outcomes to institutional outcomes. Assessment summary forms have been completed for some programs, but not for all. According to the College's 2014 ACCJC Annual Report, 33% of their courses have ongoing assessment of course SLOs. The college noted that this percentage is not fully reflective of efforts, as it is made lower due to the inclusion of courses in the catalog that are no longer offered. This spring, the college is in the process of deleting these courses.

Beyond the mapping instructions, the team did not see written instructions on how to complete the remaining steps of program assessment and suggests that the assessment handbook be expanded to include these instructions.

The College has three institutional outcomes and states that they have assessed all of these. Yet, the only method used to measure these outcomes is through the Community College Survey of Student Engagement (CCSSE.) Since the CCSSE is an indirect method measuring students' perceptions, the team recommends additional measurement methods be utilized. In interviews OAC members said they plan to revise their outcomes and are beginning discussions later this spring semester.

Instructional documents on assessment processes do exist for faculty and staff in student support services. The Follow-Up Report did not provide sufficient evidence of these processes. The team requested additional evidence which was located in the College's Public Drive to include instructions how to write an SAO, how to map SAOs to ILOs, and how to complete the assessment summary form. The team suggests that OAC consider collaborating with the Student Services Council to create an outcomes assessment handbook specifically for student support programs that could include instructions to complete the above-mentioned documents, examples of completed forms, and how the assessment process relates to program review and institutional planning.

The SAO Master List showed that almost all student support programs have written at least two outcome statements, except for two, the Career Center and the Transfer Center, both of which received guidance to develop one to three outcome statements intended to sufficiently describe the programs core services. SAOs have been mapped to the three ILOs. When the ILOs are revised the student services faculty and staff plan to be involved in the discussion and decision-making process through participation in the related college wide summits.

The SAO Assessment Summary located on the College's Public drive is a thorough form and contains the necessary fields to capture the assessment results and action plan. A review of assessment summary forms from various programs showed that many assessed one or more

outcomes in fall 2014 with additional assessments planned for spring 2015. The intention of the SAO Timeline is to identify which outcomes they plan to assess in the future. The spreadsheet extends to spring 2017, yet many programs have not planned any assessments beyond spring 2015. Without a clear plan to conduct any assessments for the next two academic years, these programs could not be considered to have a continuous cycle of assessment and need to plan to assess each year.

The team found evidence that training in outcomes assessment has occurred for student support programs. The FLEX Day presentation in August 2014 covered SAOs, and there was a follow-up meeting and email communications with individual student services departments and trainings provided at the Student Services Council meetings in October and January. A peer review of SAOs happened at the Student Services Council on October 13, 2014; this is a good practice that encourages collaboration and sharing that hopefully will be replicated as in the next annual peer review session scheduled for September. The peer review process could also be included in a student services assessment handbook. In addition to the evidence of training found, the team encourages the student services programs to investigate best practices in SAO assessment in community colleges and believes the student support program faculty and staff could benefit from regular additional trainings in outcomes assessment. The team suggests that outcomes and student learning become a standing item at every Council meeting. The student support representative(s) on the OAC committee could update the Council on the work of the OAC and organize the sharing of assessment results and action plans from each support program.

The OAC seemed to feel they were creating institution wide dialog by reporting on assessment progress at GAP and Academic Senate meetings and meeting with department chairs and student services programs. However, evidence did not link these conversations to decision-making practices and were more focused on providing instructions on how to complete assessment tasks and give updates on tasks completed. As more course and program assessments are completed, the team suggests a review of the data, probably by the OAC, to look for themes and patterns that emerge across the institution. The College should then discuss these themes and patterns campus wide to determine if improvements can be made to student learning.

The College has begun to consider assessment results in the program review and resource allocation process. Multiple questions on SLO and PLO results have been integrated into the program review document, asking departments to summarize results and discuss significant findings. The diagram of the Integrated Budget Allocation Program Review Process outlines the flow from assessment results to the creation of program goals to the request for resources. The rubric/prioritization guidelines used by the College Budget Advisory Committee include criteria statements related to student learning outcomes. These seem to be initial attempts to relate outcomes, program review, and resources in order to have the institution's decision-making processes informed by assessment results. The team expects that these linkages and processes will be refined over time.

Conclusion:

Although the College has made progress on meeting the recommendation, the team concludes that the College is not yet in compliance with Recommendation #4.

Recommendation #5 Distance Education: In order to meet the Standard and comply with Commission Policy, the team recommends that the College establish policy regarding regular and effective student contact for Distance Education courses (II.A).

Findings and Evidence:

The Distance Learning Committee at Mission College reconvened in the spring 2014, and the committee members elected a new chair was elected in fall 2014. The committee had been dormant for more than a year. Since the reconvening of the committee, several initiatives have moved forward to completion or near completion. A policy was developed on Distance Education Instruction (BP 4105), and it included regular and effective student contact content; an accompanying Administrative Procedure (AP 4105) was written outlining how the regular and effective contact will be documented as well as other procedural elements. The District determined it was most appropriate to let these remain as college policy, not board policy, so the two were combined into one document, Mission College Distance Education Instruction Policy, and the Academic Senate approved the policy, March 3, 2015. There are contract Tentative Agreements in Article 26 for the inclusion of regular and effective student contact by distance learning faculty, observations of distance learning class sections, and required training for faculty who have not taught courses through distance education previously. In CurricUNET, there is a Distance Education Addendum location in each course that is using the distance learning modality, and in that space, it is noted how contact will be made with students. This work moves through the regular curriculum approval process, although it is a separate approval from the course itself.

The Distance Learning Committee organized trainings that were conducted by several presenters, in fall 2014 on Regular and Effective Student Contact in Online Courses. Full-time faculty attendance was strong; additional support was offered by providing a stipend for each adjunct faculty that attended during January Professional Development Day. The Distance Learning Committee made new resources available on the faculty webpage including an Online Course Checklist and links for best practices covering various areas of preparation and work in online courses. The Distance Learning Committee is also considering changes to the course management system that will occur due to lack of ongoing support by Blackboard for the current Angel system beginning in fall 2016.

The Distance Education Committee has requested survey feedback from each workshop it has conducted this year, and the committee will compile the work from this year, review, and make adjustments for future training.

Conclusion:

The team concludes that the College has met Recommendation #5. There has been some institutionalization of this work by the establishment of a new position, Distance Education and Outcomes Assessment Coordinator. To ensure that the work is sustained, a standardized timeline for assessment and reporting to the Academic Senate on the effectiveness of the Distance Learning Committee's work would assist in creating structure to consider and incorporate continual improvement.

Recommendation #6 Student Support Services: In order to improve, the team recommends that the College replicate the practices of its own successful special programs, particularly the Academic Success for Asians Program (ASAP) and scale these efforts in order to close the achievement gap with other underserved student populations (II.B.3.a, II.B.3.d).

Findings and Evidence:

In order to close achievement gaps that exist among underserved student populations at the College and to support the development of a culture of evidence and continuous improvement in alignment with other recommendations, the team strongly believed that the efforts of Academic Success for Asians Program (ASAP) and the Asian American Native American Pacific Islander Serving Institution (AANAPISI) program provided model practices that could be successfully scaled across the institution. Through funding from two AANAPISI federal grants, many student programs and services have been established, including the model ASAP. The AANAPISI programs provide comprehensive counseling, funding for the Welcome Center and the STEM Center, Smarthinking online tutoring services, and a learning community “to provide AAPI students on campus an opportunity to learn about their cultural backgrounds and identities through community building activities, culturally relevant curricula, and extracurricular activities.” ASAP’s services included academic success workshops, career and academic counseling, transfer planning, graduation support services, and study groups. Core to all AANAPISI efforts is a consistent reliance on data in decision-making and a robust and well-defined assessment cycle.

In response to this recommendation, the College identified services comparable to those listed above that are provided to all students. The Counseling Center provides academic, transfer, career, and personal counseling to students both on-campus and remotely; the Welcome Center is open to all students and provides academic success workshops and graduation support services similar to ASAP; the Academic Support Center provides tutorial services (including Smarthinking) and other academic support services; and the Transfer Center assists students with transfer planning. In addition, AANAPISI funds have recently been used to provide all students access to the “K16 Bridge” student educational planning tool and a peer mentoring program. Overall, these examples demonstrate that the College is providing equal access for students to its core services and programs and has appeared to have scaled up many of the services initially provided by AANAPISI and ASAP.

While comparable services exist for all students, the College is still working on developing an infrastructure that supports an assessment cycle of these services to ensure that achievement gaps are eliminated or reduced. The College is hiring an Institutional Business/Technology Analyst, and this position will disaggregate student data for all student services programs and services. The team encourages the College to continue to learn from the effective practices of AANAPISI and to consider how these practices can support work in response to other recommendations.

Conclusion:

The team concludes that the College has fully addressed Recommendation #6. The institution has replicated many practices originally contained in the AANAPISI and ASAP programs and has scaled these practices such that they are accessible to all of the College's students.

Recommendation #7 Student Learning Outcomes: In order to meet the Standard, the team recommends that the College and the District ensure that faculty and others directly responsible for student progress toward achieving stated student learning outcomes have, as a component of their evaluation, effectiveness in producing these learning outcomes (III.A.1.c).

Findings and Evidence:

On March 3, 2015, minutes of the Board of Trustees attest that the District Board of Trustees did amend Board Policy 3200 to address Standard III.A.1.c. As amended, Board Policy 3200 now states:

The District shall ensure that faculty, staff and administrators directly responsible for student progress toward achieving student learning outcomes have, as a component of their evaluation, effectiveness in producing those learning outcomes.

For Mission College, the procedures for faculty evaluations are included in the contract between the collective bargaining agent, the Association of College Educators (ACE), and the District. As of March 27, 2015, a tentative three year package agreement was reached between the West Valley-Mission Community College District and ACE for the revision of Article 26A, 26B, 112.3 and Appendix D.

These sections of the contract cover the performance appraisal for regular tenured faculty (26A), tenure track contract faculty (26B), and the job titles of Counselor, Department Chair, Division Chair, Lab Faculty Specialist, Work Experience Instructors, Coordinator of Student Health Services, Instructor/Coordinator for the Disabled, Learning Assistant, and Tutorial Center Coordinator (Appendix D). Under the Professional Criteria Category (26A.4.1 & 27B.4.1), the contract states that each member shall "participate in the process of SLO assessment and evaluation and using the results of these assessments in the process of continuously improving student learning." This exact language appears in the duties and responsibilities section of each contract for the additional job descriptions.

The ballot to vote on the tentative agreement was distributed the week of April 14, 2015, so at the time of this report the verdict is unknown. Should the agreement be approved, it would appear on the agenda at the May meeting of the Board of Trustees.

Conclusion: The team concludes that the College meets Recommendation #7.

Recommendation #8 Facilities Planning: In order to meet the Standard, the team recommends the institution evaluate its facilities and equipment on a regular basis, taking

utilization and other relevant data into account and reflecting projections of total cost of ownership (III.B.2, III.B.2.a).

Findings and Evidence:

The Follow-Up Report reflects that the District has sufficient funding sources to “fill in the gaps with missing funding” to maintain the Total Cost of Ownership (TCO) at the College. This does not appear to negate that the College considers TCO in their building and maintenance work, although it did seem to mask the need for providing documentation of the more overt ways TCO is considered. The Follow-up Report notes that analysis was conducted of TCO, that TCO factors were considered, and that the Program Review Model takes TCO into consideration. At the follow-up visit documentation was provided that illustrates that an analysis of a range of TCO factors are researched and considered, such as closing half of the main building until Phase II is complete to keep cost down; installation of more efficient mechanical, electrical, and plumbing devices that will reduce operational costs in the new building; the rejection of a Central Utility Building (CUB) due to no cost benefit; and use of an Access Control and Alarm Monitoring System (ACAMS) for more efficient security efforts. Also provided, were the Instructional Program Review process instructions on how faculty can consider and enter the TCO factors of equipment, facility, or even increased operational cost requests into the program review documents where they are later compiled and prioritized. In addition, the District provided a crosswalk document of how it compares their three main efforts in the TCO facility work with annual and project specific processes and documents. This assisted in developing a link between common reports, such as Schedule Maintenance Reports or capacity-load ratio reports, and the reflection on that data for TCO. The additional documentation provided at the visit, along with the Facilities Safety Committee new work order system and its regular work to consider and prioritize projects, does show that the institution is evaluating and taking relevant data into account to reflect on total cost of ownership.

In the consideration of the Education and Facilities Master Plan and in development and planning of new construction, the College employs a series of user groups to in the design and development phases; documentation of the content of that dialog would assist in fully meeting the Standard along with institution-led assessment on those processes so that continuous quality improvement can aid further work.

Conclusion:

The team concludes that the institution meets Recommendation #8.

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:

College Instructional Technology Services (ITS) has been working with the District Information Systems department to clarify the roles, relationships, and responsibilities through the development of an extensive chart that serves as a functional map with identified functional areas and service outcomes. The College Technology Committee has also worked to identify the total cost of ownership of technology related lab spaces through specifically quantifying: initial costs, installment costs, upkeep labor and parts costs, and replacement costs and schedules. To supplement, a Technology Refresh Calendar is maintained to document the replacement schedule which has been supported by state and local funding. All of these plans are being used in operational ways by the ITS staff to keep track of technology activities.

There has been a shift at the institution in how technology needs to move forward in the resource allocation process. Most recently, needs are moving from Program Reviews to be prioritized by the department and then the division so that all needs do not arrive to the Technology Committee in a large list, but rather in a few prioritized lists. Although there appears to be some voiced satisfaction with this new process, there has not been a formalized consideration of its effectiveness. A new timeline for the allocation process was approved this fall. The structure for the process is currently informal and likely cannot be sustained over time without some documentation that is part of a sequence of resource allocation activities.

The College is considering a change in their Enterprise Resource Planning (ERP) system and has taken steps to do some Business Process Analysis. A taskforce is conducting this work, and this group is slated to advise the Chancellor and the Director of Information Systems for vendor selection. This initiative provides the College with opportunity to consider large areas of influence (such as purchasing, hiring, enrollment services, payroll, etc.) for advancement of strategic directions and creation of institutional alignment; however, up to this point, the taskforce has been operating independently of other planning processes. There is some enthusiasm gathering around this project aimed at their hoped for changes, and the team is encouraged by the thoughtfulness around this project.

Training has been advanced in many areas on campus and has included each of the constituency groups: full and part-time faculty, classified staff, and students. It has reached into several areas such as Distance Learning, office work support, library concerns, course management systems, use of the Portal, and use of specific software. Surveys have been conducted on the effectiveness of the training, how information will be used to improve teaching and learning, and what future training could be useful. The results have not yet been compiled, published, or used for improvement.

Conclusion:

The College is moving toward full compliance of the Standard 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 is planning integration that should happen 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 cannot 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 team concludes the institution has not yet resolved Recommendation #9.

Recommendation #10 Organization and Communication: In order to meet the Standards, the team recommends that the College regularly evaluate governance and decision-making structures and processes, including internal controls that implement District policy, to assure their integrity and effectiveness, to ensure these processes facilitate effective communication among the Colleges' constituencies and between the College and District, and that the College widely communicates the results of these evaluations and uses them as the basis for improvement (III.D, IV.A).

Findings and Evidence:

As previously described, following the March 2014 team visit, the College immediately started a comprehensive effort to educate the College community about the Accreditation Standards and about the need to improve practices in student learning outcomes assessment, institutional planning and evaluation, program review, and the effective use of data.

In April 2014, the College convened an ad hoc taskforce to discuss accreditation-related concerns particularly with regard to planning and institutional effectiveness. This taskforce consisted of the Accreditation Liaison Officer, the Faculty Accreditation Liaison and representation of administrators, constituency leaders, and the chairs of all major participatory decision-making committees and subcommittees. The group used the ACCJC Rubric for Evaluating Institutions to conduct a gap analysis.

Among other outcomes, this taskforce developed an evaluation form that was then approved by the College's Governance and Planning Council (GAP) and distributed to all College committees and planning groups by the end of academic year. Eighteen of these various groups submitted evaluative responses, and summary results were presented at a Strategic Planning Summit in August 2014. One key result of this assessment was that the College determined that the various committees were not working entirely in alignment, and as a consequence, in a number of cases, respective annual goals were not aligned. In response the taskforce identified a communications flow that better aligned the committees' goals setting and priorities.

Interviews with representative members of GAP revealed a general sense that this effort to increase governance and planning 'literacy' and this assessment process were a "good first effort." Leaders acknowledged, and the team concurred, that the College will benefit from engaging in broad reflective dialog on the assessment results with the intention of identifying opportunities for improvement.

Conclusion:

The team concludes that the institution has met Recommendation #10. While this was a "first effort" and College leadership acknowledge that the evaluation would benefit from robust and

reflective dialog on assessment results, the College has nevertheless demonstrated that it can improve its planning and decision-making processes through evaluation.