EXTERNAL EVALUATION REPORT

College of Alameda
555 Ralph Appezzato Memorial Parkway
Alameda, CA 94501

A Confidential Report Prepared for the
Accrediting Commission for Community and Junior Colleges

This report represents the findings of the External Evaluation Team that visited the College of Alameda on March 9 through March 12, 2015.

Glenn R. Roquemore, Chair
NOTE: This page shall be added to the team report noted below, immediately behind the cover page, and shall become part of the final evaluation report associated with the review.

DATE: June 29, 2015

INSTITUTION: College of Alameda
555 Ralph Appezzato Memorial Parkway
Alameda, CA 94501

TEAM REPORT: External Evaluation Team Report

This report represents the findings of the External Evaluation Team that visited College of Alameda March 9 – 12, 2015.

SUBJECT: COMMISSION REVISION TO THE TEAM REPORT

The External Evaluation Team Report (Team Report) for College of Alameda provides details of the team’s findings with regard to noted Eligibility Requirements, Accreditation Standards and Commission policies. The Team Report should be read carefully and used to understand the team’s findings. Upon a review of the Team Report sent to the College and the Institutional Self Evaluation Report submitted by the College, the following corrections are noted for the Team Report.¹

Pages 8 and 60: College Recommendation 13 has been revised to a recommendation to improve institutional effectiveness.

Page 25: The team response to Eligibility Requirement 13 has been revised

Page 60: The last line in the first paragraph has been replaced.

¹The Team Chair has concurred with this change.
LIST OF TEAM MEMBERS

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   Santiago Canyon College
Summary of the Report

INSTUTITION: College of Alameda

DATE OF VISIT: March 9, 2015 through March 12, 2015

TEAM CHAIR: Glenn R. Roquemore
            President, Irvine Valley College

A ten-member accreditation team visited the College of Alameda (College) on March 9-12, 2015 to evaluate the institution for reaffirmation of accreditation according to the Accrediting Commission for Community and Junior Colleges’ (ACCJC) Eligibility Requirements, Accreditation Standards, and Commission Policies.

In preparation for the visit, team members attended an all-day training session on February 10, 2015 conducted by the ACCJC. Team members carefully read the college’s Self Evaluation Report, including the evaluation report and recommendations from the most recent visiting team, and other materials submitted to the Commission since its previous comprehensive visit in 2009, and assessed the evidence provided by the college. Prior to the visit, team members completed written evaluations of the Self Evaluation Report and began identifying areas for further investigation. The day before the visit began, the team members met to discuss their views of the written materials provided by the college, reviewed evidence provided by the college and reviewed the current Self Evaluation Report.

During the visit, the team met with faculty, staff, administrators, members of the Board of Trustees (Board), and students. The team chair met with members of the Board, the president of the College, and various administrators. In addition, the chair visited the offsite Aviation Maintenance Program and the Science Annex. The team also held two open meetings to allow for comment from any member of the campus or local community.

The team found that the college’s Self Evaluation Report was complete and included narrative responses on all ACCJC Standards. However, the quality and availability of the supporting documentation and evidence was very poor. The team found difficulty in locating evidence to support the Standards in the Self Evaluation Report. The College staff was very responsive to our requests for additional information that was provided up to the last day of the visit. The descriptive assertions in the Self Evaluation Report were not always validated in evidence. Some of the evidence was outdated. The planning agendas were not complete enough to cover the work that remains to meet self-stated improvement goals. The team noted that some of the planning agendas related to needs but lacked planning. The Self Evaluation Report presented somewhat of a challenge for the team in that it appeared to be a compilation of several voices. This led to organizational issues and some confusion. In addition, the decision-making lines were not clear or complete. As a result, the team spent significant time trying to understand the functionality of the College decision-making process and authority structure.
It appears that the College is making an effort to provide services and programs that are aligned with the student population. However, these efforts need to be better documented and supported by data. Although the report claims that the Mission statement was approved by the Board in 2009, there is no evidence to support this claim. The June 13, 2006 Board Minutes show that the President reported that the Mission statement was approved by the College Council; however, there was no Board action taken to approve the Mission statement.

The team observed a high level of faculty, staff, and student enthusiasm for and commitment to the College and the instructional programs and services it provides. A hallmark of the College is an emphasis on collegiality and a deeply held belief in the value of participatory improvement and governance of the institution. Students find the learning environment to be supportive and referred to a “familial” atmosphere fostered by the College. Through interactions with various campus employees, the team found that there is genuine interest in seriously committing to the continuous improvement of the College, but the team is convinced that these sentiments must be adopted institution-wide in order to ensure that the College can address the significant need for improvement. The College constituents have not yet whole-heartedly devoted themselves to well-documented, self-reflexive, and data-driven systems and analysis to support improvement in an organized and sustainable manner.

The Board has made significant progress in updating policies, including those related to Human Resources (HR). Though the ACCJC declared that the previous team Recommendation 4 had been met in 2009, the College has slipped back into a backlog of evaluations on all levels except for Tenure-track faculty. The Peralta Community College District (District) does not yet incorporate effectiveness in producing student learning outcomes into its evaluation processes for faculty and others directly responsible for student achievement.

The College and District share policies and procedures that, if implemented, would have improved effectiveness and efficiency, especially regarding institutional planning and employee performance evaluations. The College Self-Evaluation Report lays out a plan that depicts institutional dialog and participatory governance. However, the evidence shows a lack of implementation as well as a lack of documentation of these discussions.

The College’s physical resources are well managed and designed to support student learning programs and services, regardless of location or means of delivery. The College considers the needs of programs and services when planning new buildings, maintenance, and upgrades. The facilities planning processes are designed to ensure that program and service needs determine equipment replacement and maintenance, thus ensuring effective utilization and continuing quality of those programs and services. Capital projects are linked to institutional planning through the District-wide and College policies and procedures that are currently in place.

There are planning documents in place but no documented evidence they are followed. The College and the District are working to resolve the issues related to the Financial Audit findings and the Department of Education Program Review. Since the Budget Allocation Model is a new format, continuous review and analysis should be done to ensure equitable distribution of resources throughout the District.
The College has an established governance and decision-making process. However, College staff members indicate that the implementation could be improved and more inclusive. More clarity is needed in demonstrating how ideas for improving the institution are brought through the governance structure for consideration and action. Establishing a process for evaluating the effectiveness of the College governance structure on a regular and ongoing basis is required by the Standards (IV.A.5). The College is very optimistic about its future based on the arrival of new campus leadership including the President, Vice President of Instruction, and Academic Senate President. The new President has stated a commitment to improved communications, transparency, cohesiveness, and accountability. This has been welcomed by the campus community who report that there is a marked improvement in college morale, and there is the sentiment that the administration is invested and that new ideas will be implemented.
Introduction

The College of Alameda (College) is one of the four accredited Peralta District Community Colleges. Established in 1964, the District primarily serves the residents of Alameda, Albany, Berkeley, Emeryville, Oakland and Piedmont.

The College opened in 1970 and is located on a 62 acre campus. The College’s Aviation Maintenance program is located on a 2.5 acre site adjacent to Oakland International Airport’s North Field. The College also has a nearby (off campus) building, which it shares with Merritt College, that houses science classes and laboratories.

The College has unique career technical education programs that attract students from the greater Bay Area as well as the other Peralta colleges. Associate in Arts (AA) or Associate in Science (AS) degrees may be earned in many areas of liberal arts and occupational studies, with most credits earned transferable to the University of California, California State Colleges and Universities, and to other public and private four-year colleges and universities.

The College shares with the other three District community colleges a commitment to its community. Since 1970, construction bonds have contributed to improvements in the buildings and land and the creation of a baseball field, track, and tennis courts. The most recent construction bond, Measure A (passed 2006), has funded and will soon be the means to replace the C and D buildings. Measure B, a parcel tax, was passed by the voters in June 2012 to expand educational offerings by the colleges.

Since 1996, when the Alameda Naval Air Station was closed, the college has worked with the city of Alameda to develop this part of the island. On campus, the city of Alameda leases the baseball field, and various community groups and secondary institutions lease the track and tennis courts. The Alameda Science and Technology Institute, an early college high school, operates on the campus, as does the One Stop Career Center, an Alameda Workforce Investment Board facility.

Students attending the College are 29 years of age or younger (72% in Fall 2013), the majority are female (52% in Fall 2013), and predominantly Asian or African American.
Commendation/Recommendations

College Commendations

College Commendation 1
The team commends College for creating and maintaining learning communities that provide academic and personal guidance for students, responsible for improving student achievement and engagement.

College Commendation 2
The team commends College for establishing and maintaining the Welcome Center, a barrier-free and inviting entry point for students seeking support services.

College Commendation 3
The team commends the College IT staff for taking the initiative for the restructure of the department to combine instruction and administrative support while providing an enhanced service response time.

College Recommendations

College Recommendation 1
In order to meet the Standards and the Eligibility Requirement, the team recommends that the College develop a process for regular and systematic review of its Mission statement through appropriate college governance processes, receive board approval of the Mission statement, and display it prominently in all college documentation, including the College website. (I.A.2, I.A.3, IV.A.3; ER 2)

College Recommendation 2
In order to meet the Standards, the team recommends that the college ensure that the College mission and goals drive the planning and resource prioritization processes. (I.A.4, III.A.1, III.B.1, III.D.1)

College Recommendation 3
In order to meet the Standards and U.S. Department of Education requirements, the team recommends the College adopt institutional-set standards that will adequately measure satisfactory performance of student achievement. The team also recommends that the College’s governance process be involved in the determination of these standards and the methodology used to set the standards be explained to justify reasonableness of these standards. When the College falls below these standards, the team recommends institution-wide discussion of action, and documentation of such, to be taken to improve performance. (I.B.1-6, IV.A.3)

College Recommendation 4
In order to meet the Standard, the team recommends that formal processes be put into place to document the discussion of student learning. (I.B.1)
College Recommendation 5
In order to meet the Standards and the Eligibility Requirement, the team recommends that the College assess its planning and program review processes to ensure an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, re-evaluation, and continuous improvement. (I.B.6, I.B.7, II.A.2.f; ER 19)

College Recommendation 6
In order to meet the Standards and the Eligibility Requirement, the team recommends that the College document the systematic assessment of course-level, program-level, and institutional learning outcomes and use this assessment to direct college and program improvement. (I.B.1, II.A.2.b, II.A.2.e, III.A.1.b, III.D.4; ER 10)

College Recommendation 7
In order to improve institutional effectiveness, the team recommends that the College document and use the assessment of student support services to engage in thoughtful reflection and improvement. (I.B.1, II.B.1, II.B.3.a, II.B.3.c, II.B.3.d, II.B.3.e, II.B.4, IV.A.1)

College Recommendation 8
In order to meet the Standards, the team recommends that the College incorporate consistent and current data into the planning processes. (I.B.6, III.A.6)

College Recommendation 9
In order to meet the Standards, the team recommends that the College develop and implement a process for regular and ongoing evaluation and assessment of its governance and decision-making structures and process, and use the results to broaden employee participation and improve institutional effectiveness. (I.B.1, IV.A.5)

College Recommendation 10
In order to meet the Standards, the team recommends that the College develop, implement, and assess a comprehensive enrollment management strategy based on qualitative and quantitative information that allows the College to clarify its identity while meeting its mission and the varied educational needs of its students, as well as ensuring that resources are allocated in a manner that effectively supports the direction of the College. (I.B.1, I.B.2, I.B.3, II.A.1.a, II.A.2)

College Recommendation 11
In order to meet the Standard, the College should develop online tutoring for its distance education students. (II.B.1, II.C.1.a, II.C.1.c)

College Recommendation 12
In order to meet the Standard, the team recommends that all personnel performance evaluations be made current according to the approved cycles. (III.A.1.b)

College Recommendation 13
In order to improve institutional effectiveness, the team recommends that all faculty evaluations require the integration and analysis of the assessment of student learning outcomes. (III.A.1.c; ER 13)
College Recommendation 14
In order to improve institutional effectiveness, the team recommends the College collaborate with the District General Services Department of Risk Management to conduct a risk management assessment of College facilities and make recommendations to the College Facilities or College Health & Safety Committees that inform the College Maintenance and Repairs Priority Needs List. (III.B.1)

College Recommendation 15
In order to meet the Standard, the team recommends that the College comply with the recommendation in the Department of Education Program Review dated January 5, 2015 in response to audit findings on data submitted to the NSLDS. (III.D.2.a, III.D.2.b, III.D.3.b, III.D.3.f)

College Recommendation 16
In order to meet the Standards, the team recommends that the Budget Allocation Model be assessed for effectiveness to provide fair distribution of resources that are adequate to support the effective operations of the College. (III.D.2.a, IV.B.3.c)

College Recommendation 17
In order to meet the Standards and the Eligibility Requirement and to comply with the ACCJC Policy on Distance Education and Correspondence Education and the Policy on Substantive Change, the team recommends that the College submit substantive change reports to the Commission as soon as possible and receive approval to offer its programs through distance education and at the off-site science and laboratory building. (IV.A.4, ER 21)

College Recommendation 18
In order to improve institutional effectiveness, the team recommends that the College establish a means to clearly identify and communicate recommendations made through the College governance structure and operational processes to the College president, and how those recommendations improve student learning programs and services. The outcomes of committee work and actions of the president in response to recommendations should be widely and effectively communicated to the College. (IV.A.1, IV.A.2, IV.A.3)

College Recommendation 19
In order to meet the Standards, the team recommends that the College president establish a collegial process that sets values, goals, and priorities; ensure that evaluation and planning rely on high quality research and analysis of external and internal conditions; ensure that educational planning is integrated with resource planning and distribution to achieve student learning outcomes; establish procedures to evaluate overall institutional planning and implementation efforts; and effectively control budget and expenditures. (IV.B.2)

College Recommendation 20
In order to meet the Standard, the team recommends that the College and the District collaborate to clearly delineate and communicate the operational responsibilities and functions of the District from those of the College and consistently adhere to this delineation in practice; and regularly assess and evaluate District role delineation and governance and decision-making structures and
processes to assure their integrity and effectiveness in assisting the College in meeting educational goals. (IV.B.3)

**District Commendations**

**District Commendation 1**
The District’s Institutional Research Department is commended for its work in creating a robust data system for a complex multi-college district. By continuously refining its data model, by developing and supporting a multitude of standard reports and dashboard/data mining reporting strategies, and by providing the needed user training, the department makes available a critical toolset that should be used as the foundation of evidence-based practice.

**District Commendation 2**
The team commends the district and the individual colleges for their efforts to ensure that hiring practices cultivate a workforce that is as diverse as the student population. The district and the colleges within it have successfully maintained college personnel that mirror the student demographics, which enrich the college environment and promote equity.

**District Recommendations**

**Fiscal Management**

**District Recommendation 1**
In order to meet the Standard, the team recommends that the District follow the 2014 audit recommendations and develop an action plan to fund its Other Post-Employment Benefits (OPEB) liabilities, including the associated debt service. (III.D.1.c, III.D.3.c, III.D.1.c)

**District Recommendation 2**
In order to meet the Standard, the team recommends that the District resolve comprehensively and in a timely manner the ongoing deficiencies identified in the 2013 and 2014 external audit findings. (III.D.2.b, III.D.1.h)

**Global Planning**

**District Recommendation 3**
In order to meet the Standards, the team recommends that District General Services (DGS) work with college personnel to implement a plan to address total cost of ownership for new facilities and equipment, including undertaking critical deferred maintenance and preventive maintenance needs at the college in order to assure safe and sufficient physical resources for students, faculty and staff. (III.B.1, III.B.1.a, III.B.2.a)

**Institutional Effectiveness**

**District Recommendation 4**
In order to meet the Standards, the District should clearly identify the structures, roles, responsibilities and document the processes used to integrate human, facilities, technology
planning, and fiscal planning in support of student learning and achievement and regularly evaluate the process in order to fairly allocate resources to support the planning priorities. (III.A.6, III.B.2, III.C.2, III.D.4, IV.B.3.g)

**District Recommendation 5**
In order to meet the Standards, the team recommends that the district ensure retention of key leadership positions and that adequate staffing capacity is available to address the demands of three critical areas reflected in the accreditation standards: institutional effectiveness and leadership, institutional research, and financial accountability and management. (III.A.2, III.A.6)

**Governance**

**District Recommendation 6**
In order to meet the Standard, the team recommends that the district clearly delineate and communicate the operational responsibilities and functions of the district from those of the colleges and consistently adheres to this delineation in practice; and regularly assesses and evaluates district role delineation and governance and decision-making structures and processes to assure their integrity and effectiveness in assisting the colleges in meeting educational goals. (IV.B.3)

**District Recommendation 7**
In order to meet the Standards, the team recommends the Governing Board adhere to its appropriate role. The Board must allow the chancellor to take full responsibility and authority for the areas assigned to district oversight. (IV.B.1, IV.B.1a, IV.B.1.e, IV.B.1.j)

**District Recommendation 8**
In order to meet the Standards, the team recommends that the District systematically evaluate the equitable distribution of resources and the sufficiency and effectiveness of district-provided services in supporting effective operations of the colleges. (IV.B.3.b, IV.B.3.c, III.D.1.a, III.D.1.b, III.D.1.h)
Evaluation of Institutional Responses to Previous Recommendations

College Recommendation 1:
In order to meet the Standards and build upon the considerable progress made in developing a systematic, integrated District-wide planning process, the team recommends that the College move forward in implementing its own comprehensive and integrated strategic planning process that is tied to the College’s mission, values, goals, and priorities and includes the evaluation and refinement of key processes to improve student learning and promote institutional effectiveness (Standards 1A.4, 1B.2, 1B.3, 1B.4, 1B.6, 1B.7, 2A.1.a, 2A.2.f, 2B.4, 2C.2, 3A.6, 3B.1.a, 3B.2.a, 3B.2.b, 3C.1.c, 3C.2, 3D.1, 3D.3, 4A.1, 4A.2, 4A.5, 4B.2, 4B.2.b).

The College started the Institutional Effectiveness Committee (IEC) in 2010, after being placed on probation. This committee’s mission is to ensure that the College maintains a set of ongoing and systematic institutional processes and practices that include planning, the evaluation of programs and services, and the identification and measurement of outcomes across all institutional units (including learning outcomes in instructional programs and student services areas). A faculty member was selected and given a .75 reassignment to head this effort. In 2010, the ACCJC deferred judgment, and the College remained on probation until April, 2011. On April 12, 2011 a two-member team visited Alameda, and the College was removed from probation and placed on warning due to deficiencies in response to district recommendations. In response to recommendation 1, the Self Evaluation Report states that in the June 2011 report from ACCJC “that the College had met the Standard.” It was not clear to which standard the report refers, since the recommendation spans many standards and sub-standards. In examining letters from ACCJC to the District and College, it appears that the removal from probation to warning was centered around District recommendations and not those specific to the College, such as Recommendation 1. In the College Midterm Report, March 2012, changes to the Integrated Planning and Budget model were explained that address a more college-centered planning process. This process is to include a review of specific data sets, and college and district strategic goals. Using this process, action priorities are to be determined by use of a planning summary matrix and rubric that uses quantitative and qualitative data. These action priorities are to be reviewed in annual program updates (APUs) which are then compiled into a comprehensive budgetary request matrix. The budgetary request matrix should then go to the budget committee, academic senate and college council for review and finally to the College President. The final requests then go to the District for integration into District-wide planning.

In examining the evidence provided by the College that this process is being followed, the planning summary matrix document, which plays a foundational role in the process described above, was found in the Educational Master Plan for 2008-09, but no evidence was available to show that it has been used in annual program updates or anywhere else at the college since then.

The comprehensive budgetary request matrix was found in the Institutional Planning 2014 document. March 2014 college council minutes show a summary of resource requests gleaned from annual program updates, but no ranking was documented. The budgetary matrix does not contain any links of resource requests to College goals or to student learning and achievement. There is no evidence of quantitative and qualitative data being used to make these resource
determinations, and in conversations with department chairs and the Academic Senate President, it was found that different criteria are used by each group to prioritize faculty hiring requests.

There is no mention of specifics for evaluation and refinement of key planning processes. On the IEC website it is indicated that while the Planning and Budget chart shows a systematic review of program review, unit plans, mission, vision and goals, “…there is no formal committee that has responsibility of this review process.” The IEC chair stated that review of the APUs is done informally, with no written feedback. The IEC has not reviewed the Mission statement. The College has not adequately addressed this recommendation and does not meet the Standards. See 2015 College Recommendation 2.

College Recommendation 2:
*In order to meet the Standards, the team recommends that systems to support internal campus communication, as well as College-District communication, be improved to support the optimal functioning of the College in promoting student learning (Standards 1B.1, 1B.2, 1B.4, 1B.5, 1B.7, 2A.2.a, 2A.2.b, 2A.2.f, 2B.4, 2C.2, 3A.6, 3B.2.b, 3C.2, 3D.1.a, 3D.1.d, 3D.3, 4A.1, 4A.2, 4A.2.a, 4A.3, 4A.5, 4B.2, 4B.2.b, 4B.2.e, 4B.3, 4B.3.f).*

Formal documentation of internal processes and conversations is lacking. Minutes from meetings are not regularly recorded and available. Those that are found lack details, and are more like agendas than minutes. On the instructional side, tracking of student learning outcomes assessment shows that 194 of 342 courses in 2013-14 had no assessment plans, and 119 of these 194 courses have had no assessment plans in 2011-12 and 2012-13. There is no evidence in Taskstream of assessment of program learning outcomes. Non-instructional areas are also lacking in terms of assessment. While there is a portion of the Annual Program Updates (APUs) that focus on student learning outcomes, what is recorded in many instances is a summary of how many assessments have been done rather than a conversation on what students have learned. Factbooks for the College have not been updated since 2009. The last president’s newsletter was in 2013. Overall, there seems to be a lack of documentation on recent, regular internal campus communication focused on student learning. The College has not adequately addressed this recommendation and does not meet the Standards. See 2015 Recommendation 4.

College Recommendation 3:
*In order to meet the Commission’s 2012 deadline, the College must accelerate its progress in developing and assessing course-level and program-level student learning outcomes and using assessment data for improvement. Further, in order to meet the Standards, the College must also ensure compliance with its program review and unit planning processes and accelerate its progress toward creating a data-driven environment in which continuous assessment is used as vehicle for institutional improvement (Standards 2A.1, 2A.1.a, 2A.1.c, 2A.2.a, 2A.2.b, 2A.2.e, 2A.2.f, 2B.4).*

Although this recommendation did not specifically address Standard I, there were many elements that overlapped those found in Standard I. As noted above, while there may be broad dialogue about institutional effectiveness taking place, it has not been well documented. Course-level assessment is being done, but not on a continual basis in a significant number of courses. Non-instructional areas are also lacking in terms of assessment. Discipline program reviews do not
always document that discussion of assessment is taking place, and when Student Learning Outcome (SLO) assessment is mentioned, it is done in a superficial manner. Mapping of course outcomes to institution level outcomes is sparse, making assessment of Institutional Learning Outcomes (ILOs), making this method unreliable. There was no evidence that ILOs are measured in other ways. Additional institutional-set standards should be considered to measure College goals. There was no evidence found that indicates college processes are evaluated on a regular basis.

The Institutional Planning document dated 2014 says that program reviews and unit plans are “submitted to coordinating bodies... for review and consideration” and that proposals are ranked, but no evidence that this ranking was done based on goals and outcomes was provided. There is a program review handbook that lists the core data elements that are to be included in the program reviews. These data include numbers of degrees and certificates (disaggregated by ethnicity and gender), transfer rates, enrollments by age, gender, ethnicity, and special populations, retention rates, persistence, FTES/FTEF, and grade distributions. In examination of program reviews, the reports are not standardized, and data elements are not all included. All that were examined contained some data, but the data sets were different from discipline to discipline. The regular reporting of SLO assessments in the program review is concerned more that assessments have been carried out than what was learned from the assessments. Also, the reporting of SLO assessment in the annual program updates does not always agree with what is found in Taskstream. Although Taskstream is set-up to host program reviews, there was only one program review in that system for 2012-13. Others are available on the website, but many have not conducted program review recently. Annual unit plans seem a bit more standardized, but data reporting is not uniform and there is little in the way of discussion of learning outcomes.

There are conflicting documents with respect to the Annual Program Unit (APU) plans, in the 2007 template (which appears on the Academic Senate website) and in the Institutional Planning 2014 document. The APUs are found online, although there is a place in Taskstream for them. The IEC chair indicated that the committee is working to implement program review in Taskstream, and there is a Program Review Task Force that has been meeting since November 2014 to refine elements that will be included in program reviews and in the Annual Program Updates. This recommendation has not been adequately addressed and the Standards are not yet met. See 2015 Recommendations 5 and 6.

College Recommendation 4:
In order to meet the Standard, and consistent with the recommendation of the 2003 visiting team, the team recommends that the College devote the time and resources needed to complete regular, systematic evaluations for classified professionals, full-time contract faculty, and part-time faculty (Standard 3A.2).

The 2012 Midterm Report noted that the College had implemented an aggressive plan to complete all delinquent evaluations for classified prior to the end of the fall semester 2009 and reached its goal by Fall 2010. Since 2010, however, the cycle of evaluations has not been followed and the backlog of evaluations, though less in number than in 2003, has returned. In fact, upon review of personnel files, while tenure-track faculty evaluations are on cycle, many tenured faculty had not been evaluated in as many as fourteen years (2001). A faculty member
hired in 2003 shows no evidence of evaluation in the personnel file. Several part time faculty files show no evidence of evaluation. Classified personnel files showed evaluations over ten years old.

Though the ACCJC declared that the previous Team Recommendation 4 had been met in 2009, the College has slipped back into a backlog of evaluations on all levels except for tenure-track faculty. The District does not yet incorporate effectiveness in producing student learning outcomes into its evaluation processes for faculty and others directly responsible for student achievement. (Standards III.A.1.b, III.A.1.c) The work to correct this deficiency has not been sustained, and the Standards are not met. See 2015 Recommendation 12.

College Recommendation 5:
In order to meet the Standards, the team recommends that the College advance and refine the implementation of the District-wide computer information system (Standards 3C.1a, 3C.1c, 3C.1d, 4.B.3.b).

The major modules are implemented and functioning. The last of the modules is Financial Aid. There are some challenges with the implementation, but a resolution team is working to correct the inefficiencies. This recommendation has been addressed and the Standards have been met.

College Recommendation 6:
In order to meet the Standards, the team recommends that the College develop, implement, and integrate the College budget development processes with the new District resource allocation model (Standards 3D.2.a, 3D.2.b, 3D.2.d, and 3.D.2.g).

This recommendation has been completed. The College has developed Institutional Planning 2014 that has all of the planning elements and a committee structure is in place to assist with the implementation of plan. The Standards are met.

District - Responses to Prior District Recommendations

2009 District Recommendation 1: Board and District Administration:
The team recommends that the district assess the overall effectiveness of its service to the college(s) and provide clear delineation of functional responsibilities and develop clear processes for decision making.

Response:

Central to addressing this recommendation was the implementation in Fall 2009 of the Planning and Budgeting Integration Model (PBIM) and the district-level committee structure comprised of the District Technology Committee, the District Facilities Committee, the District Education Committee, and the higher level Planning and Budgeting Council, which reports directly to the Chancellor. Each of these four committees includes the appropriate district office vice chancellor or associate vice chancellor, appropriate district and college administrators, faculty, and staff from the four colleges and district office service centers. What was noted in 2009, and has proven to be true, is that these committees and their membership are able to actively address district services and through well-designed meeting agendas are able to focus on collaboration.
between the District Office service centers and the colleges, especially in relation to centralized services. This structure has provided clarity regarding district versus college functional responsibilities and a clear process for decision making, with all final decisions being made by the Chancellor. The Chancellor’s Cabinet is comprised of the four college presidents and lead district administrators.

As noted previously when this process was implemented five years ago, it was agreed that college planning is the foundation of the Planning and Budgeting Integration (PBI) process since the colleges are closest to and most responsible for the educational needs of the students and it is the colleges that are charged with ensuring student success. The PBI requires the colleges to conduct program reviews every three years, to provide annual program updates, and to develop annual educational and resource planning priorities. These efforts are in alignment with the five district strategic planning goals and the annual institutional objectives/outcomes. The colleges integrate the results of their program reviews into planning, in technology committees, curriculum committees, facilities committees, etc. During the annual institutional planning process, the colleges develop plans addressing instructional and student services programs, staffing priorities, fiscal priorities, IT and equipment, facilities, and marketing. It has been established that the planning of the four colleges must drive district planning, which then drives the provision of district services or centralized services.

The role of the Education Committee, Technology Committee, and Facilities Committee is to support the colleges in coordinating their efforts and resolving issues. These committees also provide subject matter expertise in their respective areas by including college and district representatives with relevant knowledge, responsibility, and experience. These committees are responsible for communicating with their counterpart committees at the colleges. These district committees are charged with developing district-wide recommendations that best serve students and the community by using evidence-based processes and criteria. Further, the overarching Planning and Budgeting Council is charged with making recommendations to the Chancellor. The Council often receives draft policy initiatives from the Chancellor in his effort to seek input and recommendations before he takes any significant action.

The Planning and Budgeting Council (PBC) is responsible for providing oversight on the implementation of strategic planning and annual institutional objectives/outcomes. In fact, each of the four committees is required to set annual objectives aligned with the strategic planning goals. The PBC also ensures accountability.

The PBI process begins each year with an all-day off-site summit wherein all committee members gather and hear from the Chancellor regarding the key issues that need to be addressed during the year. The committees begin to set their annual objectives and to review the previous year’s objectives. The summit has proven to be a key reminder of the need for District Office service centers and the colleges to work collaboratively, transparently, and accountably – which addresses functional responsibility and decision making.

Complementing the PBI process, the Chancellor’s Cabinet meets weekly. The Chancellor’s Cabinet is comprised of the Chancellor, the four vice chancellors (Educational Services, Finance and Administration, Human Resources and Employee Relations, and General Services), the
Associate Vice Chancellor of Information Technology, the Associate Vice Chancellor of Students Services, General Counsel, the Director of Public Information, Communication and Media, and the four college presidents. The cabinet has helped to clarify functional responsibilities and processes for decision-making. The Chancellor’s Cabinet reviews the work and actions of the PBI Committees and addresses topics which may be sent to the PBI Committees for input and feedback. The ongoing weekly interactions among these cabinet members facilitate open dialogue regarding all aspects of district planning and district operations.

During the process of updating Board Policies and District Administrative Procedures, two administrative procedures relevant to this recommendation were approved. AP 2430 (Delegation of Authority to the Chancellor’s Staff) details the roles and responsibilities of district managers who report directly to the Chancellor. AP 3250 (Institutional Planning) details decision making through the district-level committee process.

The district has continued to address this recommendation regarding a clear delineation of functional responsibilities and clear processes for decision making. The district and colleges meet the standards association with this recommendation.

Since the fall of 2009, the district administration has been implementing the Planning and Budgeting Integration Model. The district has revisited the district level committee structure to provide clarity on the functions of each unit at the district level. The district has developed the Planning and Budgeting Integration (PBI) process directly linked to the college planning process. The PBI process outlines the decision making process and evaluated every year. Board policy related to establishing clear functional responsibilities and decision making has been revised.

**Conclusion:**

With the additional structure established, the district has fully implemented the recommendation.

**2010 District Recommendation 2:**

*In order to meet the Standards, the team recommends the District evaluate the reporting structure with regard to the inspector general so that the position is properly placed in the hierarchy of the district organization.*

**Response:**

The inspector general position has been eliminated.

**Conclusion:**

This recommendation is no longer applicable to the District’s organization.

**2010 District Recommendation 7:**

*In order to meet the Standard, the visiting team recommends a change in the reporting relation of the Inspector General from the Board of Trustees to the Chancellor.*
Response:

As reported in the Follow-Up Report of October 15, 2010, at the District Board Meeting on July 19, 2010, it was unanimously agreed that the Inspector General position would report directly to the Chancellor. On January 5, 2011, the individual serving in this position resigned from the District. At that time, the position was discontinued.

The Follow-Up Report dated October 15, 2010 demonstrated the change in the reporting structure of the Inspector General. Furthermore and according to records, the position of Inspector General has been discontinued as of January 2011.

Conclusion:

The district has fully implemented the recommendation and recognized the change to discontinue the position.

2010 District Recommendation 3:
*In order to meet the Standard, the team recommends that District clarify the role of the board members with respect to the work of the District managers. This would include a review of reporting structures, methods for board inquiries, distinction between board policy setting and oversight, and management, leadership, and operational responsibilities for the District.*

Response:

Board policies have been updated to clarify the role of Board members with respect to the work of the district Chancellor. The delegation of responsibilities has been defined through board policy. During an interview with the Chancellor, this standard remains an area of concern as the district must clarify the role of board members with respect to district managers and operations. In the Special session meeting held on March 9, 2015, the Board discussed the mechanisms for communicating with the Chancellor, methods for board inquiries, delegation of authority issues and role distinction but articulated the challenges operationalizing board policy.

Conclusion:
The recommendation has not been implemented.

2010 District Recommendation 4:
*In order to meet the Standard, the team recommends the District provide ongoing and annual training for board and management on roles and functions as it relates to District policy and operations.*

Response:

Since 2010, a series of board workshops have been provided to the board on critical topics: roles and responsibilities, and financial responsibilities of trustees, discussion on 2010 accreditation recommendations, accreditation issues on governance and leadership, board governance, policies, strategic planning, board- chancellor relations, chancellor’s goals, board goals and
professional development (June, September, October of 2010, November 2011, October 2012 (2-day session), November 2013, December 2014, February 2015 board meeting agendas). In addition, the Board evaluation tool has been aligned to accreditation standards and district strategic goals.

It is noted that two trustees have completed the CCLC Excellence in Trusteeship program.

**Conclusion:**

The district has implemented the recommendation.

**2010 District Recommendation 5: In order to meet the Standard, the team recommends the District engage in ongoing discussion about the role of the board and how it serves its trustee role for the good of the District. The role of the board should be reviewed regularly with each board member.**

**Response:**

The review of the ACCJC October 10, 2010 Follow-up Report highlights the board development activities that have engaged the board in understanding their role as trustees. Over the last five years, trustees have received trainings related to roles and responsibilities, governance and leadership. Most recently the board held a workshop to further develop knowledge and skills as a high performing team. Results of evaluations conducted by the board continue to demonstrate the need for ongoing development. The Board would benefit from evaluating the impact of the development activities as it relates to board effectiveness. It is noted that trustees must pay more attention to the chancellor-board relationships.

**Conclusion:**

The district has implemented the recommendation. However, as reflected in Recommendation 1, below and in new District Recommendation 7 (2015), the District has not resolved the deficiency and does not meet the Standard.

**January 2011 District Recommendation 1: In order to meet the Standard, the team recommends that the 2010 Recommendation 5 be revised to include the following language: The Team additionally recommends that the Board of Trustees continue to redefine the appropriate roles of the Board and its relationship to the Chancellor. The Board of Trustees should refine and change the roles and charges of the Board Committees so that they also reflect an appropriate role for the Board.**

**Response:**

As noted in recommendation 5 (2010) above, the recommendation, the trustees have completed a series of training to address trustees roles and responsibilities and governance. According to information posted on the Board Committees website page, the board of trustees has the following board committees in operation:
Concerns about the board roles and its relationship to the chancellor are still evident based on information gathered through conversations with chancellor and the board. Evidence on the charge and responsibility of board committees was not found.

**Conclusion:**

The district has not implemented the recommendation.

**2010 District Recommendation 8:**
*In order to meet the Standard, the visiting team recommends a regular review of board roles to assure that the board is relying on the Chancellor to carry out the policy set by the board.*

**Response:**

The board workshops conducted annually have been focused the review of the board roles to assure the chancellor is carryout his responsibility to implement board policy.

**Conclusion:**

The district has implemented the recommendation.

**2010 District Recommendation 9:**
*The team recommends the Board of Trustees and District adhere to their appropriate roles. The District must serve the colleges as liaison between the colleges and the Board of Trustees while assuring that the college presidents can operate their institutions effectively. Meanwhile, the Board must not interfere with the operations of the four colleges of the district and allow the Chancellor to take full responsibility and authority for the areas assigned to district oversight.*

**Response:**

Over the last 5 years, trustees have received a variety of training to address the way in which they can adhere to their roles. The review of the 2010 ACCJC follow-up report provides the description on how the recommendation has been met.
In recent meetings with the chancellor and the board, it is worth noting that there are areas of concern related to how well trustees are adhering to their roles. Trustees are not evaluating how effective training and development activities are changing behavior and clarifying roles.

**Conclusion:**

The district has partially implemented the recommendation.

**2010 District Recommendation 6:**
*In order to meet the Standards, the team recommends the board consider regular review of the code of ethics to assure thorough understanding and application of its intent.*

**Response:**

The district completed the revision of the Board Policy 2710 Conflict of Interest and 2715 Code of Ethics and Standards of Practice. The policies delineate tenants for ethical conduct and conflict of interest. The policies reflect the duty of public officials under Common Law, the Political Reform Act, Government Code 1090 and specific statutory requirements and prohibitions under the Brown Act. Board workshops conducted during the cycle reveal annual training session on ethics, conflict of interest, and open government. The board self-evaluation includes the evaluation of the code of ethics.

**Conclusion:**

The District has implemented the recommendation. Board Policy 2715 Code of Ethics could include statements on behavior contrary to the Code of Ethics as part of the policy.

**January 2011 District Recommendation 3:**
*The team recommends that the Board of Trustees develop and implement a plan to review all Board policies so that the policies reflect only policy language and that the operational processes for these policies be reflected in a system of administrative regulations (procedures).*

**Response:**

The review of policy indicates that Board policy and administrative procedures revisions has been completed and meet the Community College League of California (CCLC) numbering system. The revisions began in 2011.

**Conclusion:**

The district has fully implemented this recommendation.

**2012 Commission Recommendation 4:**
*[In the June 2011 action letter, ACCJC stated the following:]*

""
While evidence identifies progress, the District has not achieved compliance with Standard IV.B and Eligibility Requirement #3. Specifically, the District has not completed the evaluation of Board policies to the end of maintaining policies that are appropriate to policy governance and excluding policies that inappropriately reflect administrative operations.

Therefore, in order to meet Standards and Eligibility Requirements, the District must evaluate all Board policies and implement actions to resolve deficiencies.

[In the July 2, 2012 letter, ACCJC updated the recommendation:]

The District has revised a significant number of its Board Policies. This project needs to be completed so that all policies are reviewed and revised as necessary by March 15, 2013.

The review of policy indicates that Board policy and administrative procedures revisions has been completed and meet the Community College League of California (CCLC) numbering system. The revisions began in 2011.

**Conclusion:**

The district has fully implemented this recommendation.

**2009 District Recommendation 7:** [from COA Self Evaluation, p. 60]

The team recommends that the District take immediate corrective action to implement all necessary system modifications to achieve access to a fully integrated computer information management system, including modules for student, financial aid, human resources, and finance. All corrective action and system testing should be completed within two years and the governing board should receive regular implementation progress reports until project completion (Standards 3D.1.a, 3D.1.b, and 3D.2.a).

This District Recommendation on Financial and Technology all relate to the implementation and integration of the enterprise software. These recommendations are complete. The major modules are implemented and functioning. The last of the modules is Financial Aid. There are some remaining challenges with the implementation but a resolution team is working to correct the inefficiencies. This recommendation has been addressed and the Standards are met.
Eligibility Requirements

1. Authority
The team confirmed that the College is authorized by the State of California to operate as an institution of higher education and a degree-granting institution based on its accreditation by the ACCJC.

2. Mission
The College has a Mission statement that reads, “The Mission College of Alameda is to serve the educational needs of its diverse community by providing comprehensive and flexible programs and resources that empower students to achieve their goals.” It appears that the College is making an effort to provide services and programs that are aligned with the student population; however, these efforts need to be documented and supported by data that reflects achievement of student learning. There is no documented review process that states when the Mission statement should be reviewed to see if the college is indeed meeting its mission, and there were no explicit links in the program review process to the college mission. The team found that the College does not meet this Eligibility Requirement. See College Recommendation 1.

3. Governing Board
The team confirmed that the governing board for the College is the District Board of Trustees. The primary responsibility of the Board is to ensure the quality, integrity, and stability of the District through its policies and procedures. The Board consists of seven public members elected by District area and two non-voting student trustees. Open meetings are held regularly with opportunities for public input. Members of the Board have no employment, family, ownership or personal financial interests related to either the District or the Colleges.

4. Chief Executive Officer
The team confirmed that the College President serves as the Chief Executive Officer for the college and is responsible for the services, administration, and operation of the College.

5. Administrative Capacity
The team confirmed that the institution has sufficient staff and administration, with appropriate preparation and experience, to provide the administrative services necessary to support the College’s mission and purpose. All administrators are selected using appropriate statewide minimum qualifications and District guidelines and have the education and experience to perform their assigned duties.

6. Operating Status
The College states that approximately 53% of students were degree-seeking in the 2013-2014 academic year.

7. Degrees
The team confirmed that the College offers thirty-one associate's degrees with approximately half of its students seeking a degree.
8. Educational Programs
The team confirmed that the educational programs are congruent with the mission and are in recognized fields of study. The degree programs are two years in length and result in students reaching established SLOs, although not all program-level outcomes are listed in the catalog.

9. Academic Credit
The team confirmed that the College of Alameda assigns academic credit on generally accepted practices for semester-system colleges. The College uses the Carnegie formula and clearly distinguishes between degree applicable and non-degree applicable courses.

10. Student Learning and Achievement
The College has defined student learning outcomes at the course and degree levels, but has yet to systematically assess course-level and degree-level outcomes. The team found that the College does not meet this Eligibility Requirement. See College Recommendation 6.

11. General Education
The team confirmed that the College has an established general education sequence as part of the completion of its degrees that provides a breadth of knowledge and requires demonstrated competence in natural sciences, social and behavioral sciences, humanities, language and rationality, and ethnic studies. The College has defined student learning outcomes for the general education coursework.

12. Academic Freedom
The team confirmed that the College's policy on academic freedom (BP 4030) establishes an environment that encourages academic freedom and inquiry.

13. Faculty
The team confirmed that the College employs a sufficient number of full-time and part-time faculty with appropriate credentials and expertise. The contractual responsibilities of faculty require the participation on the assessment of SLOs. However, this is not being done consistently. See College Recommendation 13.

14. Student Services
The team confirmed that the College provides extensive services and support to many student populations.

15. Admissions
The team confirmed that the College has established and published admissions policies and procedures consistent with its mission.

16. Information and Learning Resources
The team confirmed that the College provides students and staff with access to adequate information and learning resources and services to support educational programs.
17. Financial Resources
The team confirmed that the College through the District, has a publically documented funding base which mirrors the SB 361 Revenue Based model. There is an established District-wide Planning and Budgeting Committee that addresses resource allocation. These activities are supported by published budget reports and regular reports to the Board.

18. Financial Accountability
The team confirmed that the District annually undergoes a financial audit conducted by an external audit firm. The budgets are published on the website, taken to the Board for approval and published in the annual Chancellor’s Office 311 Report. The Financial Aid program is part of the annual audit and an opinion is rendered based on that work. The student loan default rate is published on the website and is below the national average of 30% for each college.

19. Institutional Planning and Evaluation
The evaluation of instructional programs, student support services, and library and other learning support services is done through annual program updates, program review, and outcomes assessment. There was no evidence provided that systematic assessments of these evaluation mechanisms are in place, or that ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, and re-evaluation exists. The team found that the College does not meet this Eligibility Requirement. See College Recommendation 5.

20. Integrity in Communication with the Public
The team confirmed that the College provides a print and electronic catalog that contains precise, accurate, and current information to ensure integrity in communication with the public.

21. Integrity in Relations with the Accrediting Commission
The team confirmed that the College complies with all reporting requirements to all external agencies, including ACCJC. However, the College does not comply with the ACCJC Policy on Distance Education and Correspondence Education and the Commission Policy on Substantive Change. The College is also out of compliance with Eligibility Requirements 2, 10, 13 and 19. See College Recommendations 1, 5, 6, 13 and 17.
Commission Policies Compliance

Public Notification of an Evaluation Visit and Third Party Comment

The team confirmed that the ACCJC accreditation status is referenced appropriately in the catalog, schedule of classes, and the College website. The team did not find evidence of seeking third party comment in advance of the visit. The College has not met this policy.

Policy on Distance Education and on Correspondence Education

The team confirmed that the College has established definitions for classifying distance education (DE) coursework and associated requirements in alignment with USDE definitions. The College has categorized DE into three categories: online (100%), hybrid (51%+ online), web-assisted (50% or less online). Student learning outcomes and assessment for DE classes are the same as those in their face-to-face counterparts.

The College has adopted the District Board Policy (BP) 4105 on DE which addresses expectations for instructor training, online course scheduling, student authentication, and substantive and regular contact, which is compliant with the Commission’s Policy on DE and Correspondence Education (CE). The College has begun to establish DE processes that ensure adherence to this policy; however, the College is not yet in compliance.

For example, the College’s DE Addendum, which is used to approve courses for DE, asks if the course makes accommodation for students with disabilities. A number of the College’s DE Addendums in CurricUNET state that the course does not make accommodations for students with disabilities, though apparently, these courses have been approved. Many of the online courses do not use the Learning Management System Moodle, meaning that it is difficult to assure that student authentication is being verified. The DE Addendum does not clearly articulate expectations for regular and effective contact between instructor and students. While training for online instructors is recommended by the DE Committee Chair, and BP 4105 requires that the instructor “must have” training, the team found that this training requirement has not been strictly enforced. Institutional processes need to adhere to all applicable DE policy requirements.

The College has not demonstrated compliance with the Commission Policies on Distance Education and Correspondence Education. (602.16(a)(1)(iv), (vi); 602.17(g); 668.38) See College Recommendations 11 and 17.

Standards and Performance with Respect to Student Achievement

The College has done some work to comply with USDE regulations regarding development of institutionally developed standards to demonstrate student success, including standards for successful course completion. However, the standards are not sufficient to truly gauge student success and achievement and are not robust enough to guide institutional self-improvement. The standards do not include measures such as licensure rates and job placement information. The College did not provide evidence that the standards are being used to evaluate programmatic and
institutional performance. The College did not offer evidence of how the performance indicators were selected nor how the standards were derived. There was no evidence of College-wide discussion of the standards and there was no evidence of action taken when the college fell below their standards.

The College has not demonstrated compliance with the Commission Policies on Standards and Performance with Respect to Student Achievement. (602.16(a)(1)(i); 602.17(f); 602.19 (a-e)) See College Recommendation 3.

**Credits, Program Length, and Tuition**

District *Administrative Policy (AP) 4020* specifies the formalized credit hour policy for all colleges within the District.

The policy states:

“V. For purposes of federal financial eligibility, a “credit hour” shall be not less than:

A. One hour of classroom or direct faculty instruction and a minimum of two hours of out of class student work each week for approximately 15 weeks for one semester, or the equivalent amount of work over a different amount of time; or

B. At least an equivalent amount of work as required in the paragraph above, of this definition for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours”.

College practice regarding the award of units reflects the District policy and is published in the College Catalog. This statement is titled the “Definition of Unit Value” and explains the ratio of hours of study to units. The assignment of units in accordance with these ratios is the purview of the Curriculum Committee. The college “Tech Review Checklist” refers to evaluating the ratio of instructional hours to units. Degree program lengths are approved by the College Curriculum Committee. All College Curriculum Committee actions are reviewed and approved by the District Council on Instruction, Planning and Development. This secondary level of review ensures that hours and units and degree program lengths are consistently applied across the district.

The institution demonstrates compliance with the Commission *Policy on Institutional Degrees and Credits*, as credit hour assignments and degree program lengths are within the range of good practice in higher education. The District has formally approved a policy that assures sustainability and uniformity and the College has developed and follows procedures that ensure instructional hours and credits and degree program lengths are within the norms expected in higher education.

The College meets the Policies on Credits, Program Length, and Tuition. (600.2 (definition of credit hour); 602.16(a)(1)(viii); 602.24(e), (f); 668.2; 668.9)
Transfer Policy

*AP 4050* describes four-year and high school articulation; however, the information regarding high school articulation is out-of-date. *AP 5120* describes the function of the College Transfer Center. The College Catalog publishes information regarding transfer to four-year institutions and students have access to transfer information at the Transfer Center, its website, and through ASSIST. The catalog provides information for students about the applicability of AP, IB, CLEP to general education requirements. College students have a district transcript, so there is no need for a reciprocity agreement amongst the four colleges. There is no catalog policy that communicates with students regarding high school articulation. The College has not developed or published a clearly stated policy and procedure of consideration of transfer of credit to their institution. The team suggests that such a policy and procedure be developed and clearly communicated to students.

The College has not demonstrated compliance with the Commission Policy on Transfer of Credits. (602.16(a)(1)(viii); 602.17(a)(3); 602.24(e); 668.43(a)(ii))

Student Complaints

The team confirmed that the College has policies and procedures for handling student complaints, and that this information is available to students in the catalog. The team confirmed that records of student complaints and subsequent proceedings are stored in secured cabinets in the office of the Vice President for Student Services and contained pertinent records dating back to the last comprehensive evaluation in 2009. The team’s review of a sampling of student complaint records did not indicate any systematic issues that would indicate the College’s noncompliance with the Standards. Although not in the College catalog, the team confirmed that the institution posts the names of associations, agencies and governmental bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints. The College meets the Policies on Student Complaints. (602.16(a)(1)(ix); 668.43)

Institutional Disclosure and Advertising and Recruitment Materials

The team confirmed that the College provides accurate and appropriately detailed information to students and the public through the publication of the catalog and on the College website that contains information required for compliance with the ACCJC Policy on Institutional Advertising and the Policy on Representation of ACCJC Accredited Status. The team confirmed that the College adheres to the ACCJC’s Policy on Student Recruitment for Admissions. The College meets the Policies on Institutional Disclosure and Advertising and Recruitment Materials. (602.16(a)(1)(vii); 668.6)

Title IV Compliance

The College regularly reviews the default rate and publish it as part of the Planning and Budget Council (PBC) meeting minutes. The College is under the default rate of 30%. The College received a program review from the Department of Education. The findings were principally the
result of the inability to correctly report data. The underlying awards, draw downs, and disbursements were, according to the external audit findings, all correct; however, when the data was sent to the clearing house, it was not complete. These findings are being worked on by the internal auditor, the new Financial Aid Director, and IT. See College Recommendation 8.
Standard I: Institutional Mission and Effectiveness

Standard IA – Mission

General Observations

It appears that many processes at this College are District-centered, especially concerning mission, goals, budget, and research. Documentation of processes for review of the College's Mission is needed.

Findings and Evidence

The Mission of the College is to serve the educational needs of its diverse community by providing comprehensive and flexible programs and resources that empower students to achieve their goals.

The Self Evaluation Report lists conflicting dates for Board approval of the Mission statement – both 2009 and 2011 were cited as approval dates; however, there is no evidence to support these claims. The 2012 Midterm Report states that the mission is reviewed at least once every six years (p. 95) and every three years (on p.116), and offers evidence that the latest review was presented to faculty at FLEX in 2014, but there is no documented process for this review. There is no evidence that the review of this mission was conducted using the College’s governance and decision-making processes. While the Mission statement does appear on the College’s webpage and in the College Catalog, it is not prominent and is difficult to locate. As a foundational document, this should be displayed front and center in the catalog and on the webpage. (I.A.2, I.A.3; ER2). Eligibility Requirement 2 has not been met.

The College offers three student success learning communities having cultural themes that focus on readings and learning strategies for Asian/Pacific American, African American, and Latino students, reflecting the major ethnic subpopulations at the College. The report states that the CCSSE results are used in the review of the College’s Mission and construction of college goals, but evidence of this process was not found. While there is a History/Program Mission component in the Instructional annual program update template, there is no apparent link to the College’s mission in program reviews or annual program updates. There is no mention of a link to College mission in the student services program review template (I.A.1, I.A.4)

Conclusion

It appears that the College is making an effort to provide services and programs that are aligned with the student population. However, these efforts need to be better documented and supported by data. Standard I.A.2 has not been met. Although the report claims that the Mission statement was approved by the board in 2009 on p.113 and in 2011 on p. 115, there is no evidence to support either claim. The June 13, 2006 Board Minute (p.11) show that the President reported that the Mission statement was approved by the College Council; however, there was no Board action taken to approve the Mission statement.
The Mission statement is published, but it is difficult to locate in publications and should be more prominently displayed. The College does not meet Standard I.A.3. There is no documented review process that states when the Mission statement should be reviewed and how this review should be done to involve the institution’s governance and decision-making processes. The College does not meet Standard I.A.4. Most of the evidence offered in this section pertained to District information. It is unclear how the College Mission is linked to institutional planning.

**College Recommendations**

**College Recommendation 1**
In order to meet the Standards, the team recommends that the College develop a process for regular and systematic review of its Mission statement through appropriate college governance processes, receive board approval of the Mission statement and display it prominently in all college documentation, including the College website. (I.A.2, I.A.3, IV.A.3; ER 2)

**College Recommendation 2**
In order to meet the Standards, the team recommends that the College ensure that the College mission and goals drive the planning and resource prioritization processes. (I.A.4, III.A.1, III.B.1, III.D.1)
Standard I: Institutional Mission and Effectiveness
Standard IB – Improving Institutional Effectiveness

General Observations

Program review and annual program updates are inconsistent across the college in terms of the quantitative data used and analysis. Course assessment results are lacking for several programs for a three-year period. This lack of assessment information would indicate a problem in factoring learning assessment into institutional priority setting.

There are two institutional-set standards in place and this seems insufficient. These standards do not seem to support the college mission or goals and do not adequately measure student achievement. There is no documentation to show how these standards were chosen, nor is there explanation of the methodology chosen to arrive at the percentages. The College fell below the institutional standards for course completion Fall 2008 through 2013, with the exception of Fall 2011 and fell below every standard for retention from Fall 2008 through Fall 2012. There is no evidence of discussion on how to improve institutional performance.

The College does not have research capabilities of its own and relies on the District to supply data for its needs, possibly resulting in a lack of available resources for decision-making. The College has identified in its Self Evaluation Report that additional resources in the area of institutional effectiveness are needed.

Findings and Evidence

The College instituted the IEC in 2010, after being placed on probation. This committee’s mission is to ensure that the college maintains a set of ongoing and systematic institutional processes and practices that include planning, the evaluation of programs and services, and the identification and measurement of outcomes across all institutional units (including learning outcomes in instructional programs and student services areas). A faculty member was given a .75 reassignment to head this effort. While this committee has made progress in establishing SLOs for instructional and student service areas, there has been a lack of documented results on student learning. In reviewing the number of courses that have not started assessment plans, 194 of 342 courses in 2013-14 had no assessment plans, and 119 of these 194 courses have had no assessment plans in 2011-12 and 2012-13. In quite a few cases, whole programs lack assessment plans. Without assessment plans, there is no documentation of assessment results and no actions for improvement of student learning. Program reviews and annual program updates are uneven in terms of preparation, and often do not contain the same data sets for program evaluation. Analysis of quantitative data and student learning is typically superficial in nature, if present at all. Many of the College committees have had discussions on student success. However, lack of information on student learning and the cursory nature of reporting student learning and achievement in the program review process leads to a lack of self-reflective dialogue regarding student learning. A College-wide survey on institutional effectiveness, conducted in 2014 rated agreement that the College has conversations (formal and informal) about the improvement of student learning that are (a) ongoing (b) collegial, and (c) self-reflective. While the majority of
respondents agreed that these conversations were ongoing and collegial, the results for self-reflective dialog were mixed. This is the sense conveyed throughout the Self Evaluation Report: the conversations are taking place, but they are not deep and are not informed by the data that would make self-reflection possible. Eligibility Requirements 10 and 19 are not met. (I.B.1, I.B.5)

The document *Institutional Goals and Objectives: 2014-2015,* lists Institutional Goals along with objectives, action plans, and expected outcomes. There is a long list of action plans, but there were no specific timelines mentioned and no offices or individuals designated with responsibility to carry out and evaluate the outcomes. Many of the expected outcomes were not measurable: over one-third of respondents to the College Institutional Effectiveness Survey 2014 did not agree that the institutional goals are measurable. The Self Evaluation Report did not state how College goals and objectives were determined, and there was no evidence found of their discussion in committee meeting minutes. The annual program updates for at least the last two years are District forms that ask for programs to identify how District goals, not College goals, relate to their programs. There is no explicit linking of action plans to College goals and to resource requests. There was no evidence that resource requests are prioritized based on how well they support College goals. Eligibility Requirements 10 and 19 are not met. (I.B.2, I.B.4)

The College reported on activities that are related to the College/District goals in the *2013-2014 District-wide Strategic Plan Update.* The report contained descriptive information on what was occurring at the College in relation to goals, but there was no measure stated to judge if these activities resulted in satisfactory progress. In evaluation of the District Planning and Budgeting Model (PBIM), annual surveys were administered to the various committees involved with planning and budgeting (Education, Technology, Facilities, Planning and Budget – all District committees). The Self Evaluation Report states that these surveys resulted in enhancements to the planning process, but specifics about the enhancements were not stated. Eligibility Requirements 10 and 19 are not met. (I.B.3)

The College has set institutional objectives for 2014-2015, but there is no evidence provided as to which governing bodies participated in their creation or how institutional members will be made aware of them and work collaboratively toward their achievement. Many of the outcomes are not truly outcomes (e.g., pilot test online orientation) and are not measurable. Because these objectives are new, there has not been time to assess progress on their achievement. Eligibility Requirements 10 and 19 are not met. (I.B.3)

The College has made modifications to its committee structure, as evidenced in a College Council presentation on proposed re-alignment of College standing committees. A rationale was provided and vetted by the Academic Senate, the Classified Senate, Associated Students, and various workgroups. This document explains the proliferation of committees in response to issues raised. While the evidence presented explains what has occurred, it fails to adequately state the reasons behind the restructure and how specifically the restructure responds to problems addressed as a result of evaluation. (I.B.3)

The 2014 Institutional Effectiveness Survey cited shows only slightly more than half of respondent (54.67%) at least somewhat agree that “COA allocates necessary financial resources
to improve the effectiveness of our college” and only 51% at least somewhat agree that necessary physical resources are allocated for improving college effectiveness. The survey also showed that formal assessment results are shared with faculty and administrators, but there was less agreement that these results are shared with staff, students, and the community. Eligibility Requirement 10 is not met. (I.B.4)

There have been some surveys conducted and some revisions of processes found in the 2014 Institutional Planning document, but there are no formal processes for evaluating student learning assessment, program review, and resource allocation, including institutional research efforts, that have been conducted through the college governance process. There are no timetables offered to show when evaluations that might lead to revisions are conducted on a regular basis. Eligibility Requirement 19 is not met. (I.B.6)

The Self Evaluation Report claims that evaluation of instructional programs, student support services, and library and other learning support services is done through annual program updates, program review, and outcomes assessment. There was no evidence provided that systematic assessments of these evaluation mechanisms are in place. Eligibility Requirement 19 is not met. (I.B.7)

Conclusion

The College does not meet the Standard.

College Recommendations

College Recommendation 3
In order to meet the Standards, the team recommends the College adopt institutional-set standards that will adequately measure satisfactory performance of student achievement and learning. The team also recommends that the College’s governance process be involved in the determination of these standards and the methodology used to set the standards be explained to justify reasonableness of these standards. When the College falls below these standards, the team recommends institution-wide discussion of action, and documentation of such, to be taken to improve performance. (I.B.1-6, IV.A.3; ER 2)

College Recommendation 4
In order to meet the Standard, the team recommends that formal processes be put into place to document the discussion of student learning. (I.B.1)

College Recommendation 5
In order to meet the Standards and the Eligibility Requirement, the team recommends that the College assess its planning and program review processes to ensure an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, re-evaluation, and continuous improvement. (I.B.6, I.B.7, II.A.2.f; ER 19)
**College Recommendation 6**  
In order to meet the Standards and the Eligibility Requirement, the team recommends that the College document the systematic assessment of course-level, program-level, and institutional learning outcomes and use this assessment to direct College and program improvement. (I.B.1, II.A.2.b, II.A.2.e, III.A.1.b, III.D.4; ER 10)

**College Recommendation 7**  
In order to improve institutional effectiveness, the team recommends that the College document and use the assessment of student support services to engage in thoughtful reflection and improvement. (I.B.1, II.B.1, II.B.3.a, II.B.3.c, II.B.3.d, II.B.3.e, II.B.4, IV.A.1)

**College Recommendation 8**  
In order to meet the Standards, the team recommends that the College incorporate consistent and current data into the planning processes. (I.B.6, III.A.6)

**College Recommendation 9**  
In order to meet the Standards, the team recommends that the College develop and implement a process for regular and ongoing evaluation and assessment of its governance and decision-making structures and process, and use the results to broaden employee participation and improve institutional effectiveness. (I.B.1, IV.A.5)

**College Recommendation 10**  
In order to meet the Standards, the team recommends that the College develop, implement, and assess a comprehensive enrollment management strategy based on qualitative and quantitative information that allows the College to clarify its identity while meeting its mission and the varied educational needs of its students, as well as ensuring that resources are allocated in a manner that effectively supports the direction of the College. (I.B.1, I.B.2, I.B.3, II.A.1.a, II.A.2)
Standard II: Institutional Mission and Effectiveness
Standard IIA – Instructional Programs

General Observations

The College is a comprehensive community college, offering basic skills, pre-collegiate, general education, and career technical education (CTE) courses with the goals of preparing students for college-level coursework, career entry, job skill development for incumbent workers, and transfer to four-year colleges. The Mission statement is very broad and does not focus specifically on student learning or student outcomes such as degrees, certificates and transfer. The College offers almost exclusively credit instruction, with a very limited number of noncredit or not-for-credit classes. The College relies on the expertise of the faculty to develop and maintain programs and services of high quality. The work of the college Curriculum Committee is forwarded to the District Council on Instruction, Planning and Development (CIPD); this two-level review ensures that courses and programs are not duplicated in the district four-college service area and meet college and service area needs. The College has implemented a three-year cycle of program review that includes assessment of course and program learning outcomes. Effective Fall 2014, course curriculum has also been placed on a three-year review cycle. CTE programs are informed by advisory committee recommendations.

Program reviews and APU’s are posted to the college website and contain fields to present information on the assessment of SLOs and Program Learning Outcomes (PLOs). The results of program review and annual program updates are provided to the IEC for validation, as well as the Academic Senate, Budget Committee and College Council for the purposes of resource allocation.

The College offers a variety of credit programs and courses with instruction provided at the College main campus as well as off-site at two locations. Currently, science with laboratory instruction is housed in a district-owned facility less than a mile from the main campus, available to students by shuttle, as a new science building is scheduled for construction. An aviation maintenance program is operated at a remote location near the Oakland Airport. Instruction is provided in a variety of formats including lecture, lab, online, and hybrid formats with offerings in the day, evening and weekends. The online courses are very popular, with a reported 35.2% of the College students enrolled in distance education in Fall 2013. The College offers a variety of learning community programs designed to meet the varied educational needs of its students, including workforce preparation “bridge” programs. Degree-seeking students must complete assessment for course placement.

The District Office of Research and Planning provides data and reports for program review and annual program updates. Ad hoc reports are available on demand using the PeopleSoft Business Intelligence Tool. Program reviews and annual program updates contain data provided by the District on course success and retention, which are the only two institutional standards established by the College.
DE is supported by a faculty reassigned DE Coordinator. The District uses the Moodle platform for the delivery of distance education, and the College’s DE courses are presented through the District DE website. DE course approval requires a separate action of the Curriculum Committee, which reviews the Distance Education Addendum to determine the validity and feasibility of offering the course in the online modality. A DE Coordinator provides support to DE faculty who are also able to complete training in distance education coursework. A District DE Committee is being established to examine issues related to DE instruction that have District-wide implications.

The College uses Taskstream software to record course learning outcomes (SLOs), PLOs, and ILOs, as well as to gather course (SLO) and program (PLO) assessment data. Program review and annual program update forms contain fields to allow analysis of this outcome data. SLOs are included with the Course Outline of Record (COR) in the course management system CurricUNET, as well as entered into Taskstream. PLOs are generally available online, in the catalog, and entered into Taskstream. ILOs are available in the college catalog, online, and in Taskstream.

**Findings and Evidence**

The team found that the institution demonstrates that all instructional programs, regardless of location or means of delivery, address the broad college mission as stated in the catalog and on the website. The College holds classes on its campus and has relocated science classes during construction to a nearby facility less than a mile from the main campus. In addition, a stand-alone program in aviation maintenance is placed at an off-campus facility near the Oakland Airport.

Unfortunately, the Self Evaluation Report frequently included too little evidence to fully evaluate the College's compliance with this Standard. The team encountered inaccurate statements, inconsistent terminology and broad claims that were unsubstantiated. In several interviews with College staff, it was indicated that the College relies on a high degree of collegiality and informal discussion in decision-making, such that meeting notes and agreements are not recorded in writing, making evidence difficult to produce. These informal communication channels appear to foster an environment where institutional improvement can occur effectively, yet evidence of this improvement is absent or incomplete for most instructional programs.

The College established a program review process in 2007-08 to ensure program currency, effectiveness, and assess outcomes. The *Accelerated Program Review Handbook 2007* (available via the college website) gives a complete overview of the process. There is no description online of the APU process, which replaced the Unit Plan process in 2009-2010. College staff indicated during interviews that the unit plan was changed to include sections in the APU to record results of course and program learning outcome assessment.

Documents posted to the college website indicate that 45 programs participate in the program review and APU processes. In the Self Evaluation Report, it was indicated that programs resulting in degrees and certificates are those that participate in program review and annual program updates. The distinction was clarified during interviews with the IEC chair. The
document provided by the College as part of their response lists 25 degree and certificate programs. Of the 25 listed, the Human Development Services and Liberal Arts degrees are not represented in a program review or APU. Auto Body and Paint does not have a 2014-15 APU. The College asserts that program review is a 3-year cycle, meaning that the oldest a posted PR should be is 2012, but 11 are older than that. No part of the College’s program review process seems to be consistent or logical. For example, if degrees and certificates are required to complete program review, the team was unable to locate Human Development Services and Liberal Arts; Auto Body and Paint has not posted a 2014-15 APU; and, the posted program reviews indicate that the 3-year cycle is not adhered to. Therefore, the process is not clear or systematic, but much worse is the fact that PRs and APUs are incomplete, missing analysis or in some cases just a blank form with no data entered. No evidence was provided in the report that an evaluation of the effectiveness of these processes has been conducted since implemented in 2007. During interviews, College staff indicated that a District taskforce had formed during the last year to formulate recommendations for changes to the program review process, templates, and interface to learning outcomes databases.

The District provides environmental scans and enrollment reports to be used in planning and students with a degree goal complete assessments to assist with selecting the courses appropriate to their level of preparedness. It is not clear from the Self Evaluation Report to what extent scans or assessment data are used in program and course planning. In interviews, staff indicated that new educational planning tools are available but have not yet been used systematically to determine scheduling and programming that addresses student need and reflects an enrollment management strategy that aligns with the College’s mission. The only data provided consistently in program review and APUs is course success and retention, so faculty is not able to determine whether students are persisting through the program to completion, jobs or transfer. Data is not disaggregated at the program level, so performance of sub-groups cannot be addressed. Student performance in distance education classes is not disaggregated in program review. (II.A.1, II.A.1.a)

The College categorizes DE into three categories: online (100%), hybrid (51%+ online), web-assisted (50% or less online). The Spring 2015 Schedule lists 65 College online or hybrid classes. The decision to offer a class in the online modality is a departmental decision during the scheduling process. The DE Coordinator recommends instructors to the department chairs who have training or have an expertise in teaching online; however, these recommendations can be ignored. Interviews confirmed that all three types of DE courses require approval of a DE supplement by the Curriculum Committee. The District-provided DE report indicated that Fall 2013 DE headcount was 35%, up 10% since Fall 2011. Between Fall 2013 and Fall 2014, enrollment in fully online classes nearly doubled. The Self Evaluation Report indicated that faculty are concerned that course success rates in online education modalities are lower than their face-to-face counterparts, however, there is no indication that course success and retention data are disaggregated by modality. There is no information provided in the self-evaluation or associated evidence to determine whether the increase in distance education offerings is a strategic direction approved through a planning process, or whether the lower success rates have been used to guide conversations on instructional quality. DE as an enrollment strategy should be part of a larger dialog about enrollment management to ensure that course offerings meet student needs and align with the College mission. The Curriculum Committee approves all courses to be
offered as DE and this is confirmed by the Council on Instruction, Planning and Development. The Self Evaluation Report indicates that there is a Distance Education Committee, but no minutes are included as evidence. The Self Evaluation Report is silent on whether there is a standard for preparation for faculty to teach DE. The addendum for DE classes is not comprehensive, and while it touches on federal requirements for students with disabilities and parity of learning compared to face-to-face classes, the addendum does not indicate how a class will establish instructor presence or avoid correspondence course-style delivery. Issues related to student authenticity are not handled here; in a review of Moodle classes, accreditation team members found that not all faculty members use this platform that has a secure login. The college has indicated an Actionable Improvement Plan for this standard, but there is no information or data that explains why. (II.A.1.b)

Faculty are responsible for the development of course and program level outcomes through the course and program development and revision process. The Self Evaluation Report states that all course outlines contain both course objectives and student learning outcomes. The CORs list “Student Performance Objectives;” SLOs are listed in a separate addendum, also stored in CurricUNET. Not all courses have an SLO report in CurricUNET. The SLOs are also entered into TaskStream. The TaskStream database indicates that for the 2013-14 Assessment Cycle, there were “341 participating areas.” For the 538 outcomes specified by the participating areas, there were 234 with outcomes specified (43%). Many areas had no outcomes included, no measures specified and no findings. For several areas, outcomes were included and measured, but no findings specified. For program learning outcomes for 2013-14, TaskStream listed 36 “participating areas” of which only 10 had outcomes with findings specified. It appears that outcomes have been identified for most courses and programs, but assessment is not robust or consistent. The results of course and program assessment are included in the program review (2012 most recent) and/or annual program update (Sections III and IV). The information in program review indicates that both course and program level outcomes were at the developmental level on the Commission’s Rubric for Evaluating Institutional Effectiveness in 2012. Information in annual program updates indicates progress on assessment of course level outcomes but not program level outcomes. It is not clear if assessments result in changes to pedagogy or requests for resources that might enhance student learning. (II.A.1.c)

The College offers for-credit developmental, pre-collegiate, and collegiate-level courses for transfer and CTE, which may include short-term training. The Self Evaluation Report does not mention continuing and community education, study abroad, international student, or contract education programs, although staff indicated in interviews that the college is embarking on contract education for international students. The faculty guides the development and evaluation of courses, programs, certificates and degrees. All credit courses and programs are approved by the Curriculum Committee, guided by the District publication Program and Course Approval Process Manual for Faculty and Administrators. Once curriculum actions are finalized by the College Curriculum Committee, those actions are forwarded to the Council on Instruction, Planning and Development for review and approval. The College has established a three-year cycle of course review effective Fall 2014; as according to the Curriculum Committee co-chair, previously courses were not regularly reviewed. Learning outcomes have been established for each course, program, certificate and degree, and these are recorded in the TaskStream database. (II.A.2, II.A.2.a)
The team found evidence that some advisory committees are active and contribute to the identification of competency levels. (II.A.2.b)

The College Curriculum Committee evaluates and approves courses in compliance with California State Chancellor’s Office standards, and, effective Fall 2014, has implemented a process to ensure that courses are updated at least every three years. This committee also evaluates and approves programs leading to degrees and certificates in compliance with California State Chancellor’s Office standards. In addition to the College’s Curriculum Committee, all courses and programs undergo a secondary review by the District level Council on Instruction, Planning and Development, which acts to ensure non-duplication of programs. The COR used by the College includes elements to ensure that College level assignments, assessments, and objectives including critical thinking are included. Planning for sequencing is accomplished by the faculty in consultation with the Dean. Program review and annual update templates do not contain information regarding program completions, degrees and certificates or accredited program pass rates. (II.A.2.c)

The Self Evaluation Report did not contain any indication as to whether the College offers student learning styles assessment. In an interview with the Vice President of Instruction, discussion indicated that there is no formalized or optional learning styles assessment available. The College offers a variety of scheduling and modalities for students. No discussion about professional development for faculty regarding learning needs and pedagogical approaches is provided in the Self Evaluation Report. Course outlines list methods of instruction, indicating whether instructional technology is integrated into the course, as well as assignments and assessments, which also indicate a variety of teaching methodologies. (II.A.2.d)

The College Curriculum Review Process was revised in Fall 2014. According to an interview with representatives of the Curriculum Committee, prior to Fall 2014, there was no regular review of course outlines. The Curriculum Review process includes a Technical Review Committee that ensures the readiness of the course for Curriculum Committee action. Courses and programs are also evaluated through the program review and Annual Program Update processes. The criteria in program review include curriculum currency, instructional strategies, enrollment trends, student success and retention, future needs, community outreach and articulation. Program review is completed by most instructional programs on a three year cycle. Some of the program reviews include assessment findings from course level SLOs. Program reviews include a section on curriculum; the annual program update does not. Both program review and annual program update templates include a section for commentary on assessment of student course and program learning outcomes. This commentary is frequently missing in both program reviews and APUs. It is difficult to discern the link between course and program assessments, institutional planning, and resource allocation. (II.A.2.e)

The Self Evaluation Report states that program review is on a three-year cycle; however, evidence provided indicates that for ten of 25 programs, the last comprehensive program review was conducted in 2010. Some posted reviews (e.g. Anthropology) have no information or analysis in them. Program reviews may include a variety of data that vary from year to year and program to program. (For example, Art in 2012 is different from Atech - which has no data at all.) The IEC provides support to the writers of Program Review and Annual Program Updates.
The reports are submitted to the Academic Senate and Department Chairs, principally for the prioritization of faculty positions. Equipment and facilities requests are routed to other committees and planning committees for discussion and ranking. The criteria for ranking resource requests used in all these processes are unclear. The President forwards final requests to the District. (II.A.2.f)

The College does not use departmental course and/or program examinations. (II.A.2.g)

The COR establishes both learning objectives and student learning outcomes. Credit is awarded based on evaluation of student mastery (exit skills) of the course objectives, which may be assessed in part through student learning outcomes. The College offers academic credit in accordance with Section 55002.5, Credit Hour, of the California Code of Regulations in Title 5 with the exception of some music courses which award one unit for one hour of lecture and two hours of lab. In other courses, the College follows the minimum standards set by the Carnegie Unit for courses, and, as such, all credit courses require a minimum of 48 hours of lecture, study, or laboratory work for three units of credit. The College Catalog contains a statement on the “Definition of Unit Value” that explains the Carnegie Unit formula. (II.A.2.h)

The College has mapped course level SLOs to PLOs to ILOs in the TaskStream system, to be able to demonstrate that as students successfully complete courses, they are also meeting PLOs and ILOs. Unfortunately, the assessments recorded and analyzed at the course level are insufficient to support the mapping required to demonstrate that students are meeting Program and ILOs. The findings report on ILOs in TaskStream was empty for the years queried. It is unclear if there is discussion of ILO assessment or if there are any results that came of the assessment. One area of special concern is the lack of assessment for general education IGETC and CSUGE certificates, as well as for Liberal Arts degrees with Areas of Emphasis in Arts and Humanities, Natural Sciences, and Social and Behavioral Sciences. Despite significant numbers of awards in these programs, there are no PLOs in the current catalog, nor do they appear as programs in TaskStream subject to assessment. (II.A.2.i)

Each area of general education in the catalog is prefaced by a description of courses that typically meet that requirement. The descriptions contain elements that could be used as the basis for determining which courses should be included in that area of general education. Currently, the catalog does not include a faculty developed “philosophy statement” regarding general education included in the catalog. In an interview with the VPI, the draft new catalog was presented, which includes such a philosophy statement. The Curriculum Committee and the Council on Instruction, Planning and Development determine the appropriateness of each course for inclusion in the general education curriculum. (II.A.3)

The College catalog clearly describes requirements for general education that align with the major areas of knowledge and comply with Title 5. All degree-seeking students are required to complete general education in the appropriate areas. The College offers two certificates in general education curriculum (IGETC and CSUGE), as well as Liberal Arts degrees with "Areas of Emphasis" as major preparation. TaskStream does not contain PLOs for these programs. In an interview with the division deans and academic senate president, there was no evidence presented that faculty or departments are assigned responsibility for these programs although the
Self Evaluation Report provided evidence that almost half of all degrees are issued in these areas. (II.A.3.a, II.A.3.b, II.A.3.c)

All degree programs include at least 18 semester units in one area of focused study or interdisciplinary core, and require a minimum of 60 semester units including general education requirements. Certificates and degrees are approved in accordance with California regulatory requirements and in accordance with norms in higher education. Nine new degrees for transfer have been developed in compliance with regulations resulting from SB 1440. (II.A.4)

The College relies on the program review, annual update, student grades and SLO and PLO assessment processes to attest to their students’ abilities to demonstrate technical and professional competencies. There is no indication in program review or annual updates of the number of graduates, placements or labor market information that indicates demand for workers. Core Indicator Report data has not been integrated into program review or annual updates, or other job placement outcome data. The College offers accredited programs in Auto Technology, Dental Assisting and Aviation Mechanics, but no data on licensure or credentialing is provided for these programs. (II.A.5)

The College publishes a catalog; in most years it is a two-year catalog, but in some years, a one-year catalog. An addendum may also be published if needed. The College website is comprehensive and easy to navigate. There are inconsistencies between the catalog and website, most especially with the publishing of the PLOs. Schedules are produced for the District each term. All educational programs are listed in the catalog and degree and certificate program requirements are clearly listed. Transfer information to UC and CSU is contained in the catalog, as well as descriptions for Associate Degrees for Transfer (ADTs). Development and maintenance of articulation agreements are the purview of the Articulation Office. Copies of syllabi are maintained in Division offices. In a random sample of eight course syllabi distributed to students in Spring 2015, two had neither SLOs on the COR, nor a SLO report in CurricUNET, two had no SLOs on the syllabi, two had no SLO report in CurricUNET, two had SLOs that differed from the SLO report in CurricUNET. (II.A.6)

The College catalog publishes information about transfer to four-year institutions. The catalog provides information for students about the applicability of AP, IB, CLEP to general education requirements. There is an Administrative Policy regarding articulation that includes articulation of high school coursework, but there is no Catalog Policy that communicates with students regarding high school articulation. There is no published policy regarding the receipt of credit from other institutions to fulfill degree or certificate program requirements. (II.A.6.a)

There is an administrative policy for Program Discontinuance/Consolidation. Analysis of the following conditions may trigger the process: 1. Program Review and analysis trends. 2. Degree and certificate completion, 3. Changes in demand in the workforce, 4. Changes in requirements from transfer institutions, 5. Availability of HR, 6. Budget concerns and lack of sufficient funding. Catalog rights apply to students in progress, and those rights are published in the College catalog. Students are accommodated individually to complete program requirements through substitution or independent study. No programs have been discontinued in the past five years. (II.A.6.b)
The College includes an Accuracy Statement in the College Catalog and Schedule of Classes. The College website is maintained by the Office of the President. No information on how that information is reviewed/maintained was provided. Publication of the College Catalog and Schedule of Classes is the purview of the Office of Instruction. During interviews, several College staff indicated increased satisfaction with the timelines established for catalog and schedule publication. The College catalog is reviewed annually by VPs, Deans, and other stakeholders to ensure accuracy. (II.A.6.c)

The District has an approved policy on academic freedom (intellectual freedom). The College catalog publishes a policy on academic freedom and freedom of speech. Board approved policies on academic honesty have been approved and are available on the web. (II.A.7)

Through BP 4030, the College communicates its expectation that faculty distinguishes between personal conviction and professionally accepted views in a discipline. (II.A.7.a)

The College publishes a Student Code of Conduct in its College catalog and on the District website, which includes academic honesty policy. Faculty publishes a statement regarding academic honesty on their syllabi. The College does not seek to instill specific beliefs or world views, nor does it offer curricula in foreign locations. (II.A.7.b, II.A.7c, II.A.8)

Conclusion

The team observed a high level of faculty, staff, and student enthusiasm for and commitment to the College and the instructional experiences it provides. A hallmark of the College is an emphasis on collegiality and a deeply held belief in the value of participatory improvement and governance of the institution. Students find the learning environment to be supportive and referred to a “familial” atmosphere fostered by the College. Through interactions with various campus employees, the team found that there is genuine interest in seriously committing to the continuous improvement of the College, but the team is convinced that these sentiments must be adopted institution-wide in order to ensure that the College can address the significant need for improvement. The College constituents have not yet whole-heartedly devoted themselves to well-documented, self-reflective, and data-driven systems and analysis to support improvement in an organized and sustainable manner.

College Recommendations

See College Recommendation 5

See College Recommendation 6

See College Recommendation 16
Standard II: Institutional Mission and Effectiveness
Standard IIB – Student Support Services

General Observations
As a California Community College, the College adheres to California Education Code and California Code of Regulation requirements on open enrollment. The College serves a diverse community and corresponding student body with approximately 50% of the campus identifying as Asian and African American (p. 19). In order to better serve its diverse students, the College has undertaken a variety of initiatives to improve access and success for at-risk student populations: the College provides a thoughtful and effective array of student support services. The College appears to have made visible progress in developing student-friendly support services such as the Welcome Center, institutionalizing student-centered philosophies such as "no wrong door," and establishing and maintaining meaningful learning communities for underperforming populations. Unfortunately, the Self Evaluation Report frequently includes too little evidence to fully evaluate the College's compliance with this Standard. As is the case elsewhere in the document, sweeping claims are unsubstantiated. Additionally, the College did not provide sufficient documentation on its processes for assessment of student support services and very little reflection on how effective its services are. For example, the College describes a spectrum of services available to students, but provides no earnest reflection or evidence on their effectiveness other than a cursory statement that the student support programs are "continuously evaluated." (II.A.1) Similarly, improvement to the catalog is cited under the College's response to self-identified improvement plans, but very little discussion, and no evidence, is included to describe the College's process for this improvement. (II.B.2) The College has made access to student services available to on-campus and DE students, yet no relevant reflection is captured in the Self Evaluation Report. (II.B.3.a)

Findings and Evidence
The improvement of the catalog was described in the College's response to prior self-identified improvement plans (II.B, p. 100). Despite this brief description early in the Self Evaluation Report, a description of how the catalog is reviewed for accuracy and currency is absent in the narrative. (II.B.2) Generally, the team found the catalog to be approachable and useful, but inconsistencies exist in the section on academic requirements that may lead to student confusion. Program-level SLOs are included for some, but not all, programs listed; some course areas include PLOs despite the absence of a degree or certificate. Additionally, the format with which information is displayed for academic programs varies, potentially leading to further confusion. The discussion on the availability and quality of support services is not complete. (II.B.3.a) Services are described, yet no evidence is provided that demonstrates research on the College's part to arrive at the services provided, nor does the data presented on the effectiveness of the learning support services have the resolution to effectively capture their success. Though CCSSE survey information included is accompanied by a brief statement that a high satisfaction rate exists among students, the data provided do not distinguish between the satisfaction rates of on-campus versus DE students. Further, the included survey results show generally positive
assessments with approximately 59% of students describing their satisfaction with support services as "excellent" or "good." Missing from the reflection, however, is a discussion on how to improve services to address the sentiment of 40% of students who rated the same services as "fair" or "poor." (II.B.3.a, p. 212) The College's response to the Standards on counseling and academic advising, supporting student understanding of diversity, and admissions and placement instruments were similarly structured. (II.B.3.c, II.B.3.d, II.B.3.e) Here, the College described a remarkable array of services provided, but included little-to-no reflection or evidence of meaningful assessment. For example, the College included CCSSE survey information to assess the effectiveness of counseling and academic advising efforts. (II.B.3.c) Two survey questions were included, one where students evaluated how well counseling helped them set academic goals, a second where students evaluated the overall quality of the counseling they received. In the former, 66% of students "agreed" or "strongly agreed." In the latter, 52% of students rated the services as "good" or "excellent." The corresponding narrative was uninformative, containing only the statement that "students highly rate the quality and benefit of these services." The success of these programs may be satisfactory, but in the Self Evaluation Report, the College did not demonstrate thorough evaluation of its services nor clear examples of how their assessment has led to improvement in services. Through interviews, the College described ongoing evaluation of student services programs through tracking student retention and success as they are affected by student participation in various support services.

The College places a high value on encouraging personal and civic responsibility as described in its Vision Statement and through a valuable array of programs (e.g., Men of Color, Phi Theta Kappa). Student perception of their growth related to personal and civic responsibility substantiates the claim with more than 80% of students citing that they "agree" or "strongly agree" that the College has helped their growth. (II.B.3.b) The College's statement on this topic could have been made stronger with the inclusion of evidence to provide greater clarity on the College’s claim that "service learning opportunities are offered in numerous classes."

Student records for the current semester/term are maintained at the College; all student records are transferred to the District after the completion of the semester. All records are stored securely and employees with access to the records, both permanent and temporary, receive applicable training on the handling of records. (II.B.3.f)

In the culminating section of Standard II.B, the College provided only three sentences in their response that claim that assessment of student support services occurs through evaluations, program reviews, and unit plans. While these claims may be valid, insufficient evidence is provided to evaluate their validity. (II.B.4)

**Conclusion**

The team concludes that the College has established a commendable array of student support services. The College is committed to serving its student population, evidenced by student-centered initiatives and operational philosophies. Despite the presence of effective student support services, the College did not effectively capture the assessment and ongoing improvement of these services in the Self Evaluation Report. While the College provided CCSSE survey results as evidence that student support services are effective, there is a lack of evidence
of reflection and analysis of these results that could be used to improve the College and better serve students. Through interviews, the College provided anecdotal evidence that the improvement of student services occurs through formalized and informal communication processes.

**College Recommendation**

See College Recommendation 7

**College Recommendation 11**
In order to meet the Standard, the College should develop online tutoring for its distance education students. (II.B.1, II.C.1.a, II.C.1.c)
General Observations

The College’s Library and Learning Resources Center (LRC) meet the standards for II.C. The building, technology, collections, faculty and staff serve the academic needs of the students and faculty. These services support the College’s instructional programs in most modes of delivery. The Self-Evaluation Report places an emphasis on success for a diverse student body by providing necessary support services to prepare “faculty, staff, and students to achieve their academic, career, and life-long learning goals.”

The College equips students with academic support services and resources that are adequate in quantity, currency, depth and variety given the College’s academic offerings for students on campus. This is less the case for distance education students, though the College is trying to close that gap. (II.C.1, II.C.1.c)

Library

Students and faculty on campus have access to appropriate, if somewhat dated, library resources for the size of the College and its offerings, especially given the fact that between 2006 and 2012, there was a 23% cut in funding (COA Library Program Review 2012); services and resources can also be accessed online or through the District-wide system. Funding appears to be a continual struggle, though conscientious use of resources and services seems to have softened the effect of budget shortfalls. (II.C.1)

The Library provides study space and seating for approximately 200 students and four study rooms, with additional seating for 28 to 30 students in groups and 14 research workstations, reserved for students with disabilities. Workstations have Internet access to Library resources, including the online catalog (shared collections of Colleges in the District), online databases, Internet resources, and study guides. The Library also provides wireless Internet access. (II.C.1)

In addition, a classroom in the Library holds 30 – 40 students for single or “multiple orientation” sessions. The collection contains over 38,000 print titles, almost 30,000 e-books and 45 periodical subscriptions, 16 electronic database subscriptions. The databases support the needs of online, as well as on campus, students. The four libraries at the District’s Colleges share library materials and services, which augments the resources of the College’s Library. Due to financial constraints, print materials cannot be sent between the libraries, although if students are visiting a sister campus, they can check out materials there. (II.C.1.a)

Library staffing includes 3.0 full-time librarians and .67 FTE hourly, adjunct librarians. Library technical staff includes 4.0 full-time classified library technicians (Principal Technician, Senior Library Tech/Circulation, Senior Library Tech/Periodicals, Library Tech II/Reserves & Evening Tech, and one vacant position, Library Tech II/Technical Processing/Cataloging), for a total of 7.6 FTE library staff and faculty (Annual Program Update 2013-2014). Staffing levels are comparable to similar-sized community colleges (CC Library Staff Comparison). (II.C.1.a)
With the use of faculty expertise, including librarians and academic support professionals, Library materials are culled and regularly updated, including a recent augmentation of materials for basic or ESL readers to use for skill building. As members of the Curriculum Committee, librarians stay abreast of new or changing curricular needs of the College. In addition, the practice of instructors bringing their classes to the Library has increased significantly. (II.C.1.a)

Of note is the collaboration forged between the Librarians and instructors of developmental or ESL students in the Basic Skills Initiative. Grant money from this initiative has funded expansion of easy reading and ESL research materials. (II.C.1.a)

The Library provides individual instruction for information competency, as well as orientation sessions and lessons embedded into classes. In addition, District-wide one and two-unit courses on information research and library resources are available to the College students online or on campuses in the District. Assessment of student success as a result of these courses suggests that students who have taken them increase their subsequent college success. If the College implements an information competency requirement, the library’s course offerings will need to expand and include new LIS courses. (II.C.1.b)

Librarians have worked with the DE Committee to plan for greater off campus access to Library resources. Remote access to electronic Library resources is accessed across the District by a universal log-in. A one-on-one online chat service to help off-campus students with their research needs is available for as many hours as the staff can man the chat desk. Continual attention to the needs of the growing number of completely online students is necessary. (II.C.1.c)

Maintenance and security are provided through a variety of methods, including magnetic security strips, alarmed emergency exits, a security camera, and a contract with the county sheriff’s office. (II.C.1.d)

Formal agreements about the use of resources are available in the Library. These include:

- Contracts with the bibliographic utility and Interlibrary loan provider, Online Computer Library Center
- CCLC Contracts for digital resources
- Copy/Printing, GoPrint, and annual maintenance agreements
- Photocopiers maintenance provided by Pinnacle Vend Systems
- Maintenance contracts with the integrated library system vendor, Innovative Interfaces (II.C.1.e.)

The Library evaluates its programs and services using circulation, reference, instruction, and collection statistics. SLO assessment for the Library is consistently and effectively done. In addition, annual surveys and CCSSE data monitor student satisfaction with library services and success resulting from information competency orientations and classes. For example, nearly 80% of students surveyed in the 2014 CCSSE stated that their level of satisfaction with Library
services was “good” or “excellent.” Contrary to this, only 46% of students in the fall 2013 survey believe that open Library hours are “adequate.” The team found no evidence of analysis of these data, though since then, another hour has been added in the weekly schedule. (II.C.2)

According to an informal Library study, 55% of students believe that the Library provides quiet, appropriate spaces for study; it isn’t clear how this information was analyzed or used to leverage change. The team observed that the Library appeared to be an amenable place for quiet work. (II.C.1.a, II.C.2)

**Learning Resources Center**

Relying on the expertise of faculty and learning support services professionals, in collaboration with discipline faculty and categorical programs, the LRC provides comprehensive academic support opportunities to most students; at this time, the LRC does not provide for online students. (II.C.1.a)

The LRC offers open labs, with many hours provided each week for Math and Language Labs, a Writing Center and an Accounting Tutorial Center. In the Science Annex on Atlantic Avenue, the LRC creates space for limited math and science tutoring. The lab coordinator works with the disabilities counselor to ensure that workstations and services support students with disabilities. (II.C.1.c)

The LRC, like the Library, struggles to retain services in face of budget challenges. Two classified employees (one full-time and one half-time) work with part-time faculty coordinators in the LRC. (One English faculty member has a three hour per week responsibility in the lab). Recent APUs have consistently (and unsuccessfully) requested fulltime faculty staffing in the LRC. Similarly, subject-specific software that needs to be updated has been requested. Other budget cutbacks have entailed modifying the LRC operations to offer drop-in, 15-minute sessions rather than more effective appointment-based tutoring, as modeled at other campuses. Online tutoring for off-campus students was available until 2008, and is no longer used at the College. (II.C.1.c)

Learning spaces include a writing center, conference room, language lab, math lab, storage and instructor workstation, tutorial center, and, in the Science Annex, a space for individual and small group tutoring. (II.C.1.c)

The LRC is actively engaged in improving services and programs based on the assessment of student learning outcomes and other data. Comprehensive assessment results were reviewed in the 2012-13 academic years. CCSSE data shows that almost half of the students seldom or never use these services, though nearly 66% claim to be satisfied at a “good” or “excellent” level that the College’s instructional support is available when they “need help with a specific course.” (II.C.2)

The only area in which the LRC does not meet the Standards is in providing academic support (tutoring) for online students. (II.C.1.c)

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Conclusions

The College does not meet the Standard. The team found that the Library provides “comprehensive and flexible programs and resources” to sustain the diverse needs of College students, from those with basic skills to others who are learning the intricacies of 21st Century information competencies. The Library helps prepare College faculty, staff, and students to achieve their academic, career, and life-long learning goals. The LRC provides adequate support and supplemental instruction, although budgetary constraints have impacted the effectiveness of available services. However, tutoring is not available to online students; College staff is currently seeking a third-party solution to this gap.

The team commends the LRC for creating a high functioning, attractive and welcoming environment that enhance students’ experience and learning.

Recommendation

See College Recommendation 11
Standard III: Resources
Standard IIIA – Human Resources

General Observations

The institution employs qualified personnel to support student learning programs and services wherever offered and by whatever means delivered, and to improve institutional effectiveness. Personnel are treated equitably, are evaluated regularly and systematically, and are provided opportunities for professional development. Consistent with its mission, the institution demonstrates its commitment to the significant educational role played by persons of diverse backgrounds by making positive efforts to encourage such diversity. HR planning is integrated with institutional planning.

The College has developed both Board and Administrative Policies to provide a robust hiring process. In addition, the College has worked to improve its performance evaluation process. The District, in conjunction with the Peralta Federation of Teachers (PFT), has created the Faculty Evaluations Policies & Procedures Handbook for All Faculty (revised, July 2014) which clearly delineates the cycle and process of evaluation for part-time, long-term substitute, tenured and non-tenured faculty. In addition, procedures are also provided through the bargaining agreements, Agreement Between The Peralta Community College District and International Union of Operating Engineers – Local 39 (July 1, 2012 – June 30, 2015) and 2012 – 2015 Successor Agreement Working Document The Peralta Community College District and Service Local 1021 Permanent Employees. Management performance evaluation procedures are presented in AP7102. In place are evaluation tools for students enrolled in both traditional and online courses.

The Board has recently adopted both the BP 7380 Code of Ethics and AP 72380 Ethics policies. These policies apply to all faculty classified staff and management. Personnel records are housed at the District and are protected, while still providing access for employees who wish to review their files. The College employs faculty and staff who reflect the diversity of its students. Employees, particularly faculty and classified staff, express a high level of satisfaction regarding their employment.

Professional development opportunities are provided in the form of workshops, flex activities, and further education. There are regular workshops that provide for training in emerging technologies. The PFT contract prescribes three Flex days before the beginning of each semester in the fall and spring. One day is a District-wide professional development day and the following two days are College Flex days. On the District Flex day, learning assessment, student success, teaching methods, cultural change, diversity awareness/sensitivity are emphasized by the keynote speakers and/or afternoon workshops. A District-wide faculty diversity internship program is offered to attract diverse faculty and to provide training and professional development.

Planning for HR has been integrated with the District Integrated Educational and Facilities Master Plan and the District Planning and Budget Process. Strategic planning occurs through the PBC which is informed by the Technology, Education, and Facilities Committees. The
genesis of this planning process is the *Comprehensive Program Review* (completed every three years) followed by the *Area Plan Update* completed yearly by all programs and departments within the College. The *Comprehensive Program Review* provides long-range planning while the *Area Plan Update* addresses issues for the upcoming academic year.

**Finding and Evidence**

The team found that HR is organized and staffed as a District function. The District works closely with the College to ensure that personnel qualified to provide the best learning environment for students are employed. Hiring policies, developed through participatory governance are available to all screening committees.

The employment process follows the Board hiring policies and administrative procedures of each respective classification. These policies and procedures provide clear direction on identifying and hiring qualified faculty, management and staff. They are published as the *PCCD Board Policy Manual* that can be found on the District webpage. (BP 3410, BP 3420, BP 7100, BP 7120, BP 7210, BP 7230, BP 7240, BP 7250, BP 7260; and AR 7121, AR 7123, and AR 7125)

Additional procedures are contained in the collective bargaining agreements which mutually establish the terms and conditions of employment and the rights of the parties to these agreements for classified staff and faculty. These policies were developed in collaboration with the District Academic Senate, the PFT, and the Operating Engineers and Service Employees International Unions. These can be accessed on the District website.

The District governing board ratifies union contract clauses that address hiring policies. There exists a District-wide faculty internship program. This program provides training to attract diverse faculty and to provide training and professional development specific to the College to interns currently in graduate school.

In collaboration with the HR, the College follows a comprehensive faculty hiring process that ensures that institutional faculty plays a significant role in selection of new faculty, that job criteria, qualifications, and procedures for selection are clearly and publicly stated, and that among many other factors that criteria for faculty include knowledge of the subject matter. The College also follows Board policy in regards to an equivalency process, *AP 7211 Minimum Qualifications and Equivalencies*.

A comprehensive procedure for non-faculty hiring is also in place. Selection of employee groups – classified staff, faculty and administrators – covers the development of the job announcement based on the needs of the College, selection of the screening committee, development of screening criteria and interview questions with desired responses, screening of application materials, screening of candidates, the recommendation of finalists, final interviews, reference checks, and the final approval process by the College President and the Chancellor.

To ensure that qualifications for each position match programmatic needs and the mission of the College, the hiring process begins at the department or unit level with development of clearly defined and relevant job descriptions. HR maintains job class specifications and descriptions for
classified staff on the HR website, providing access to job classification information for all internal and external applicants. Consistent with BP 7230 and AP 7260, HR maintains a classification plan which defines all classified positions.

Program planning drives the faculty hiring process. Beginning at the department level, the need for faculty is documented in the departmental Comprehensive Program Review or in the Annual Program Update report.

The College relies on a participatory governance model to plan for the effective use of HR. Comprehensive Program Review, Annual Unit Plan Updates and Administrative Unit Reviews allow for the identification of staffing needs that fulfill the mission of individual units and programs. This team found the data used in the Annual Unit Plan Updates (APUs) was found to be inconsistent between units. In addition, due to delays in data coming from the District, these APUs are often incorporating inaccurate data when meeting the submission deadline. (III.A.6)

AP 7211 Minimum Qualifications and Equivalences provides guidelines for maintaining quality of candidates. When an applicant applies for an equivalency, the District Academic Senate President appoints an Equivalency Committee, comprised of three contract faculty in the discipline, to evaluate the whether or not the applicant meets the equivalency. Each member of the committee independently decides as to the meeting or not of the equivalency. The final decision by the committee is based on majority vote, and the decision is final.

Minimum Qualifications for Faculty and Administrators in California Community Colleges outlines what the State will accept for equivalencies. These serve as a statewide benchmark for professionalism and academic rigor and a guideline for day-to-day decisions regarding suitability for employment. However, academic departments are given the latitude to also include “desirable qualifications” to the job announcement. These desirable qualifications go beyond the minimum qualifications as a means to reflect those qualities that are considered necessary and of highest value to the department and the College and are aligned with the College mission and goals. These desirable qualifications are delineated in the District’s equivalency policy AP 7211. HR ensures that job announcements are directly related to the mission and goals of the College by reviewing and updating job descriptions prior to each recruitment announcement. Criteria, qualifications, and procedures for the selection of personnel are clearly and publicly stated in a variety of sources accessible to the public via the District’s website under HR. All job descriptions contain general responsibilities, distinguishing characteristics, representative duties, supervisory relationships, minimum and desired qualifications, and any license or certification required to perform the duties of the position. Job announcements are advertised via the District’s website, through internal memos regarding employment opportunities and through the California Community College Registry. Additionally, the PeopleAdmin applicant tracking system provides for an on-line application process for all applicants and web-based advertising. Dependent upon the position, additional recruitment may include resources such as The Chronicle of Higher Education, Women in Higher Education, Diverse Issues in Higher Education as well as many on-line job boards and recruitment fairs or events. (BP 7120, recent job descriptions, PeopleAdmin tracking system)
Initial screening of application materials begins at the District. HR personnel review the applications to ensure that candidates meet the respective minimum qualifications and hold degrees from institutions accredited by a United States accrediting agency. Subsequently, files of eligible candidates are sent to selection (hiring) committees. Faculty participation is integral in all steps in the hiring process. (AP 7121 Faculty Hiring, AP 7123 Hiring Procedures for Regular Academic and Classified Managers, and AP 7125 Hiring Acting and Interim Academic and Non-Academic Administrators)

Part-time faculty members are hired through one-on-one interviews with the Department Chair and the Dean of the respective area. The same rigor applies to meeting minimum qualifications and screening of application materials. Part-time faculty members are hired on an as needed basis with assignments that are for one term only and part-time faculty members are evaluated in the first year of employment at the College.

Procedures and policies have been set in place for continuous evaluation of the faculty, staff and administration at the College. Created through collaborative discussions between District-wide constituent groups including the Board, HR, Union, Academic Senate, faculty, staff and administrators, the forms and policies are reviewed every few years and can be found on the District website. Documentation is filed confidentially at both the College and District. (AP 7126 Management Performance Evaluations; BP 7210 Academic Employees; SEIU Local 1021, Article V.; I.O.U.E. Local 39) These agencies have developed and approved performance cycles for all employees. The evaluation process, criteria, and evaluation schedules are contained in the collective bargaining agreements and Board Policies and Administrative Procedures.

Contract full-time faculty members are evaluated every three years. Part-time faculty members are evaluated in their first-year of employment and then, after each six semesters thereafter. The evaluation process includes peer observations, student evaluations, an administrative evaluation, and a portfolio. The evaluation process provides opportunities for commendations and recommendations for improvement. If a rating below satisfactory is assigned, a plan for improvement is developed and a re-evaluation is scheduled for the next academic year. Deans monitor and document the process. Complete instructions are detailed in the Faculty Evaluations Policies and Procedures Handbook.

Tenure-track faculty members are evaluated yearly for their first four years of employment, and adjunct faculty are evaluated every three years. During the four-year tenure track review process, evaluations are completed by a four-member committee, including the division Dean and three faculty members from the discipline or a closely aligned discipline. The evaluation process includes peer observations, student evaluations, an administrative observation, a portfolio, and an annual self-evaluation. All evaluation materials are discussed and reviewed by the tenure candidate. Files are kept in the Office of Instruction at the campus. The tenure track process is coordinated by a tenure review facilitator at the campus. Each fall semester, the tenure review facilitator and the Academic Senate President attest that the tenure review process has been followed. Each year, the appropriate Vice President or College President, based upon the recommendation of the tenure review committee, recommend continuance, non-continuance, or probation for each candidate. At the end of the four-year process, the College President makes a
final recommendation whether to grant tenure to the Chancellor and the Board. The tenure review process is detailed in the Faculty Evaluations Policies and Procedure Handbook. Classified staff are evaluated during a probationary period and then annually in the month of hire by their first-level manager. The evaluation process is detailed in the respective collective bargaining agreements and monitored by HR.

Managers are evaluated annually with the process coordinated by HR. The purpose of the Management Performance Evaluation is to demonstrate a commitment to organizational excellence and align performance with the District-wide strategic goals and institutional objectives. (AP 7126, Management Performance Evaluations)

The College has in place a rigorous and inclusive evaluation process for all personnel. Evaluations have been conducted according to schedule. (III.A.1.b)

Formal evaluations standards, procedures, and processes are negotiated between HR and the PFT. The PCCD Faculty Evaluations Policies & Procedures Handbook for All Faculty (revised, July 2014) and the PFT Side Letter, however, make no reference to SLOs. Faculty members are required to file additional information on assessment of SLOs as a part of their evaluation portfolio.

The College has established an addendum to the official course outline of record as the location for listing SLOs. Faculty members in the discipline are responsible for keeping this addendum up-to-date. Faculty members are evaluated, in part, whether course outlines are followed, and evaluators may review syllabi and sample assessment tools to ascertain this. (Addendum to Official Course Outline of Record)

Faculty are asked to address and consider student learning outcomes in both the Comprehensive Program Review and Annual Program Updates documents which are completed by faculty in the discipline.

The College has a written code of professional ethics for all of its personnel, BP 5.15 Code of Faculty Professional Standards. The Mission statement of the District includes a commitment to encouraging a civil and ethical environment that values the perspective of all individuals. BP 7380 Institutional Code of Ethics provides a definition of, and expectation for, ethical and civil behavior to which all employees are required to adhere. HR and the Department of Employee Relations are responsible for overseeing this procedure. There are multiple avenues for reporting violations of the institutional code of ethics or unprofessional conduct. Written or verbal complaints can be reported to an area supervisor/manager, Dean or Vice President. Complaints can also be reported directly to the HR and/or the Department of Employee Relations. Additionally, the District has also implemented BP 7700/AP 7700 policies addressing Whistleblower Protection where individuals can also anonymously report allegations of fraud. Such allegations can be reported directly to the Internal Auditor, HR, or the Department of Employee Relations. Any reported violations of the Institutional Code of Ethics or allegations of fraud are immediately investigated by HR and/or the Internal Auditor and may result in mandatory training for the individual and/or the imposition of appropriate discipline.
The College has 57 full-time faculty and approximately 150 part-time faculty. All faculty meet the minimum requirements for their disciplines based on regulations for the minimum qualifications for California Community College faculty. Clear statements of faculty roles and responsibilities can be found in the PFT contract. Faculty carry out comprehensive program reviews every 3 years; develop, implement, and assess annual program plans; and are required to develop, implement, and assess student learning outcomes. Faculty evaluation procedures are negotiated as part of the union contract. Faculty teaching online or hybrid courses are subject to the same evaluation schedule and procedures as faculty teaching face-to-face sections.

Currently, the College has ten administrators. Four of the ten are top-level administrators, President, Vice President of Student Services, Vice President of Instruction and the Director of Business and Administrative Services who serve with four Deans and three Directors. All administrators hold at least a Master’s degree, six of the ten administrators hold Doctorate degrees, and all of the administrators bring a wide range of experiences that support the institution’s mission and purpose. (III.A.2)

In the event an employee or prospective employee feels unfair or inappropriate actions have taken place, the Vice Chancellor of HR is responsible to advise, investigate, resolve conflicts, and ensure fairness in areas of hiring, discipline, and resolution of complaints and grievances. (III.A.3)

Written policies attributable to personnel are contained in Chapter 7 of the District’s Board Policies and Administrative Procedures Handbook.

In an effort to address constituent concerns in a timely manner, the Vice Chancellor of HR meets regularly with the president of the PFT and the presidents of the classified unions (SEIU 1021 and Local 39). To further support fair and appropriate treatment, the District Union Partnership Committee (DUPC) was established to effectively and expeditiously address issues and concerns affecting classified employees. The DUPC meetings occur monthly.

All management personnel are trained yearly on contract administration to support the appropriate and consistent administration of personnel related provisions. (Management Workshop Agenda 7-22-14) (III.A.3.a, III.A.4)

Personnel files contain employment applications, performance evaluations, written confirmation of employment actions, personal data, leave and attendance records, and any additional information used to determine the employee’s qualifications for employment, promotion and compensation. Personnel files are located in a security code file systems accessed only by the HR staff. Faculty and staff are able to access their files on an appointment basis. (III.A.3.b)

In 2013 the Board adopted the District’s Equal Employment Opportunity Plan (EEO Plan) in compliance with Title V. A component in the plan was the formation of EEO Advisory Committee which has representation from all constituencies in the District, facilitated by the Director for Employee Relations. This committee meets regularly to review diversity within the institution and in its recruitment and hiring practices. The EEO Advisory Committee also has the responsibility of reviewing and revising the District-wide EEO Plan. The EEO Advisory
Committee is also tasked with recommending and sponsoring District-wide events that support an inclusive campus community.

Additionally, HR provides EEO/Diversity training to selection/hiring committees and has conducted FLEX Day (Professional Development) workshops for faculty that specifically focus on issues relating to equity and diversity. (III.A.4)

The College has demonstrated throughout many institutional practices that the College is committed to creating and maintaining programs, practices, and services that support its diverse community of students and personnel. Examples include: the College has created and provided support to many equity-driven programs such as EOPS, Programs and Services for Students with Disabilities, College to Career, Brotherhood: A Men of Color Initiative, Alameda Promise, Open Gate, Adelante, Amandla, and APASS. These are all programs designed at achieving equity through providing additional resources and support for students at the College. All of these programs also employ diverse personnel that are reflective of the students being served by the programs.

HR and Employee Relations is responsible for recruiting, hiring, retaining, and cultivating equity and diversity through regular assessment of its progress. The Vice Chancellor for HR is responsible to ensure that all aspects of Title 5, §53023 are adhered to and monitored effectively. (III.3.b.1, III.3.b.2)

Shared governance committees are inclusive. Students are invited to participate in shared governance and their voice is respected.

*AP 7380 Ethics, Civility and Mutual Respect* clearly delineates the standard by which management, classified staff and faculty are to be treated and how to conduct themselves during the course and scope of the performance of assigned responsibilities.

*AP 5500 Student Standards of Conduct, Discipline Procedures and Due Process* also addresses the treatment of staff and students and defines general expectations of student conduct. *AP 5530 Student Rights and Grievance Procedure* addresses student rights and the processes for student grievances.

Through the work of the College’s staff development committee, which is comprised of faculty, staff, and administrators, systems have been created to regularly offer opportunities for personnel at the College to grow professionally. Additionally, the District office offers professional development for all campuses through the academic year.

The participatory governance of the staff development committee plans activities for FLEX days and throughout the academic year. Each semester, the College community is invited to host a workshop for the campus on FLEX days. Proposals are reviewed by the committee and selected based on the needs of the faculty, staff, and administration.

In-service training is regularly offered for all administrative personnel for cultural change (improving campus climates), diversity awareness/appreciation, leadership skills, management
tools (PeopleSoft, BI tool, etc.), personnel administration, collective bargaining contracts, contract compliance, performance evaluations, progressive discipline, and other HR practices (Management Workshop Agenda 7-22-14).

Although classified staff currently do not have professional development obligations the District has provided professional development activities for classified employees focused upon customer service, diversity awareness/appreciation, student services operations, workplace safety, and personal development. Full-day activities, workshops on “employee benefits,” “retirement planning,” “earthquake preparedness,” and “what to do if there is a shooter on campus” have been offered through the Office of Risk Management.

Evaluation of the professional development program follows the guidelines set forth by the California Community College Council for Staff and Organizational Development. Online surveys, evaluations of District and College workshops, and suggestions provided by the College Staff Development Committee all provide input into planning and training needs. Each of the faculty staff development Flex day workshops are evaluated by participants using forms designed for that purpose. Attendance rosters are reviewed to gauge participation. Evaluation results are discussed at campus staff development meetings and in District staff development meetings. The District Office of Educational Services generates various reports about staff development participation for further review.

The District Staff Development Officer submits a Flex day calendar report to the State Chancellor’s Office at the end of each academic year. (III.A.5)

The College regularly assesses its human resource needs in a number of ways which integrate HR planning with institutional planning. Comprehensive Program Review, Annual Unit Plan Updates and Administrative Unit Reviews allow for the identification of staffing needs that fulfill the mission of individual units and programs. The College relies on a participatory governance process to review and provide input into all plans, including HR decisions.

The College’s HR planning is integrated with the District’s institutional planning through participatory governance processes that channel campus requests through the District’s Planning and Budgeting Integration Model (PBIM). (III.A.6)

Conclusion

The College employs qualified personnel through established hiring processes that are in compliance with fair employment and equal opportunity requirements and appropriately evaluate the qualifications and experience of candidates relative to job descriptions that realistically match performance expectations. (III.A.1.a) The College has an active and robust professional development programs, and most employees participate in professional development activities. (III.A.1.a) Employee personnel records are appropriately secured and the College follows policies and contractual requirements for allowing employees to review their personal files. (III.A.3.b)
The Board has made significant progress in updating policies, including those related to HR. (III.A.3) Although the ACCJC declared that the previous Team Recommendation 4 had been met in 2009, the College has slipped back into a backlog of evaluations, except for Tenure-track faculty. The District Self-Evaluation Report Form (Classroom Instructor) requires faculty to reflect on what is learned from the assessment of SLOs and how faculty will implement changes based on that assessment. (III.A.1.b, III.A.1.c)

The College and District share policies and procedures that, if implemented, would have effectiveness and efficiency, especially regarding institutional planning and employee performance evaluations. The Self Evaluation Report lays out a plan that depicts institutional dialog and participatory governance. The evidence shows lack of implementation as well as lack of documentation of these discussions.

The College does not meet the Standard.

**College Recommendations**

See College Recommendation 2

See College Recommendation 6

See College Recommendation 8

**College Recommendation 12**
In order to meet the Standard, the team recommends that all personnel performance evaluations be made current according to the approved cycles. (III.A.1.b)

**College Recommendation 13**
In order to improve institutional effectiveness, the team recommends that all faculty evaluations require the integration and analysis of the assessment of student learning outcomes. (III.A.1.c)

**District Recommendations**

**District Recommendation 4**
In order to meet the Standards, the District should clearly identify the structures, roles, responsibilities and document the processes used to integrate human, facilities, technology planning, and fiscal planning in support of student learning and achievement and regularly evaluate the process in order to fairly allocate resources to support the planning priorities. (III.A.6, III.B.2, III.C.2, III.D.4, IV.B.3.g)

**District Recommendation 5**
In order to meet the Standards, the team recommends that the district ensure retention of key leadership positions and that adequate staffing capacity is available to address the demands of three critical areas reflected in the accreditation standards: institutional effectiveness and leadership, institutional research, and financial accountability and management. (III.A.2, III.A.6)
Standard III: Resources  
Standard IIIIB – Physical Resources

General Observations

Physical resources, which include facilities, equipment, land, and other assets, support student learning programs and services and improve institutional effectiveness. Physical resource planning is integrated with institutional planning.

The College’s facilities consist of eight buildings, a cluster of seven modular buildings, and two off-campus sites. The 6.2-acre main campus is comprised of four original buildings constructed between 1967 and 1970: Building A, which contains administrative offices, classrooms and instructional labs; Building B, which contains the Auto Body and Paint Program and the Automotive Technology Program; the two connected Buildings C and D, which contain classrooms, science and computer labs and also houses Programs and Services for Students with Disabilities (DSPS) and Instructional Division offices; and Building F, containing the Student Center, student services offices, cafeteria and bookstore. There are 81 classrooms – although some are vacant presently due to the move by science classes into the Science Annex off campus – and 42 restrooms. Buildings constructed since the original construction are: the G building, with gymnasium, dance and music studios, 1976; the Library/LRC, 1976-77; the Child Care Center, 1977; and Building E, containing the Diesel Mechanics program, 1989. Additionally, the College has nine tennis courts, a turf soccer field surrounded by an all-weather track that was reconditioned in 2013, and a grass baseball field built in 1996. Two Bond Measures, A and E, will allow for remodeling and the eventual construction of two buildings.

Physical resource planning, including facilities, equipment, land and other assets is integrated with institutional planning and supports student learning programs and services. The planning for major projects is guided by the College’s Educational and Facilities Master Plans supported by the District Integrated Educational and Facilities Master Plans. Both long- and short-range planning are informed by the District’s Strategic Goals and the Planning and Budgeting Integration Model. The District Office of General Services provides centralized support for the College’s maintenance of buildings and grounds and design and construction of new buildings and renovations. This includes facility and property services as well as maintenance and operations, capital outlay, some centralized mailroom and duplication services, and Peralta Police Services. The facility and property services include capital planning and management, real property leasing, energy management, custodial and security services as well as parking.

The College appears to maintain, upgrade or replace its physical resources in a manner that assures effective utilization and the continued quality needed to support its programs and services. The process assures access, safety, security, and a healthful learning and working environment.

Findings and Evidence

The Alameda County Sheriff’s Department provides security on campus between 7am to 11pm Monday through Friday, with security guards from Securitas, a private security firm, on campus at
other times. Hallways are lit at night, and emergency telephone stations have been situated in each parking lot and at the Aviation Maintenance Technology facility at the Oakland Airport. Safety Aides and Cadets from the Merritt College Administration of Justice Program provide routine safety-monitoring services on campus and at the Science Annex located at 860 Atlantic Avenue, Alameda.

The Safety Committee monitors safety on campus and recommends College policy in the areas of health, wellness and safety. Members of the committee include faculty, staff and the Director of Business and Administrative Services who serves as Campus Safety Officer.

The Chemistry, Biology, Diesel Mechanics, Dental Assisting, Aviation Maintenance Technology, Automotive Technology, and Auto Body and Paint departments generate hazardous materials. Removal is done by contractors and is coordinated by the Business and Administrative Services office, in concert with the District legal staff and the District Risk Manager. Training is required for employees who handle hazardous materials; for instance, both science technicians have completed the “Management of Hazardous Substances and Chemical Release” course.

The Business and Administrative Services office conducts ongoing facilities evaluations. The campus Facilities Committee, which includes faculty members, staff, and the Director of Business and Administrative Services who chairs the committee, communicates the physical plant needs of the College to the College Council and the President. Equipment replacement and maintenance needs are reported annually in annual program updates, which are prepared by individual departments.

A cluster of seven modular buildings adjacent to Building C has been installed to serve the City/County-supported One Stop Career Center and the Alameda Science and Technology Institute, an early College high school.

The Alameda One Stop Career Center (AOSCC) operates under funding through a contract from the Alameda County Workforce Investment Board (ACWIB) to the District. The District and College currently provide no operating support other than in-kind support (the building, utilities, administrative services, janitorial, etc.). The AOSCC operates in compliance with the Workforce Investment Act to increase the employment, retention and earnings of residents of the City of Alameda and Alameda County. The One Stop also serves as the College Career Center.

The Alameda Science and Technology Institute, an early College high school located in the temporary modular buildings next to Building C, operates under an agreement between the College and the Alameda Unified School District (AUSD). This small high school, with an accelerated associate degree program, occupies classrooms provided by AUSD, although 11th and 12th grade students also attend College classes on campus and at the Science Annex.

The College occupies two off-campus locations. The first is the Science Annex, located one-half mile from the main campus, is a retrofitted biotechnology research complex.
The Science Annex was first occupied by the Chemistry and Physics Departments in 2011 and by the Biology Department in 2013, in preparation for the demolition and replacement of Buildings C and D. The Science Annex currently houses most of the science classes offered by the College and also accommodates Merritt College’s Genomics Program.

The College portion of the Science Annex presently includes a Human Anatomy classroom/laboratory with a temperature-modulated cadaver room containing downdraft ventilated cadaver dissection tables, a storage room and an adjacent faculty office. Two other combined lecture/laboratory classrooms serve Human Physiology and General Biology classes. The Biology Stockroom with adjacent Laboratory Technician Office is central to the different classrooms. Plant growth chambers, environmental control chambers, incubators, etc. are located in other nearby rooms.

Chemistry classes are held in the Chemistry Laboratory and one of the lecture rooms, supported by the Chemistry Stockroom and Laboratory technician office. Physics classes are held in a lecture/laboratory classroom with a faculty office and stockroom adjacent to the classroom. Classrooms in the Science Annex have state-of-the-art audiovisual components.

The Science Annex also includes an office suite for adjunct instructors, a student lounge with vending machines, and a mailroom that houses the Scantron reader, and will be the site of a large-volume photocopy machine. A new tutoring program, begun as a satellite of the existing tutoring program on campus, began in 2013. Development of a satellite library reference desk, with computer access to periodical indices and guidance from an on-site librarian, is under discussion with the campus library staff.

The other off-campus learning center is the Aviation Maintenance Technology Program Facility located at the north end of the Oakland International Airport. The program facilities include two main hangar buildings with classrooms, laboratory rooms, twelve aircraft, and aircraft system mockup trainers.

The Aviation Maintenance Technology Program (AMT) borders the North Field of the Oakland International Airport. The Program is an FAA-certified technical school operating under Federal Aviation Regulation Part 147 to train and certify aircraft maintenance technicians.

Located at the airport, with secured access to the Airport Operation Areas, are two main buildings, a Power plant Hangar and an Airframe Hangar, with a ramp area for aircraft parking in the rear of the building, and car parking in the front of the building. The facility houses small aircraft, with mockups and aircraft type engines. The building has one set of restrooms.

The Power plant Hangar (Building A) consists of an engine shop hangar, two offices, storage and two machining rooms, paint booth, one classroom, and one multi-purpose room. The Airframe Hangar (Building B) consists of two multi-purpose classrooms, a tool room, storage areas, one general sheet metal shop, a computer Lab, an electronics lab, and three offices. The building has one set of restrooms.
A commitment to safety is demonstrated through activities that include, but are not limited to, regular meetings of the District Safety Committee, the District-wide Facilities Committee, and the College Safety and Facilities Committee. The Office of Risk Management periodically offers trainings, safety workshops and a reporting process for accidents or injuries. The College Business Officer is the Safety Officer for the campus overseeing communication during emergency situations, maintenance of signage, storage and disposal of hazardous materials and facilities inventories.

The District uses the State Chancellor’s Office Facilities Planning Unit Guidelines to determine if current facilities provide adequate capacity to support instructional and support needs for the College.

The team found that through the College’s planning processes, the program needs are analyzed, discussed, and improvements are identified. This process includes identifying equipment and facilities needs in *Annual Program Updates* and *Comprehensive Program Reviews*. Each year, physical resource needs are prioritized and forwarded to the District-wide Facilities Committee where facilities resource needs, including deferred maintenance and emergency items, are discussed, prioritized District-wide, and forwarded to the District’s PBC for further review and final recommendations to the Chancellor. (III.B.1)

The District’s comprehensive facilities planning activities ensure that its physical resources are planned and constructed to ensure effective utilization. The comprehensive planning begins in the facilities master planning stage, when campus wide planning identifies broad goals and initiatives. Once any individual project is launched, the project architects, engineers, project managers and facility planners meet often with the College end users to identify the programmatic requirements of the project, develop schematic designs, and ultimately progress to the construction document phase that allows the project to be put out to bid in order for the contract to be awarded.

Upgrades and replacements of facilities have been significant due to the capital construction programs. The passage of two separate bond measures, Measures A and E, provided the majority of the funding for capital construction in the past decade.

Routine maintenance projects are generated through a centralized work order process. First, staff members at the College send a request to the campus Business Office. The work order request in then input by Business Office staff into Mainstar, the centralized maintenance software application that transmits the request to the Department of General Services (DGS). DSG reviews the request, prioritizes all requests District-wide, and assigns the work for completion. Requests are reviewed on a daily basis to ensure completion in a timely manner, and safety requests are prioritized to ensure immediate attention.

The DGS facilities maintenance teams comprise the following units: Facilities Maintenance and Operations Division, Engineering Department, Custodial Department, Grounds Department, Capital Outlay, Design and Construction Division, and the Facilities Planning and Development Division. The role and function of each unit are described in the *DGS 2013-14 Administrative Program Review*. 
The engineers and groundskeepers, based at the College, work through DGS and therefore receive directives from District managers at DGS. However, each College has its own custodial team that falls under the jurisdiction of the College’s Business Office.

The routine maintenance schedule includes the following standard elements: system-level operation and maintenance information such as physical descriptions, functional descriptions, troubleshooting, preventative maintenance procedures and schedules, corrective maintenance repair requirements, parts lists, significant drawings, and equipment specific information. This is organized into a centralized vendor/manufacturer data library. Due to budget constraints and limited manpower, preventative maintenance has been limited; most maintenance is performed on an as-needed basis.

When emergencies occur, DGS executes the Public Contract Code §22050 Emergency Contracting Procedures. Under this code, the Chancellor may authorize emergency projects to begin without prior approval from the Board of Trustees, as long as the Chancellor reports the project to the Board at the next general meeting.

The College communicates its facilities needs to DGS in one of three ways. Routine maintenance is through the work order process, which is handled by the campus Business Office. The DGS Chief Engineer assigns the work to the Assistant Chief Engineer that is located on campus for immediate attention and implementation. Secondly, if the scope of work is over and above the skill set of the campus stationary engineers, a capital outlay project is developed and funded for outside contractors to complete the work. Finally, additional urgent repairs that are not covered by the annual maintenance and operations budget are initiated through the District-wide integrated planning and budgeting process (PBIM) each spring. The items requiring attention are brought to the District Facilities Committee, which passes a resolution for immediate action that is sent to the PBC. Upon review by this shared governance body, a recommendation is then sent to the Chancellor for approval. The approved project is sent to the Board for approval or ratification.

The DGS Comprehensive Program Reviews of maintenance operations have been the primary vehicle used to evaluate the effectiveness of facilities and equipment in meeting the needs of the College’s programs and services. These reviews have provided great insight into staffing levels relative in facilities service needs.

The Director of Business and Administrative Services is generally responsible for the operation and maintenance of the physical resources. Maintaining the College grounds, on the other hand, is the responsibility of the District’s Physical Plant Office.

The College is in the process of replacing two of its buildings. Buildings C and D will be torn down and replaced with new buildings as part of the Measure A funded effort to provide safe, sufficient, up-to-date physical resources. This process has begun, with the three science departments already reestablished at the Science Annex.

The new buildings on campus will feature advanced teaching and laboratory facilities, and discussions are underway to incorporate art, in the form of murals and other displays, to enhance
the visual and emotional experience of science students, and to reach that segment of the student population otherwise unmoved by science and technology.

The College’s C&D Steering Committee provides recommendations and approves site plans and programmatic items.

The cluster of 15 renovated modular buildings will include three classrooms; two computer labs; DSPS offices and workrooms, two sets of bathrooms; custodial work areas, administrative offices; and faculty offices. This will be augmented with 20 new modular buildings for 18 classrooms. The College, in conjunction with District General Services, began the selection of an architectural firm with a design/build framework for the replacement building. The transition to the swing space will be completed in Summer 2015 and the current building will be demolished beginning Fall 2015.

Maintenance and repair of existing structures is an ongoing process. The 2014-2015 College Maintenance and Repairs Priority Needs List is included in a master document that ranks and briefly describes maintenance needs. Annual Program Updates, from each academic and administrative area, list needed physical resources or needed funds for repair/improvement of physical resources. The resource requests are shared with the College Council for review and recommendation to the President. (III.B.1)

The College and the District continually evaluate the College’s facilities, particularly when concerns are raised about health or safety issues. When warranted, the College Business Manager consults with the District Risk Management Director to assess potentially hazardous conditions and facilitate repairs.

The District contracts with the Alameda County Sheriff’s Department for policing of the campus. In addition to sheriffs, the College provides safety aides to assist in maintaining a safe campus. Safety aides patrol the campus in late afternoons and early evenings, wearing safety aide jackets. The safety aides have equipment that provides immediate contact with the sheriff’s officers. Currently underway is a new security project, financed by Proposition 39. The Prop 39 LED Lighting Upgrade is an energy-efficient lighting project that will increase security and safety around facilities and in campus parking lots. This lighting upgrade will give students, faculty, staff, administrators, and visitors safer access as well as reduce liability in the event that crimes or personal injury may happen.

Disaster planning is coordinated through a District-wide effort that involves all four campuses and the District Office. BP 3505 details the District’s Emergency Response Plan.

The Department of General Services has completed the following tests to ensure healthy environments:

- Asbestos: abatement reports have been completed for each College. Facilities buildings built before 1970 contain asbestos in construction materials. For these facilities, before construction projects begin, asbestos removal is conducted as required by California’s Asbestos Standards in Construction, by asbestos certified consultants if the asbestos fiber
content is more than 0.1% and the space is larger than 100 square feet.

- **Air Quality:** on an as requested basis. DGS conducts the tests in existing buildings. For new construction, best management practices and thresholds of significance are included in construction criteria. At this point in time, a lighting assessment is in progress for classrooms and stairwells. (III.B.1)

Physical resources are planned, maintained and/or upgraded based on formal communications between the College employees and the President. These communications take the form of APUs each year, in which different campus organizations note equipment, maintenance, technology or other needs.

The Business and Administrative Services Office uses the APUs to generate an annual Resource Request List that includes physical-resource needs such as equipment and supplies, office space, maintenance needs, storage, facilities-improvements such as sinks and laboratory benches, smart-classroom development, increased tutoring and math-lab space, lighting upgrades, etc.

The Resource Request List is summarized and narrowed down for longer-term planning, which is manifested as the College of Alameda – Summary of Resource Requests for 2014/2015.

The team verified that the planning process proceeds as follows: After review of the facilities needs as presented in APUs by the President’s Senior Team, the resource requests are reviewed and prioritized by department managers, the department chairs, the Student Services Council and the Classified Senate. Division Deans next review the list, make any recommendations, and forward priorities to the Vice President of Instruction and the Vice President of Student Services. The Vice-Presidents bring recommendations to the Budget Advisory Committee for review. The College Council receives the list next, and makes recommendations to the College President. The President then announces the final version to the College community. Priorities then are forwarded to the District Budget Committee for final approval. (III.B.2)

The new Budget Allocation Model encourages and supports collaboration between the College and the District. *College of Alameda’s Facilities Master Plan*, part of the *Educational Master Plan*, links educational objectives and projected space needs with required funding. The College Business and Administrative Services Office, working with the Department of General Services (DGS), submit a “Space Inventory” to the State each year. The new five-year Construction Plan includes cost of construction for new facilities, and projects costs of upkeep. (III.B.a)

Institutional planning precedes and provides direction for physical resource planning. College strategies addressing facilities are evaluated and assessed annually. The College relies on a participatory governance process to review and provide input into plans, including technology decisions. The College’s facilities planning is integrated with the District’s institutional planning through participatory governance processes that channel campus requests through the District’s *Planning and Budgeting Integration Model* (PBIM). The PBIM is an integrated District-wide planning and budget advisory system of four committees that receive planning input from the Colleges and make recommendations to the Chancellor. (III.B.2.a)
**Conclusion**

The team found that the College physical resources are well managed and designed to support student learning programs and services, regardless of location or means of delivery. The College considers the needs of programs and services when planning new buildings, maintenance, and upgrades.

The facilities planning processes are designed to ensure that program and service needs determine equipment replacement and maintenance, thus ensuring effective utilization and continuing quality of those programs and services. Capital projects are linked to institutional planning through the District-wide and College policies and procedures that are currently in place.

The College does not meet the Standard.

**College Recommendations**

See College Recommendation 2

College Recommendation 14
In order to improve institutional effectiveness, the team recommends the College collaborate with the District General Services Department of Risk Management to conduct a risk management assessment of College facilities and make recommendations to the College Facilities or College Health & Safety Committees that inform the College Maintenance and Repairs Priority Needs List. (III.B.1)

**District Recommendations**

District Recommendation 3
In order to meet the Standards, the team recommends that District General Services (DGS) work with college personnel to implement a plan to address total cost of ownership for new facilities and equipment, including undertaking critical deferred maintenance and preventive maintenance needs at the college in order to assure safe and sufficient physical resources for students, faculty and staff. (III.B.1, III.B.1.a, III.B.2.a)

See District Recommendation 4
Standard III: Resources
Standard IIIC – Technology Resources

General Observations

The responsibility for technology is shared between the District and the College. The District takes responsibility for the ERP system and the voice network as well as the general safety, reliability and scalability of the network. There are redundant backup systems as well as generators to support the system if power is lost.

The College has approximately 800 PCs; 35 switches used to expand network access and interconnection between buildings; 20 servers; 18 smart classrooms; and computer labs ranging from Open Lab to DSPS Adaptive Computer Learning Center. All designed to support the teaching learning environment.

The College has supplied a comprehensive helpdesk program to help with the immediate needs of the students, staff and faculty. Also much of the funding for the technology is coming from bond funding.

Since 2009 the college has benefited from the PeopleSoft implementation including the Student Financial Aid and Academic Advising as well as the SARS software which are currently in the testing phase.

Findings and Evidence

Good progress has been made in terms of which entity – College or District – is responsible for what as documented in the Matrix for District and College IT Responsibilities. The College helpdesk receives all requests and disseminates them to the appropriate group. (III.C.1)

The College has developed an all-inclusive model for delivering the technology services. Through a series of cost cutting events a structure was changed to that it includes both instructional and administrative support. New job descriptions were developed and hiring occurred. All this was done while increasing level of support. This effort is documented in the helpdesk logs. (III.C.1.a)

The College/District has a robust number of choices to assist student, faculty and staff by implementing the major modules of Enterprise system. The District has also taken full advantage of the State provided software such as CENIC as an internet provider, CCCapply for online applications. Moodle is fully functional in providing access for students and faculty to the online courses. Moodle is an adaptable architecture so it can adjust to any of the new generations of technological innovations. (III.C.1.b)

Funding for the technology is provided from a bond. There does not seem to be a plan for how to continuously improve or maintain life cycle replacement. Bond funds are still a viable method of increasing technology. The College and the District will need to address a “refresh plan” as bond funds come to completion.
The College and District have developed an information Technology Strategy which is integrated into both the college wide plan through Program Reviews/Unit Reviews and throughout the process that occurs in the PBC. An example of this process is wireless connectivity is not comprehensive and is installed or enhanced by request. The Board received approval to spend bond funds to meet this need and provide a single wireless sign on for students and guests. (III.C.1, III.C.1.d)

Using the results of a test of the system, the District determined that the Alertfy product was not working for the campuses safety alerts so an RFP went out to do a better job of alerting the campuses. There is redundancy in a backup generator at the District level, but funding has not been available to provide this at the College level.

While the System Development Lifecycle Methodology provides good training during the implementation phases, it does little to ensure consistency and sustainability. There are some very good elements to the training offered. Realizing that funding has been sparse for the last five years, perhaps now would be a good time to assess training needs and then implement a comprehensive plan that covered new releases of Microsoft Office Suite, updates to PeopleSoft, Moodle training on pedagogy and well as content. A teaching and learning center is contemplated and was addressed in the IT staff meeting. (III.C.1.b)

**Conclusion**

The college meets the Standard.

**District Recommendation**

See District Recommendation 4
Standard III: Resources
Standard IIID – Fiscal Resources

General Observations

The planning cycle from Mission, Strategic Plan to College Goals are focused on the Student Success, Access and Equity with eye toward maintaining fiscal oversight and creative solution. These are widely published on the website and communicated through various venues including President’s Flex Day presentation and align with the District Strategic Plan.

The College has been through several difficult budget years but has maintained a strong and increasing fund balance while paying down debt.

Findings and Evidence

The mission and goals are widely known. The Institutional Planning 2013-14 describes a good process, but there is no documented evidence that it is followed and that the missions and goals are the foundation of the planning, resources prioritization and allocation. (III.D.1)

The integrated Planning and Budget Process provides opportunities for all constituents to participate and is based on program review and provides evidence through the rating matrix. The planning cycle provides sufficient opportunity for communication on financial resources available well before budget development occurs. The District utilizes a funding model that is based on the SB 361 of allocating resources based on revenue projected rather than expenditures expected. The Self Evaluation Report included the District overall information although the Final Budget 2014-2015 included data by the College. The College receives staffing spreadsheets in March and budget allocation projects for the next fiscal year in late April. All College planning and resource requests go through the budget committee and are documented in the minutes. (III.D.1.a, III.D.1.b)

Anually the District Office of Finance and Administration sends to the College Presidents and Directors of Business and Administrative Services the guidelines for completing the annual budget. The notice includes the budget development calendar, the most current revenue assumptions from the CCCCO, a record of the current discretionary allocations, and the position control report. The District Finance Office also sends budget worksheets, guidelines, and deadlines for all categorically funded programs. This is sent to the colleges in April. The Director of Business and Administrative Services reviews the information and distributes information and worksheets to each of the cost center managers for review. This is a well-defined process ensuring that there is widespread participation. (III.D.1.d)

The Peoplesoft system does have built in appropriate checks and balances. The audit on internal controls has an unmodified/unqualified opinion on internal controls further supporting this outcome. (III.D.2)

There is integrity and a high degree of credibility and accuracy in the financial documents. However, the financial report in the Self Evaluation Report did not tie back to source documents.
This was sufficiently explained with audit adjustments from a prior year. The June 30, 2014 audit has an unqualified/unmodified opinion. (III.D.2.a)

A great deal of progress has been made on resolving the initial 53 audit findings, but there are 11 in the 2014 year of which four are repeats with two additions that look suspiciously like repeats. The College specifically had the NSLDS report inconsistency and a follow up program review was conducted by the Department of Education. Also, the College is also not properly recording time spent on grants, not properly tagging federally funded capital assets, and had some residency issues with changing non-residency to residency without documentation. The District audit shows qualified opinions on both federal and state funding. The District developed a matrix to track responsibility and progress on the various findings. The new Financial Aid Director at the District understands the importance of these findings and is working with a resolution team to correct these findings as quickly as possible. (III.D.2.b)

Appropriate financial information is presented in committee meetings as well as at the appropriate board meetings. The processes in place over grants, auxiliary activities, and fund raising are properly approved and are part of the budget cycle and annual audit. All are used for intended purposes. There are sufficient board policies in place to provide the framework. Internal controls are assessed as part of the audit and the District employs an internal auditor to further ensure the integrity of the controls. (III.D.2.c, III.D.2.e)

While a great deal of progress has been made on the planning for the OPEB liability it continues to be a focus in the audit findings. There are two liabilities. The UAAL and the bond repayment. They have negotiated away the increase in future benefits which has resulted in a reduction of the UAAL from $174 million to $154 million and has added a set-aside for the OPEB liability. The Retirement Board has done a good job in restructuring the debt as well as realigning the investment policy and increasing performance. The fund has a balance of $218 million. Because of the positive return on invested bond proceeds, the UAAL is actually fully funded and would show as such in the actuarial analysis if the funds were deposited into an irrevocable trust. There are plans to do so, but nothing is formalized. The passage of a parcel tax is assisting in making sure the core academic programs continue and has assisted the College in meeting its educational goals but it is not a permanent increase. In addition, two capital bonds were passed to improve the facilities: Measure E is complete and Measure A is continuing. This is a District level concern, and as much the College is impacted by these funding sources but has little impact on these decisions. This is a District Recommendation. (III.D.1.c, III.D.2.d)

The Board Policies are in place and up to date with appropriate administrative procedures to ensure sound financial practices and financial stability. (III.D.3)

The past five years, the state was over burdened with deferred payments to the colleges. Since a TRANs was not needed in the last fiscal year, the steps necessary to ensure sufficient cash flow are in place. The condition of the state budget has aided this outcome as have good planning over the controllable liabilities. (III.D.3.a, III.D.3.f)

There is sufficient oversight of the finances including grants and externally funded programs and auxiliary services. The default rate for student loans is at 18.7% well below the 30% rate set by
the Department of Education. However, Financial Aid received a qualified opinion. The audit did produce a finding on the NSLDS which has been identified as a technical issue not a compliance or internal control deficiency. The addition of an internal auditor will assist with effective oversight. Financial Aid, Admissions and Records, and IT have formed a resolution team and have determined the causes of the inaccurate data that was sighted in the 2014 audit and in The Department of Education Program Review. The team is working to correct the deficiencies. (III.D.3.b, III.D.3.f)

Significant progress has been made on the OPEB liability. The method that the District chose to alleviate the OPEB liability was creative in its investment strategy. The investments did not keep pace with the debt service, and so with balloon type payments and variable interest payments on the horizon, the District did several refinancing and three SWAP agreements. The debt repayment appears to be manageable; however, the colleges still have to provide additional funds to cover the OPEB Liability as well as debt repayment. The Revocable Trust has a market value of $218 million. The pay-as-you-go amount is approximate $10.8 M and has been determined by an actuary. The study is done every two years and in March 2015 a draft report was issue from TotalComp outlining all of the required calculations to comply with accounting standards. While the College is affected by this activity, it has little impact on the decisions. (III.D.3.c, III.D.3.d)

The purchasing function is a District level function. There are Board policies in place to provide internal controls sufficient to ensure appropriate provisions to maintain the integrity of the institution over contracts with external entities. (III.D.3.g)

The College does a comprehensive program review and participates in the PBC. This is again a District function. The PBC does review its practices on a yearly basis and instituted a new funding model. This is a revenue based funding model and is consistent with the SB361 model although it is not a mirror of the model. Since this is a new process, it should be regularly evaluated for appropriateness of the application for each college. The current configuration appears to hinder growth. Barriers to the College’s success in meeting its targets should be assessed and the model revised as needed. This is a shared responsibility. (III.D.1.a, III.D.1.b, III.D.3.h)

All of the elements are in place for financial resource planning to be integrated with institutional planning: The Planning Handbook, College Goals, and the planning matrix as well as the committee structure. The mechanisms are in place to systematically assess, but there is not documented evidence that this occurs. (III.D.4)

**Conclusion**

There are planning documents in place but no documented evidence that they are followed. The College and the District are working to resolve the issues related to the Financial Audit finding and the Department of Education Program Review. Since the Budget Allocation Model is a new format, continuous review and analysis should be done to ensure equitable distribution of resources.

The College does not meet the Standard.
College Recommendations

See College Recommendation 2

See College Recommendation 6

College Recommendation 15
In order to meet the Standard, the team recommends that the College comply with the recommendation in the Department of Education Program Review dated January 5, 2015 in response to audit findings on data submitted to the NSLDS. (III.D.2.a, III.D.2.b, III.D.3.b, III.D.3.f)

College Recommendation 16
In order to meet the Standards, the team recommends that the Budget Allocation Model be assessed for effectiveness to provide fair distribution of resources that are adequate to support the effective operations of the College. (III.D.2.a, IV.B.3.c)

District Recommendations

District Recommendation 1
In order to meet the Standard, the team recommends that the District follow the 2014 audit recommendations and develop an action plan to fund its Other Post-Employment Benefits (OPEB) liabilities, including the associated debt service. (III.D.1.c, III.D.3.c, III.D.1.c)

District Recommendation 2
In order to meet the Standard, the team recommends that the District resolve comprehensively and in a timely manner the ongoing deficiencies identified in the 2013 and 2014 external audit findings. (III.D.2.b, III.D.1.h)

See District Recommendation 4

District Recommendation 8
In order to meet the Standards, the team recommends that the District systematically evaluate the equitable distribution of resources and the sufficiency and effectiveness of district-provided services in supporting effective operations of the colleges. (IV.B.3.b, IV.B.3.c, III.D.1.a, III.D.1.b, III.D.1.h)
Standard IV: Leadership and Governance
Standard IVA – Decision-Making Roles and Processes

General Observations

The College has undergone significant senior leadership changes. During this accreditation cycle, the College has had three Presidents, five Vice Presidents of Instruction, and two Vice Presidents of Student Services. The College does not have a campus-based researcher; these services are provided through the District. Many of the College staff and students who were interviewed or spoke at the college forums were passionate about the College and its mission.

The College relies on administrative, faculty, staff, and student leadership in its decision-making processes in making recommendations to the College President. The College Council is the overarching governance committee that consists of representatives appointed from the Academic Senate, Classified Senate, Department Chairs, Associated Students, Administration, and from the various College Council standing committees and is advisory to the president. Appointments of representatives to the College Council and its standing committees are made in accordance with the appropriate Board Policies and Administrative Procedures. The College Council deliberates and discusses matters of college-wide importance and makes recommendations on College policies and procedures to the president as appropriate. There is also a President’s Cabinet which consists of the College President, Academic Senate President, Classified Senate President and the Associated Students of College of Alameda President. The purpose of the Cabinet is to be a consultative body that informs the President of recommendations that are being brought forward to the College Council through the governance for consideration and action; however, the Cabinet itself is not a recommending body.

Several standing committees report to the College Council with recommendations specific to the roles of the committees, such as budget, institutional planning, facilities planning, and staff development. Similar to College Council, the various standing committees are representative bodies that include membership from the faculty, staff, students, and administrators.

The College governance structure also includes the faculty Academic Senate which by statute and regulation makes recommendations to the College President on academic and professional matters, as defined in the District Board Policies and Administrative Procedures. Per District Administrative Procedures, the College president is to rely primarily on the advice and judgment of the Academic Senate when considering recommendations made regarding academic and professional matters.

The Curriculum Committee is responsible for developing College policies and procedures for all matters regarding course and program development and approval. It reviews all curriculum proposals for compliance with all applicable laws, regulations and policies. Following College approvals of curriculum, course and program proposals are forwarded to the Council on Instruction, Planning and Development (CIPD) for review and approval.

All constituencies have a clearly defined role in the college governance structure, and the processes for bringing forward recommendations for review, discussion, and action through the
Findings and Evidence

All constituencies at the College recognize and support the need for inclusive participatory governance and ethical leadership. There is a District board policy on ethics, civility, and mutual respect that applies to all members of the District community. The student code of conduct is stated in AP 5500 and is included in the catalog. Participatory governance processes are well established at the College. (IV.A.1)

District Board Policies and Administrative Procedures outline the roles of faculty, staff and students in college and district governance, and the college Standing Committees Structure handbook defines the purposes, membership and functions of the College Council and College standing committees, including the means by which proposals for improving the College are brought through the governance structure. The College Council is the overarching College participatory governance body that makes recommendations to the College President, while the Academic Senate is the legal voice of the faculty that makes recommendations to the College President on academic and professional matters. The College has numerous standing committees that are representative of the faculty, staff, students, and administration. All committees are listed on the “Leadership and Governance” webpage. It is not immediately clear in any process document how standing committees are linked through the governance structure. For example, it is not clear which committees report to the College Council and which committees report to the Academic Senate. It is also noted that the inactive committees are listed along with the active committees. However, there is a PowerPoint presentation posted online that illustrates the governance structure, as revised in 2013. Each committee has a webpage, with agendas, minutes and other pertinent committee documents posted. In some cases, the posting of agendas and minutes is not up to date. While the College Council employs a clear format for its minutes that align agenda items with dialog and action, this format is not uniformly used. Finally, while committee actions and recommendations can be identified in meeting minutes, it is not clear how recommendations are transmitted and communicated through the governance structure. Interviews revealed that Academic Senate recommendations are transmitted to the President by memorandum, while the forwarding of recommendations from the College Council appear to have been done more informally, such as by email communication or verbal communication. Also, it is not entirely clear how the President communicates his/her disposition of recommendations brought forward through the governance structure.

At the District level, there is a clearly defined overarching district participatory governance structure under the auspices of the PBC. Three District standing committees (District Technology Committee, District Education Committee and District Facilities Committee) report to the PBC. A District Academic Senate with representative membership from the College Academic Senates makes recommendations on board policies and administrative procedures to the governing board and/or Chancellor, as appropriate. (IV.A.2, IV.A.2.a, IV.A.3).

The College has a Curriculum Committee that operates under the auspices of the Academic Senate. Membership is primarily faculty, but also includes the Vice President of Instruction, the
Vice President of Student Services, and two academic Deans. The Curriculum Committee oversees the development, review and approval of curriculum, including the development and approval of new courses and programs and the revision of existing courses and programs. When new courses and programs are approved at the College, they are then submitted to the CIPD for review and approval. The CIPD ensures compliance with District policies on curriculum. All District curriculum policies and procedures are compiled and extensively described in the *Peralta Course and Program Approval Process Manual*, which is available on the Curriculum webpage on the District website. (IV.A.2.b)

The College complies with all reporting requirements to all external agencies, including ACCJC. All accreditation information is publicly available on the College website and is easily found. Posted and publicly available information includes all reports to ACCJC and communications between the College and the ACCJC, dating back to 2001. However, the College currently does not comply with the Commission Policy on DE and CE and the Commission Policy on Substantive Change. The College reports that 35% of its courses are offered via DE, yet states that no program can be completed by taking more than 51% of courses via DE. The College claims in its Self-Evaluation Report that it is not required to submit a substantive change proposal to the ACCJC. However, an examination of the IGETC Certificate of Achievement and the Liberal Arts Area of Emphasis Associate of Arts Degree (Social and Behavioral Sciences) shows that both of these programs can be completed by taking more than 51% of required courses through distance education. Further interviews revealed that in addition to the identified need to submit a substantive change proposal to the ACCJC for DE, the College has also been advised by the ACCJC that it must submit a substantive change proposal for the operation of its off-site science and laboratory classroom building located two blocks from the College. (IV.A.4; ER 21)

The College asserts in its Self-Evaluation Report that its governance and decision-making structures and processes are regularly evaluated for integrity and effectiveness. However, there is no evidence that a formal process for regularly assessing, evaluating and improving the College-level governance structures and processes exists.

At the District level, surveys sent to the memberships of the district standing governance committees are the only evidence of assessment of the governance structure. Evidence of a formal process for regularly assessing, evaluating and improving the District governance structure cannot be found. (IV.A.5)

**Conclusion**

The College has an established governance and decision-making process. However, College staff members indicate that the implementation could be improved and more inclusive. More clarity is needed in demonstrating how ideas for improving the institution are brought through the governance structure for consideration and action. Establishing a process for evaluating the effectiveness of the College governance structure on a regular and ongoing basis should be undertaken. The College is very optimistic about its future based on the arrival of new campus leadership including the President, Vice President of Instruction, and Academic Senate President. The President has stated a commitment to improved communications, transparency,
cohesiveness, and accountability. This has been welcomed by the campus community who report that there is a marked improvement in college morale and there is the sentiment that the administration is invested and that new ideas will be implemented. The College does not meet the Standard.

**College Recommendations**

See College Recommendation 1

See College Recommendation 3

See College Recommendation 7

**College Recommendation 17**

In order to meet the Standards and the Eligibility Requirement and to comply with the ACCJC Policy on Distance Education and Correspondence Education and the Policy on Substantive Change, the team recommends that the College submit substantive change reports to the Commission as soon as possible and receive approval to offer its programs through distance education and at the off-site science and laboratory building. (IV.A.4; ER 21)

See College Recommendation 9

**College Recommendation 18**

In order to improve institutional effectiveness, the team recommends that the College establish a means to clearly identify and communicate recommendations made through the College governance structure and operational processes to the College president, and how those recommendations improve student learning programs and services. The outcomes of committee work and actions of the president in response to recommendations should be widely and effectively communicated to the College. (IV.A.1, IV.A.2, IV.A.3)
Standard IV: Leadership and Governance
Standard IVB – Board and Administrative Organization

General Observations

See IV.A.

Findings and Evidence

The College is one of four colleges within the District. It understands the role and responsibility of the governing board. The College is aware of the Board’s bylaws and policies and it is the adherence to these protocols that assures that the board acts with integrity and in an ethical manner. The policies also promote the improvement of student learning programs and services. They follow the Community College League of California’s Board Governance Education Program. The Board also engages in orientation for new members as well as in its own professional development. A number of special Board workshops were convened, aimed at building an exceptional team, environmental scanning, and strategic planning. There is also a board policy for self-evaluation; it is conducted annually. The criteria for the Board’s self-evaluation are based on the Accreditation Standards and the District’s strategic goals. A rating scale with the resulting average rating for each criterion is calculated and provided for consideration.

The Board delegates the authority to the Chancellor to implement its policies. Through the processes and structures established and/or approved by the Chancellor, the College participates in activities and decisions related to technology, facilities, education, planning, and budgeting (i.e. committees). There is a board policy which informs the process and methodology used for the evaluation of the Chancellor. The Chancellor’s goals are identified and the metrics for evaluations are defined. The Board reviews the evaluation with the Chancellor in a closed session. However, College leaders are not aware of opportunities to provide input into the evaluation of the Board or the Chancellor. The Board has adopted a policy for hiring the College presidents. Members of the College indicated that they were able to provide input into the evaluation of the College President. The President’s evaluation or the form used for the evaluation could not be located or provided to the team. Additionally, the team could not ascertain when the evaluation was done.

The Board receives regular reports on accreditation and topics related to student learning programs and services from the Chancellor and the college presidents. College members stated their belief that the Board was engaged with student success but felt that the Board could be more proactive. (IV.B.1.a-j)

The College acknowledges the responsibilities of the president and the expected actions for effective leadership. The President oversees an administrative staff with specific duties and responsibilities assigned to individuals. The President assures compliance with statutes, regulations and board policies. The President reviews updates to the California Education Code and Title 5 of the California Code of Regulations (Education) as part of College committee meetings. Through a variety of forums and media the President regularly and effectively
communicates important information to the campus community. External community partners also receive college information through the many collaborative projects established by the college such as the Alameda Transportation and Logistics Academic Support Partnership. (IV.B.2.a,c,e)

It is unclear how the President guides institutional improvement of teaching and learning. Effective evaluation based on robust research and analysis is a challenge since the College does not have a campus based researcher; the College relies on the shared resources of the District research staff and must compete with other data priorities. Although the College has an established process for planning through its APUs and review by the College Council, Academic Senate, IEC, and other groups, there are no procedures to evaluate overall institutional planning. There is also a scarcity of evidence demonstrating the effectiveness of the implementation (and follow-through) efforts based on approved plans. (IV.B.2.b)

The College comprehensively compiles its resource needs based on published plans, campus consultation, and prioritization. Since the District has a fairly prescriptive model for budget allocations, the college efforts appear fairly rote. In such an environment, it cannot be determined if the President effectively controls the budget and expenditures. (IV.B.2.d)

The College is one of four colleges within the District. The delineation between the responsibilities and functions of the District and those of the College is not evident. This lack of clarity leads to observations by some College members that the District processes are too cumbersome and bureaucratic, and district decisions are overly centralized and lack transparency. Although the College acknowledges that the president is provided with the authority by the Chancellor to operate the College and is held accountable, impressions persist that there are too many “top down” decisions from the district thereby creating a sense of disillusionment. (IV.B.3.a-e) As such it is unknown whether the services provided by the District are effective. There is belief at the College that its budget allocation from the District is inadequate to sustain its operations. For example, the College must compensate adjunct faculty members to maintain office hours. The funds are not in the College’s budget allocation, so it must rely on internal savings and transfers to address this funding gap. (IV.B.3.a-d)

The District and College employ a number of mechanisms for timely communications and exchange of information such as the website, District wide committee meetings, and written reports. The District also evaluates the integrity and effectiveness of its structures and processes through the District Service Centers Survey (for the Planning and Budgeting Integration process). Additional surveys and other assessments of other committees and processes would be helpful. (IV.B.3.f,g)

Conclusion

See IV.A.

College Recommendations

See College Recommendation 16
**College Recommendation 19**
In order to meet the Standards, the team recommends that the College President establish a collegial process that sets values, goals, and priorities; ensure that evaluation and planning rely on high quality research and analysis of external and internal conditions; ensure that educational planning is integrated with resource planning and distribution to achieve student learning outcomes; establish procedures to evaluate overall institutional planning and implementation efforts; and effectively control budget and expenditures. (IV.B.2)

**College Recommendation 20**
In order to meet the Standard, the team recommends that the College and the District collaborate to clearly delineate and communicate the operational responsibilities and functions of the District from those of the College and consistently adhere to this delineation in practice; and regularly assess and evaluate District role delineation and governance and decision-making structures and processes to assure their integrity and effectiveness in assisting the College in meeting educational goals. (IV.B.3)

**District Recommendations**

See District Recommendation 4

**District Recommendation 6**
In order to meet the Standard, the team recommends that the district clearly delineate and communicate the operational responsibilities and functions of the district from those of the colleges and consistently adheres to this delineation in practice; and regularly assesses and evaluates district role delineation and governance and decision-making structures and processes to assure their integrity and effectiveness in assisting the colleges in meeting educational goals. (IV.B.3)

**District Recommendation 7**
In order to meet the Standards, the team recommends the Governing Board adhere to its appropriate role. The Board must allow the chancellor to take full responsibility and authority for the areas assigned to district oversight. (IV.B.1, IV.B.1a, IV.B.1.e, IV.B.1.j)

See District Recommendation 8
Checklist for Evaluating Compliance with Federal Regulations and Commission Policies
(in addition to what is specifically evaluated within the language of Accreditation Standards)

NOTE: This checklist will become part of the external evaluation team report. It is also an appendix in the team training materials.

The team should place a check mark next to each item when it has been evaluated. For each category, the team should also complete the conclusion check-off and insert appropriate narrative to alert any concerns or noncompliance areas.

Public Notification of an Evaluation Visit and Third Party Comment

______ The institution has made an appropriate and timely effort to solicit third party comment in advance of a comprehensive evaluation visit.

______ The institution cooperates with the evaluation team in any necessary follow-up related to the third party comment.

______ The institution demonstrates compliance with the Commission Policy on Rights and Responsibilities of the Commission and Member Institutions as to third party comment.

Regulation citation: 602.23(b).

Conclusion Check-Off (mark one):

______ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

______ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

______ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative:

The team did not find evidence of seeking third party comment in advance of the visit.
Standards and Performance with Respect to Student Achievement

__X__ The institution has defined elements of student achievement performance across the institution, and has identified the expected measure of performance within each defined element. Course completion is included as one of these elements of student achievement. Other elements of student achievement performance for measurement have been determined as appropriate to the institution’s mission.

__X__ The institution has defined elements of student achievement performance within each instructional program, and has identified the expected measure of performance within each defined element. The defined elements include, but are not limited to, job placement rates for program completers, and for programs in fields where licensure is required, the licensure examination passage rates for program completers.

__X__ The institution-set standards for programs and across the institution are relevant to guide self-evaluation and institutional improvement; the defined elements and expected performance levels are appropriate within higher education; the results are reported regularly across the campus; and the definition of elements and results are used in program-level and institution-wide planning to evaluate how well the institution fulfills its mission, to determine needed changes, to allocating resources, and to make improvements.

__X__ The institution analyzes its performance as to the institution-set standards and as to student achievement, and takes appropriate measures in areas where its performance is not at the expected level.

Regulation citations: 602.16(a)(1)(i); 602.17(f); 602.19 (a-e).

Conclusion Check-Off (mark one):

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

__X__ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative:

The College has not demonstrated compliance with the Commission Policies on Standards and Performance with Respect to Student Achievement. See College Recommendation 3.
Credits, Program Length, and Tuition

_**X**_ Credit hour assignments and degree program lengths are within the range of good practice in higher education (in policy and procedure).

_**X**_ The assignment of credit hours and degree program lengths is verified by the institution, and is reliable and accurate across classroom based courses, laboratory classes, distance education classes, and for courses that involve clinical practice (if applicable to the institution).

_**X**_ Tuition is consistent across degree programs (or there is a rational basis for any program-specific tuition).

_**X**_ Any clock hour conversions to credit hours adhere to the Department of Education’s conversion formula, both in policy and procedure, and in practice.

_**X**_ The institution demonstrates compliance with the Commission Policy on Institutional Degrees and Credits.

Regulation citations: 600.2 (definition of credit hour); 602.16(a)(viii); 602.24(e), (f); 668.2; 668.9.

Conclusion Check-Off (mark one):

_**X**_ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

_____ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative:
Transfer Policies

__X__ Transfer policies are appropriately disclosed to students and to the public.
__X__ Policies contain information about the criteria the institution uses to accept credits for transfer.
__X__ The institution complies with the Commission Policy on Transfer of Credit.

Regulation citations: 602.16(a)(1)(viii); 602.17(a)(3); 602.24(e); 668.43(a)(ii).

Conclusion Check-Off (mark one):

____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.
____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.
__X__ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative:

The College has not demonstrated compliance with the Commission Policy on Transfer of Credits.
Distance Education and Correspondence Education

__X__ The institution has policies and procedures for defining and classifying a course as offered by distance education or correspondence education, in alignment with USDE definitions.

__X__ There is an accurate and consistent application of the policies and procedures for determining if a course is offered by distance education (with regular and substantive interaction with the instructor, initiated by the instructor, and online activities are included as part of a student’s grade) or correspondence education (online activities are primarily “paperwork related,” including reading posted materials, posting homework and completing examinations, and interaction with the instructor is initiated by the student as needed).

__X__ The institution has appropriate means and consistently applies those means for verifying the identity of a student who participates in a distance education or correspondence education course or program, and for ensuring that student information is protected.

__X__ The institution demonstrates compliance with the Commission Policy on Distance Education and Correspondence Education.

Regulation citations: 602.16(a)(1)(iv), (vi); 602.17(g); 668.38.

Conclusion Check-Off (mark one):

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

__X__ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative:

The College has not demonstrated compliance with the Commission Policies on Distance Education and Correspondence Education. See College Recommendations 11 and 17.
Student Complaints

__X__ The institution has clear policies and procedures for handling student complaints, and the current policies and procedures are accessible to students in the college catalog and online.

__X__ The student complaint files for the previous six years (since the last comprehensive evaluation) are available; the files demonstrate accurate implementation of the complaint policies and procedures.

__X__ The team analysis of the student complaint files identifies any issues that may be indicative of the institution’s noncompliance with any Accreditation Standards.

__X__ The institution posts on its website the names of associations, agencies and governmental bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints with such entities.

__X__ The institution demonstrates compliance with the Commission Policy on Representation of Accredited Status and the Policy on Student and Public Complaints Against Institutions.

Regulation citations: 602.16(a)(1)(ix); 668.43.

Conclusion Check-Off (mark one):

__X__ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

_____ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative:
Institutional Disclosure and Advertising and Recruitment Materials

__X__ The institution provides accurate, timely (current), and appropriately detailed information to students and the public about its programs, locations, and policies.

__X__ The institution complies with the Commission Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status.

__X__ The institution provides required information concerning its accredited status as described above in the section on Student Complaints.

Regulation citations: 602.16(a)(1)(vii); 668.6.

Conclusion Check-Off (mark one):

__X__ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

_____ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative:
Title IV Compliance

__X__ The institution has presented evidence on the required components of the Title IV Program, including findings from any audits and program or other review activities by the USDE.

__X__ The institution has addressed any issues raised by the USDE as to financial responsibility requirements, program record-keeping, etc. If issues were not timely addressed, the institution demonstrates it has the fiscal and administrative capacity to timely address issues in the future and to retain compliance with Title IV program requirements.

__X__ The institution’s student loan default rates are within the acceptable range defined by the USDE. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range.

__X__ Contractual relationships of the institution to offer or receive educational, library, and support services meet the Accreditation Standards and have been approved by the Commission through substantive change if required.

__X__ The institution demonstrates compliance with the Commission Policy on Contractual Relationships with Non-Regionally Accredited Organizations and the Policy on Institutional Compliance with Title IV.

Regulation citations: 602.16(a)(1)(v); 602.16(a)(1)(x); 602.19(b); 668.5; 668.15; 668.16; 668.71 et seq.

Conclusion Check-Off:

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

__X__ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative:

The College regularly reviews the default rate and publish it as part of the Planning and Budget Council (PBC) meeting minutes. The College is under the default rate of 30%. The College received a program review from the Department of Education. The findings were principally the result of the inability to correctly report data. The underlying awards, draw downs, and disbursements were, according to the external audit findings, all correct; however, when the data was sent to the clearing house, it was not complete. These findings are being worked on by the internal auditor, the new Financial Aid Director, and IT. See College Recommendation 8.