EVALUATION REPORT

MENDOCINO COLLEGE

Ukiah, California

A Confidential Report Prepared for

The Accrediting Commission for Community and Junior Colleges

Western Association of Schools and Colleges

This report represents the findings of the evaluation team’s visit to
Mendocino College, March 10-13, 2014

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SUMMARY OF EVALUATION REPORT

DATES OF VISIT: March 10-13, 2014

INSTITUTION: Mendocino College

TEAM CHAIR: William T. Scroggins
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Mendocino College is a comprehensive college with its main campus in Ukiah, California, serving portions of Mendocino and Lake Counties. The district serves an area of almost 3,200 square miles in rural Northern California. The College has two permanent educational centers, in Willits and Lakeport. In addition, the College also owns a field station in Point Arena which is used for field research. Approximately 140,000 residents live within the boundaries of the district.

The Mendocino-Lake Community College District was originally formed in 1972 within the boundaries of Mendocino County by a vote of the citizens of the Anderson Valley, Round Valley, Ukiah and Willits Unified School Districts. The first regular semester-length classes were offered by the College in September 1973. Originally located at the County fairgrounds, the College purchased 127 acres north of Ukiah in 1985 and began building the present main campus. In 1975, a vote by the Kelseyville, Lakeport and Upper Lake School Districts expanded the College’s service area into Lake County.

In November 2006, the College passed a bond measure which generated $67.5 million and enabled the College to construct the Library Learning Center, the Lowery Student Center, the Nursing facility and the maintenance warehouse in Ukiah, plus permanent centers in Willits and Lakeport. Other projects have included technology upgrades in classrooms, new flooring throughout the main campus, and upgrades to existing facilities such as athletic fields, the recording studio and the theatres.

In 2012 the nominal per capita income in Lake County was $19,347 and the median family income was $32,219, which is a decrease of $15,000 since 2006. For Mendocino County, in the same year, the nominal per capita income was $21,832 and median family income was $41,369, which is a decrease of $6,000 since 2006.

In Fall 2013, the College had 4,200 students enrolled throughout the district. Six hundred of these students were full-time; about 19% were student athletes. Women comprise 47% of the student body; the average age is 30. In Fall 2013, 59% of the College’s students identified themselves as white, with 27% Hispanic, 4% Asian/Pacific Islander, 4% African American, and 5% Native American. The College employes 49 full-time faculty members, 74 classified staff of whom 69 are full-time, and 18 full-time administrators.

The twelve-member team, supplemented with a team assistant, conducted a comprehensive evaluation to review evidence that Mendocino College meets the Eligibility Requirements, Accreditation Standards, and Commission policies of ACCJC. The team was on site at the College from Tuesday, March 11 to Thursday, March 13, 2014, with Monday, March 10, spent visiting the centers in Willits and Lakeport. The team reviewed past evaluation reports as well as Follow-Up and Midterm reports,
received and analyzed the Self Evaluation Report and the Update, requested and reviewed additional evidence provided by the College, and extensively viewed evidentiary information provided by the College on its web site.

The previous comprehensive visit in 2008 generated seven recommendations. At its meeting on June 4-6, 2008 the Commission took action to reaffirm the accreditation of Mendocino College with the requirement that the College complete Follow-Up Reports on Recommendations 1, 2, and 3. The team paid particular attention to Standards referenced in this previous evaluation.

In its initial analysis in preparation for the visit, the team found the Self Evaluation Report to be inconsistent, incomplete, and poorly documented. In some cases, the Self Evaluation Report did not substantively respond to the Standards. During the pre-visit, several issues were shared with the College, and requests for further information began. Eventually, the team requested and received many documents not referenced in the Self Evaluation Report but germane to the team’s review of the extent to which the College meets the Standards. Ultimately, the team found that many of the processes were in fact taking place in a manner which meets the Standards, but that the College did not document those processes. It is the team’s strong suggestion that the College create substantive, complete, and comprehensive written documentation of its processes, dialog, outcomes, prioritization, and decisions which support its ability to meet the Standards.

The administrators, faculty, staff and students of Mendocino College were gracious hosts. The staff assigned to facilitate the work of the team were friendly, knowledgeable, and accommodating. Those interviewed responded with openness and candor. In fact, these interviews were the most useful resource to the team. Most materials and appointments requested were fulfilled quickly and amicably, but several key documents were slow to arrives.
The following recommendations are advanced with the purpose of assisting Mendocino College in meeting the Standards and strengthening its operations and outcomes.

**Recommendation 1. Review and Evaluation Mechanisms**
In order to meet the Standards, the team recommends that the College systematically review and modify as necessary all parts of the planning and resource allocation cycle, including institutional and other research efforts. The team further recommends that the College create evaluation mechanisms for all parts of the cycle of integrated planning and resource allocation, assess these evaluation mechanisms, and through systematic review of their effectiveness, improve instructional programs, student support services, library, and other support services. (IB.6, IB.7, IIIC.2, IID.3.h)

**Recommendation 2. Review of Board Policies and Administrative Procedures**
In order to meet the Standards, the team recommends that the College establish a cycle to systematically review and update board policies and administrative procedures. (IIA.6.c, IVB.1.e)

**Recommendation 3. SLOs in Faculty Evaluations**
In order to meet the Standard, the team recommends that the College establish effectiveness in producing student learning outcomes as an evaluation component for all faculty and for all others directly responsible for student progress toward achieving those learning outcomes. (IIIA.1.c)

**Recommendation 4. Evaluation of Participatory Governance Structures**
In order meet the Standard, the team recommends that the College systematically evaluate its participatory governance and decision-making structures and processes to assure their integrity and effectiveness and to use them as the basis for improvement. (IVA.5)
Eligibility Requirements

1. AUTHORITY

The team verified that Mendocino College is approved as a California Community College and is accredited by the Accrediting Commission for Community and Junior Colleges of the Western Association of Schools and Colleges. The College is authorized to operate as an educational institution and to offer undergraduate education for transfer to four-year institutions.

2. MISSION

The team verified that Mendocino College has a mission statement that was revised and adopted by the Board of Trustees on April 10, 2013. The College mission statement is included in both print and electronic publications. The mission statement defines the constituency the College seeks to serve and states the College’s commitment to student learning.

3. GOVERNING BOARD

The team verified that Mendocino College has a functioning governing board responsible for the quality, integrity, and fiscal stability of the institution. The governing board is composed of seven elected members from the geographical area that comprises the district. In addition, the governing board has one student representative and is sufficient in size and composition to fulfill all of its responsibilities. The governing board is an independent, policy-making body that reflects the constituent groups and public interest in its decisions.

4. CHIEF EXECUTIVE OFFICER

The team verified that Mendocino College has a chief executive officer who was appointed by the governing board. The chief executive officer is responsible for administering the policies adopted by the governing board and executing all its decisions.

5. ADMINISTRATIVE CAPACITY

The team verified that Mendocino has the administrative staff to support its mission and purpose, programs, and services. All administrative personnel meet or exceed the minimum qualifications for the positions they hold.

6. OPERATIONAL STATUS

The team verified that Mendocino College is operational and offers courses at the main campus, at its two centers, and at various locations throughout the district.

7. DEGREES

The team verified that Mendocino College offers Associate of Arts/Science degrees in 47 majors and vocational certificate programs in 27 areas of study.
8. EDUCATIONAL PROGRAMS

The team verified that Mendocino College degree programs are compatible with its mission, are based on recognized postsecondary fields of study, and have sufficient content and rigor. The College has established program level learning outcomes and uses the results of the assessment of those outcomes as the basis of awarding credit for courses required for its degree and certificate programs.

9. ACADEMIC CREDIT

The team verified that Mendocino College awards credit for coursework using the Carnegie Standards regardless of location or means of course delivery.

10. STUDENT LEARNING AND ACHIEVEMENT

The team noted that Mendocino College has established and assessed student learning outcomes at the course, program, and institutional levels and uses the results of those assessments to improve teaching, learning, and support functions of the institution.

11. GENERAL EDUCATION

The team verified that Mendocino College degree programs require the completion of general education courses in oral and written communications, analytical thinking and computational skills, natural science, humanities, and social and behavioral sciences. These courses are designed to ensure breadth of knowledge and to promote intellectual inquiry.

12. ACADEMIC FREEDOM

The team verified that Mendocino College faculty and students are free to examine and test all knowledge appropriate to their discipline or area of major study as judged by the academic and educational community in general.

13. FACULTY

The team verified that Mendocino College employs 49 full-time faculty members. The faculty members are qualified to conduct the institution’s programs and meet state-mandated minimum educational and experiential requirements, as well as requirements of the ACCJC.

14. STUDENT SERVICES

The team verified that Mendocino College provides adequate student support services for all students.

15. ADMISSIONS
The team verified that Mendocino College has adopted and adheres to admissions policies and procedures consistent with its mission that specify the qualifications of students appropriate for its programs.

16. INFORMATION AND LEARNING RESOURCES

The team verified that Mendocino College provides specific long term access to sufficient information, learning resources, and services to support its mission and all of its educational programs.

17. FINANCIAL RESOURCES

The team verified that Mendocino College documents a funding base, financial resources, and plans for financial development adequate to support student learning programs and services, improve institutional effectiveness, and assure financial stability.

18. FINANCIAL ACCOUNTABILITY

The team verified that Mendocino College annually undergoes and makes available an external financial audit by a certified public account.

19. INSTITUTIONAL PLANNING AND EVALUATION

The team verified that Mendocino College provides basic planning for the development of the institution.

20. INTEGRITY IN COMMUNICATIONS WITH THE PUBLIC

The team verified that Mendocino College publishes information, in print and electronic format, in its catalog, class schedule, and other publications, concerning the College’s purposes and objectives, admission requirements and procedures, rules and regulations affecting students, degrees offered, and degree requirements. The College distributes annual publications on program accomplishments and student graduates.

21. INTEGRITY IN RELATIONS WITH THE ACCREDITING COMMISSION

The team verified that Mendocino College adheres to the Eligibility Requirements, Accreditation Standards, and policies of ACCJC, describes itself in identical terms to all of its accrediting agencies, communicates any changes in its accreditation status in a timely manner, and agrees to disclose information required by ACCJC to carry out its accrediting responsibilities.
Compliance with Commission Policies

**Policy on Distance Education and Correspondence Education**
In reviewing the College mission and its curriculum and program review processes, the team found that courses and programs are completely in line with the mission, including those offered as online distance education. All courses and programs are clearly identified as being offered by Mendocino College which also controls the creation, scheduling, and outcomes assessment of those courses and programs. As elaborated in the following evaluation of the Standards, the College has established student learning outcomes for its courses and programs, regardless of means of delivery, and provides the facilities, staff, and support for students to reasonably achieve those outcomes. The team verified that the College issues every student a unique identifying number which is required for log in to the College distance education portal every time the student participates in an online class. This is the mechanism by which the College assures that each student who registered for an online class is the student who is participating in the course and receiving credit.

**Policy on Institutional Compliance with Title IV**
Team review of the United States Department of Education website on default rates, revealed that the College has the following default rates: 3 year rate 2011 is 14.4%, for 2010 is 26.5%, and for 2009 is 17.8%; 2 year rate for 2011 is 13.3%, 15.1% for 2010, and 14.5% for 2009.

**Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status**
By reviewing College promotional materials, both in print and online, the team found that the College describes the employment opportunities for its program completers in a clear and accurate manner.

**Policy on Institutional Degrees and Credits**
The team verified that units of credit are awarded by the College following the Carnegie relationship to hours of study required by students regardless of mode of instruction or location of course offerings. The College awards degrees and certificates based on these units of credit in a well-publicized, clear, and consistent manner.

**Policy on Institutional Integrity and Ethics**
The team found that the College’s code of conduct for staff, faculty, and administrators is delineated in Board Policy 302, District Code of Ethics, and the related Administrative Procedure 302.1. These were last reviewed and approved in June and May 2013, respectively. The team also verified that the there is a code of conduct for students. For Board members, it is depicted in Board Policy 208, Board of Trustees Code of Ethics, last reviewed in May 2008. For students, it is specified in Board Policy 533, Code of Student Conduct, and Administrative Procedure 533.1, Student Conduct Guidelines, which were last revised in September 2011 and April 2013, respectively. These policies and procedures are found on the College’s website and are also referenced in the 2013-14 Catalog.

**Policy on Contractual Relationships with Non-Regionally Accredited Organizations**
The College team verified that the College has no contractual arrangements with non-regionally accredited organizations that affect accreditation requirements.
EVALUATION OF THE COLLEGE USING ACCJC STANDARDS
TEAM RECOMMENDATIONS

MENDOCINO COLLEGE ACCREDITATION SITE VISIT
MARCH 10-13, 2014

INTRODUCTION

Mendocino College is a comprehensive college with its main campus in Ukiah, California, serving portions of Mendocino and Lake Counties. The district serves an area of almost 3,200 square miles in rural Northern California. The College has two permanent educational centers, in Willits and Lakeport. In addition, the College also owns a field station in Point Arena which is used for field research. Approximately 140,000 residents live within the boundaries of the district.

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**COMMENDATIONS**

**Commendation – Collaborative Atmosphere and Positive Spirit**
Based on site tours, campus observations, open forums, and interviews, the team found that the general attitude of College constituents, including governing board members, foundation members, administrative team, faculty members, staff, students, educational partners, and members of the public, is positive, collaborative and demonstrates a “can do” attitude.

**Commendation 2 – Design and Construction of New Facilities**
Based on site tours, campus observations, and interviews with constituents, the College is to be commended on its student-centered approach to the design and construction of its new facilities.

**Commendation 3 – Focus on Traditionally Underserved Populations**
In recognition of the growth of the Latino population and its importance to the economic welfare of the community, Mendocino College’s Trustees and Superintendent/President have identified the need to address this segment of the community. The College’s efforts have resulted in a noticeable increase in the Latino student population and have strengthened their belief that Mendocino College is an option for them and their children. The Team commends Mendocino College for its focus on a traditionally underserved student population.
Evaluation of Institutional Responses to Previous Recommendations

Recommendation 1 (2008)
As noted in recommendations 1, 3, 4 and 7 contained in the 2002 Accreditation Evaluation Report, the team recommends that the College:

- Complete the reorganization of committees and planning structure to improve the planning process;
- Make effective use of program review data and incorporate an assessment of student learning outcomes in all areas; and
- Engage in dialogue for assessing institutional effectiveness and student success.

The College should move immediately to:

- Develop an educational master plan, a strategic plan, facilities plan, and a technology plan;
- Develop and use measurable objectives to benchmark program and College goals; and
- Link planning to the budget allocation process. (Standards I.A.4, I.B.1, I.B.2, I.B.3, I.B.4, I.B.5, I.B.6, I.B.7, II.A.1, II.A.2, II.A.3, II.A.6, II.B.1, II.B.3, II.B.4, II.C.1, II.C 2, III.A.1, III.A.4, III.A.5, III.A.6, III.B.1, III.B.2, III.C.1, III.C.2, III.D.1, III.D.2, III.D.3, IV.A.1, IV.A.5, IV.B.1, IV.B.2, including various subsections)

The College has addressed this recommendation. The team found that the College has reorganized its committee structure with a Planning and Budget Committee at its core, and seven planning committees that feed into this committee. The College has provided evidence of this new Planning and Budget Committee structure and how this reorganization has been made to coordinate with the College’s Annual Program Review Process, which the College connects to the College Mission, the Educational Master plan and the College Strategic Action Plan. The College has implemented a process to enable that its Mission, Vision, Values and Goals drive the Program Review Process, and has a process in place to review each of them annually.

Based on the Self Evaluation Report, Student Learning Outcomes Team minutes, and the 2013-14 Catalog, the team found clear evidence that, with the help of the Student Learning Outcomes Team, the College has mapped course and program outcomes and mapped general education course outcomes to Institutional Student Learning Outcomes. It also systematically assesses its course, program, and institutional student learning outcomes as documented through Student Learning Outcome Progress Reports and department program review documents. Documentation of the 2012 Campus Student Learning Outcomes workshop, the College further provides evidence of dialogue for assessing institutional effectiveness and student success.

The review of evidence submitted demonstrates that the College has created the Planning and Budget Committee as the final destination for integrating planning and budget resource allocation. This committee is responsible for making all budget recommendations to the Superintendent/President and ensuring that College resources are used to support planning goals. Requests for resources, staffing, and equipment are processed through the Program Review Report which identifies in detail the needs and requests by each program. In review of committee minutes, the team found that the Staffing Committee reviews all requests and assists with recommending priority resource allocation to the Planning and Budget Committee.

Based on the current team’s review documentation and on interviews, the team found that the College also responded by utilizing the program review process to drive Facility Committee recommendations.
The College has addressed this recommendation, resolved the deficiencies, and meets the Standards.
documented dialogues between the Student Learning Outcomes Team and the Curriculum Committee.

**Recommendation 4 (2008)**

As was noted in recommendation 6 contained in the 2002 Evaluation Report, the team recommends that the College comply with this standard by completing evaluations for all managers by June 2008, and ensure that the systematic process for monitoring completion of evaluations for all College personnel is adhered to in accordance with College policies and Procedures (Standard III.A.1.b)

The College has addressed this recommendation, resolved the deficiencies, and meets Standards. The team found by reviewing documents that the College evaluates employees systematically and at stated and regular intervals. Written criteria for all employee groups exist. All evaluation procedures include the opportunity to provide evaluative information, commendations and feedback regarding job performance, including the opportunity to address areas where improvement and/or professional development are needed as well as goals for the future. Faculty and staff surveyed in Fall 2012 agreed that job performance evaluations are conducted in a manner which supports continuous improvement.

**Recommendation 5 (2008)**

In order to meet Standard III.A.3.d [III.A.1.d], the team recommends that the College develop and institute a written code of ethics for all personnel. (Standard III.A.3.d) [Standard III.A.1.d]

The College has addressed this recommendation, resolved the deficiencies, and meets the Standards. The team found by reviewing documents that the College has a Code of Ethics which includes acting appropriately and with integrity, civility, responsibility, confidentiality, accountability, knowledge, accuracy, and professionalism. The Code of Ethics is a governing board policy and appears in the College Catalog.

**Recommendation 6 (2008)**

In order to come into compliance with the Accrediting Commissions Substantive Change Policy, the College should immediately work with WASC to obtain substantive change approval for its nursing program and for programs leading to an associate degree that are being offered at the Lake Center. (Standard IVA.4, ER 21)

The College has addressed this recommendation, resolved the deficiencies, and meets the Standards. Documentation provided by the College and the Commission established that, after the 2008 accreditation site visit, the College followed up with the Commission and was relieved of the substantive change proposal required for the nursing program. Since then, the College has sought approval for substantive change proposals for the Lake Center and for Distance Education, both of which were approved by the Commission.

**Recommendation 7 (2008)**

In order to meet Standard IVB.1.h, the team recommends that the College Board of Trustees adopt a clearly defined policy that addresses violation of its code of ethics.

The College addressed this recommendation, resolved the deficiencies, and met the Standards in 2008 by revising Board Policy 208 to include procedures for dealing with violations to its code of ethics. The policy was reviewed again in 2013.
Standard I – Institutional Mission and Effectiveness
Standard IA – Mission

General Observations
The College has developed a Mission Statement that defines its purpose and goals and which is based on California Education Code, Title 5, Accreditation Standards, and the goals and mission of the California Community College System. The College’s educational purpose can be discerned through the Mission Statement which identifies the College’s intended student population, articulates its focus on helping students achieve their educational goals, and demonstrates the College’s commitment to Mission-driven institutional planning. The College includes in the Mission that it embraces its role as an intellectual, economic and cultural anchor for the region, which indicates that the College recognizes the role it plays in the surrounding community. The Mission Statement is reviewed annually by the College and the current version of the Mission Statement was approved by the Board of Trustees on April 10, 2013.

Findings and Evidence
By reviewing the College’s Educational Master Plan, Educational Action Plan Committee notes, program review documents, and interviews with various constituents on campus, the team found that the College has a statement of mission that defines the institution’s broad educational purposes, its intended student population, and its commitment to achieving student learning. The team found the College has developed its Educational Master Plan with a four-year review cycle to demonstrate its commitment to the Mission Statement and its Mission-centric focus on student success. The College uses demographic data for the surrounding region, data from Institutional Research on its student population, and student and faculty survey data to inform its commitment to develop and offer programs, such as Early Alert, California Work Opportunity and Responsibility to Kids (CalWORKs), Extended Opportunity Programs and Services, (EOPS) Cooperative Agencies Resources for Education (CARE), or Math, Engineering and Science Achievement (MESA), which meet varying needs among its student population. Both a review of documents and interviews conducted indicate the College’s commitment to serve a diverse student population. The College focus on creating an inclusive and accessible learning environment is apparent in its various distance education programs, its new email protocols for providing students access to information, and its recent Americans with Disabilities Act analysis to ensure compliance. The College is currently building a distance education classroom at each of its centers so that courses from the main campus can be broadcast there. (IA)

Based on the evidence examined and the interviews conducted, the College clearly aligns its learning programs and services with its purposes, character, and student population. It is clear that the College is being responsive to its student needs and trends, as evidenced by the development of several new certificate and degree programs, such as in Music Technology and Viticulture. Through its program review process and its Program Advisory Team review structure, the College ensures that the mission drives program and course development for maximum responsiveness to community needs. The College relies on an abundance of surveys and institutional reports to review its effectiveness of meeting the College Mission when establishing its educational programs. However, the surveys emphasize input mainly from full-time faculty and staff. The College may want to consider soliciting additional input and dialogue from students and adjunct faculty and consider data collection methods beyond surveys. (IA.1)
Based on evidence of meeting minutes, the most recent revision of the Mission Statement was approved by the governing board on April 10, 2013 and is published as Board Policy 103. This approved Mission Statement is also posted on the College’s website and is published in the College Catalog in both print and online versions, the Student Handbook, and the fall and spring Schedule of Classes. Through interviews, the team found that the Mission Statement is also distributed in materials provided to new part-time and full-time faculty. The team also found that the Mission Statement is included in the major planning documents developed by the College. In addition, the team observed that the Mission Statement was prominently displayed in classrooms and meeting rooms at all three locations, the main campus in Ukiah and the Lake and North County Centers, ensuring public and campus awareness of the College’s broad educational purposes. (IA.2)

Based on evidence examined and interviews conducted, the team found that the College’s Integrated Planning Timeline provides for annual review of its Mission Statement by the Planning and Budget Committee. This timeline provides a clear visual representation for the review of the Mission Statement in conjunction with other planning priorities at the College. The team found that the Planning and Budget Committee is representative of the constituent groups across campus. Through dissemination of its minutes, this group ensures that, when the Mission Statement is discussed, campus constituents are aware of the discussion and provide feedback to the committee. In the Fall 2013 Faculty Survey, 61.8% of respondents reported that they are satisfied with their opportunities to participate in key institutional decisions such as long-term planning, budget and mission. (IA.3)

The team found evidence of the College Mission’s centrality to program review in the Integrated Timeline which ensures that the Mission Statement is reviewed prior to the beginning of the program review process each year. Through examination of meeting minutes and interviews with committee members, the team found that resource allocation requests and program planning agendas are prioritized in accordance with the College’s Mission, Vision, Values, and Goals. After meeting with various committee members of the Educational Action Plan Committee and the Planning and Budget Committee, it became clear that the College views the Mission Statement as central to driving the Educational Master Plan and the work of the Planning and Budget Committee. Additionally, interviews with various constituents across the campus also provided evidence that campus stakeholders who serve on these various planning committees are knowledgeable about the Mission, thereby ensuring that decision-making processes that occur in meetings remain Mission-centered. (IA.4)

**Conclusion**
The College meets the Standard.

The College has a statement of mission that defines the College’s broad educational purposes, its intended student population, and its commitment to achieving student learning. (IA) The College develops programs and services aligned with its Mission, Vision, Values and Goals, and student population, and it demonstrates pride in serving the surrounding community. (IA.1)

The Mission Statement has been reviewed and approved by the governing board and is distributed and displayed in a variety of expected places. (IA.2) The Mission Statement goes through an annual review in accordance with the College’s Integrated Planning Timeline. The College has provided evidence of the reorganized structure of the planning committees and the various constituent groups who have
representation from across the College in these groups and who have the opportunity to participate in providing feedback for the revision of the Mission Statement. (IA.3)

The College has demonstrated through the Integrated Planning Timeline that the planning processes and Mission Statement are aligned; thereby ensuring the College Mission is central to institutional planning and decision-making. (IA.4)

**Recommendations**
None
Standard I – Institutional Mission and Effectiveness

Standard IB – Institutional Effectiveness

General Observations
The College has developed a committee structure and planning processes. The College has also completed a strategic master plan, facilities plan, and technology plan and is currently revising its educational master plan. The College also has collegial dialogue regarding its planning processes and prioritization.

Findings and Evidence
Based on interviews, the College demonstrates collegial dialogue about student learning and institutional processes. This dialogue is facilitated through the overall committee structure of planning. As a good practice, the team suggests that College document improvements of student learning and institutional outcomes. In reviewing the Committee Handbook 2012-13, the team found that committee and planning structures are described. In the handbook, the team suggests that the College create an evaluation component to assess committee goal attainment. Currently, the College does not document ongoing self-reflective dialogue about student learning and institutional process. The team suggests that the College capture the nature of the dialogue to inform future dialogue for further improvements. (IB.1)

Through review of documentation, the team found that on August 12, 2008, the College created Strategic Goals and Objectives with Strategies and Timelines 2009-2015 and an Annual Action Plan 2009-10 with specific activities and assigned responsibilities. The strategic goals have corresponding assessments to be measured within a timeline. This document was revised on September 29, 2009, and on May 20, 2010, the College provided a progress report on these Strategic Goals entitled the Strategic Action Plan Progress Report. The progress report incorporated assessments, evaluative measures, progress on the goals, and changes as a result of the findings. The College measured the objectives using key performance indicators with data from 2002-2008. The team was not able to find any progress reports or updates to the Strategic Plan 2009-2015 since May 2010. After considerable inquiry and discussion with key individuals, the team realized that the College has continued to utilize a series of annual Strategic Action Plans built on the Strategic Plan Goals and with revised and measurable objectives and corresponding metrics each year. Through interviews with members of the Educational Action Planning Committee and members of the Planning and Budget Committee, the team discovered that the College felt that the previous Strategic Plan structure did not reflect its collaborative culture, and as a result, continued to use only the annual Strategic Action Plans, doing so in 2010-11, 2012-13, and 2013-14. To explain the gap in 2011-12, through interviews the team learned that a change in leadership resulted in an Interim Superintendent/President that year, and as a result, the College did not complete a Strategic Action Plan in 2011-12. Through interviews, the team discovered that the annual Strategic Action Plans are discussed and strategic objectives with accompanying metrics are established and updated through a widely attended Planning Retreat. Responsibility for the objectives is assigned to College committees or units. Through this process, the Strategic Action Plan is restructured every year. During the same interview, the committee members conveyed that the President’s Office oversees the annual collection and reporting of the outcomes of the previous year’s Annual Strategic Action Plan metrics which are presented and discussed at the Planning Retreat. Subsequently, the team was shown outcome results of a previous year’s measured objectives and documentation for a presentation of these outcomes at the annual Planning Retreat. The
team noted that, while members of the committees were familiar with this process and collaborated to carry it out, documentation was not systematically recorded nor made widely available, a deficit the team suggests that the College remedy. (IB.2)

As described in the Committee Handbook 2012-13 and the Planning Committee Structure, there are seven committees that complete the primary work for planning: the Educational Action Plan Committee, Technology Committee, Facilities Committee, Staffing Committee, Outreach and Marketing Committee, Professional Development Committee, and Student Learning Outcomes Team. The work of these seven committees feed into the Planning and Budget Committee, which serves as the central planning committee. For program reviews, the work flow is as follows: program reviews are collected, multiple lists are compiled from the program reviews, staffing and faculty lists go to the Staffing Committee for prioritization, technology requests go the Technology Committee for prioritization, requests for modifications to current facilities and new facilities go to the Facilities Committee, professional development requests go to the Professional Development Committee, student learning outcomes information go to the Student Learning Outcomes Team, and outreach and recruitment requests go to the Outreach and Marketing Committee. After the work in these committees is completed, the requests go to the Planning and Budget Committee. Based on review of minutes of the Planning and Budget Committee, Education Action Plan Committee, and the Staffing Committee; interviews with members of those respective committees; and open forum testimony, the team found that decisions were made to fund facilities, fund staffing requests, and create curriculum outside of the annual cycle of planning and budgeting. The team found that these funding decisions were made without systematic evaluation reflective of the College’s strategic objectives. In the first example, the Foundation Director approached a governing board member directly for funding for the nursing licensure exam which was not in the program review resource requests from that department. As a second example, an English as a Second Language instructor and an Automotive instructor collaborated to create a vocational English course which was not part of the program review in either department. In a third example, two instructors discussed the need for a chemistry lab at the Lake Center and obtained funding from the Foundation for this project, which had been given a low priority through the planning and budgeting process and thus not funded. The team also reviewed the Budget Augmentation Request Form and found that this process can commit funding outside of the committee structure and the current resource allocation process with the signatures of the Vice President of Administrative Services and the Superintendent/President. Through interviews, the team found that the form is not readily available to the College campus, and there is not a written process for when the form should be used or what invokes a response to college needs outside of the annual budgeting process. In an interview with the Vice President of Administrative Services, the team found that there was a recent decision to hire adjunct mental health services counselors. When asked if this request went through the existing program review, prioritization and planning process, the response was no. The College did not think it needed to do so because information had been received that students need mental health services from another database and from the librarian. Based on committee minutes and interviews, the staffing requests funded outside the annual budget process have little documented evidence of integrating student achievement data and student learning outcome data to inform the planning, prioritization, and resource allocation. The College has recently reviewed partial information on student achievement data at Student Achievement Session on January 17, 2014. (IB.3)
of the respective committee members, the College demonstrates a collegial dialogue about student learning and institutional processes which lead to allocation of necessary resources and improvement of institutional effectiveness. This dialogue is facilitated through the overall committee structure of planning. (IB.4)

As evident through data in CurricUNET analyzed by the team along with student learning outcomes assessment, program outcomes assessment and program review documents, the team concluded that the College has documented assessment results and communicated the results through their committee structure and through regular reports by the Superintendent/President to the governing board. (IB.5)

Through discussion with members of the Planning and Budget Committee, the team determined that the College modifies its Strategic Action Plan each year; however, the team did not find any evidence of systematic review and modification of the College’s planning and budget process. In interviews, key personnel acknowledged that they were not aware of a systematic review of the planning and budget process. (IB.6)

In review of evidence through CurricUNET, student learning outcomes assessment, program outcomes assessment, and program review documents, the team found that the College has documented the results and communicated the results through their committee structure. The team was unable to find evidence of the regular assessment of existing evaluation mechanisms for planning, resource allocation, and strategic planning. (IB.7)

**Conclusion**
The College does not fully meet the Standard, in particular, Standards IB.6, and IB.7.

The College maintains ongoing and collegial dialogue about student learning and institutional processes. (IB.1) The College has set appropriate goals to improve its effectiveness. The College articulates its goals and annually creates or updates objectives aligned with them in measurable terms and measures the degree to which they are achieved. The College annually reports on these achievements, and the results are widely discussed at the annual Planning Retreat and in related committees. The College members involved in these processes understand these goals and objectives and work collaboratively toward their achievement each year. While the College collects student achievement data, it has not yet established institutionally derived standards for its own performance. (IB.2)

The College has implemented a broad-based planning process through which necessary resources are allocated. (IB.4) The College has documented evidence of outcomes assessment results and has communicated these matters through their existing committee structure and Superintendent/President reports. (IB.5)

The College does not meet Standards IB.6 and IB.7. The College does not systematically review and modify all parts of the planning and resource allocation cycle. (IB.6) The College does not assess its evaluation mechanisms through a systematic review of their effectiveness in improving instructional programs, student support services, and library and other learning support services. (IB.7)
Recommendations

Recommendation 1. Review and Evaluation Mechanisms
In order to meet the Standards, the team recommends that the College systematically review and modify as necessary all parts of the planning and resource allocation cycle, including institutional and other research efforts. The team further recommends that the College create evaluation mechanisms for all parts of the cycle of integrated planning and resource allocation, assess these evaluation mechanisms, and through systematic review of their effectiveness, improve instructional programs, student support services, library, and other support services (IB.6, IB.7, IIIC.2, IIID.3.h)
Standard II – Student Learning Programs and Services
Standard IIA – Instructional Programs

General Observations
The Educational Master Plan 2010-18 is the foundation for academic, facilities, and technology planning and reflects the College’s understanding of its responsibility as the only local institution of higher education to respond to community demands for job training and to create a university pipeline for student transfer. It also describes the College’s delivery systems and modes of instruction to reach students in the 3,200 square mile District consisting of urban, rural, and remote areas. The College offers thirteen Associate Degrees for Transfer, thirty-four Associate of Arts and Science Degrees and twenty-seven Certificates in twelve vocational areas on its main campus and two centers.

The 2009-15 Strategic Plan list goals to “Ensure student success within a learner centered environment” and “Improve student access to college programs and services.” The 2014 Self-Study contains graphs and charts depicting demographic data, enrollment trends, employment rates, and a host of other information. The College has developed Institutional Student Learning Outcomes, Program Student Learning Outcomes, and Course Student Learning Outcomes serving as the framework for its review processes. The Educational Action Plan Committee and the Planning and Budget Committee, both of which are composed primarily of faculty, have responsibility for programmatic quality through curriculum review and program review processes. The College’s academic requirements, board policies, and administrative procedures are posted and accessible online.

Findings and Evidence
The College has established two centers in Willits and Lakeport and leases space in several areas in the District to extend its reach into the community. An examination of class schedules for 2012 to 2014 confirmed that the curriculum offered face-to-face at the centers and leased spaces consists primarily of English as a Second Language, Basic Skills, or general education courses. The College also utilizes online course delivery to further penetrate its service area. Based on interviews with the Vice President of Education and Student Services, Distance Education Coordinator, Lake and North County Center Supervisors, and main campus and center site visits, the team verified that course offerings are tailored to student need at each of the College locations. This was in evidence recently when external data revealed a rapidly growing Latino population in the District. The College responded by increasing its offerings of English as a Second Language courses paired with Career Technical Education courses such as Automotive Technology for Spring 2014. Additionally, in light of an increase in distance education enrollment of almost sixteen percent between Fall 2009 and Fall 2013, the College has worked to meet its Strategic Action Plan objective to increase enrollments in online classes by twenty percent. The expansion of online delivery has meant a corresponding expansion of technical support. The 2012 Graduate Survey results indicate ninety-one percent of respondents agree that computer resources on campus are adequate. The Technology Action Plan 2010-2015 (2012 update), in addition to site visits and interviews with the Director of Information Technology, confirm that the College has invested in hardware and software to enhance its operation and effectiveness. High speed Internet access and Wi-Fi allow for connectivity and access in computer labs, study areas, and computer workstations in classrooms. All classrooms at all locations are smart classrooms with high speed wireless connectivity available as well. Students at all locations have access to quality academic online resources including online databases, e-books, and streaming videos. A distance education classroom,
currently under construction, will allow students who live in remote locations without access to computers to go to Lake and North County sites to participate in distance education offerings. In addition, professional development is provided to assist faculty members as they adapt to changing delivery methods. The Distance Education Committee minutes 2011-13, Flex and In-service Technology Training Schedules, 2014 Faculty In-Service Survey results, and interviews with the Distance Education Coordinator indicate that the College provides appropriate and effective training to faculty. (IIA.1)

Through a review of the Educational Master Plan 2010-18 the team found that the College understands the need of its students for job training and university transfer. The team found evidence that the College identifies and meets the varied educational needs of its students as indicated both in the 2011 Student Survey, in which over eighty percent of respondents responded that the College provided them with the courses they needed at the times they needed them, and in the 2011 Graduate Survey, in which eighty percent of respondents were very satisfied with their experience as a student at the College. Based on interviews with the Vice President of Education and Student Services and Dean of Instruction, the Director of Institutional Research has traditionally provided reports to the College on the external community and characteristics of incoming students to assist in identification of educational needs. The team noted that the type of demographic, enrollment, and employment data presented in the 2014 Self-Study is not currently available on the Institutional Research page or elsewhere on the College website. The team found that the current data on basic skills student needs is being regularly generated through assessment tests and information extracted from admissions forms. The 2014 Spring Self-Study update mentions a Foundational Skills Committee with the charge to review achievement data for students in Basic Skills courses. This committee is listed on the College website, but the team did not review committee minutes. The team reviewed data in the 2013 Basic Skills Report which particularly identified needs of the English as a Second Language program. More basic skills course specific data is available in the College’s portal. The Student Learning Outcomes Team Coordinator uses a database to track basic skills course Student Learning Outcomes to include cycle, assessment, and results. The team found that this information is easily accessible to staff and faculty on the College’s web portal. Through review of program reviews for Career Technical Education programs, the team found that the College identifies student learning needs and makes modifications in these programs through the assessment of course and program outcomes and through student data provided by the Office of Institutional Research. The team noted that, as external data revealed a growing Latino population in the District, the College increased its offerings of English as a Second Language courses paired with Career Technical Education courses such as Automotive Technology, observations evident in the Spring 2014 Schedule of Classes. (IIA.1.a, IIA.1.b)

Based on visits to the Student Learning Outcomes Team faculty portal, review of the Student Learning Outcomes Team Report to the Planning and Budget Committee dated November 11, 2013, Planning and Budget Committee minutes from 2010 to 2014, Student Learning Outcomes Team minutes from 2010 to 2014, Curriculum Committee minutes from 2010 to 2014, and interviews with the Student Learning Outcomes Team Coordinator, the team found that the College is engaging in ongoing, systematic outcomes assessment, evaluation, and integrated planning. The College has a long history of active dialogue on Student Learning Outcomes. This is evidenced in Student Learning Outcomes Team minutes spanning 2005 to 2014. The team verified that faculty have identified Student Learning Outcomes for all of courses and the Student Learning Outcomes are included in the course outlines of record housed in CurricUNET. Faculty members develop course Student Learning Outcomes and
assessment measures based on their understanding of the course objectives. These are reviewed by the Student Learning Outcomes Team Coordinator and may be subject to further review by the Curriculum Committee. The discipline faculty evaluate assessment methods and tools for effectiveness. A representative sampling of course Student Learning Outcome assessments is also evaluated by a subcommittee of the Student Learning Outcomes Team on a regular cycle, using an assessment evaluation tool. To date, the College has evaluated close to eighty percent of its courses. The team also found that the College has developed outcomes for all certificate and degree programs, Program Student Learning Outcomes. These are listed in the 2013-14 Catalog. Program Student Learning Outcomes are assessed using a mapping system. The relevant Student Learning Outcomes for each course associated with a program are mapped to the related Program Student Learning Outcome. The assessment results for each of the course Student Learning Outcomes are then reviewed for each Program Student Learning Outcome to determine the degree to which each outcome has been met. The summary statements for each of the individual Program Student Learning Outcomes are then considered collectively to develop a summary statement for the program which is then included in department program review. These Program Student Learning Outcome summary statements from all departments are reviewed by the Student Learning Outcomes Team to identify themes which are later presented to the Planning and Budget Committee. This is in evidence in Planning and Budget Committee minutes from 2011 to 2013. Through review of minutes and interviews with key individuals, the team verified that outcomes for general education patterns are assessed through Institutional Student Learning Outcomes. There is ongoing and robust dialogue regarding Institutional Student Learning Outcomes. On August 29, 2013 a document aligning California State University General Education Breadth Areas with Institutional Student Learning Outcomes was discussed in the Student Learning Outcomes Team which eventually led to the adoption of new Institutional Student Learning Outcomes. The team verified that broad discussion of Institutional Student Learning Outcomes among faculty have taken place by reviewing a presentation to faculty on the subject and a faculty training outline entitled Using Student Learning Outcome Assessment Results to Justify Resource Requests. The College’s portal houses the database used to track course and program Student Learning Outcomes to include cycle, assessment, and results. The team found that this information is easily accessible to staff and faculty. Based on an examination of documents provided and an extensive interview with the Student Learning Outcome Coordinator, the team found evidence that demonstrated the Student Learning Outcomes Team helps faculty to systematically assess courses and programs, interpret the results of those assessments, and document them in annual online program review. Interviews with persons cited above indicate all programs have completed a program review process every year. (IIA.1.c)

Based on the Educational Master Plan 2010-18 and Strategic Plan 2009-15, interviews with the Vice President of Education and Student Services, Educational Action Plan Committee minutes from 2010 to 2012, Curriculum Committee minutes from 2011 to 2014, review of CurricUNET data, and the 2012-13 Handbook for Committees, the College consistently uses integrated, transparent, and inclusive review processes in order to determine currency and plan for the future of its collegiate, developmental, pre-collegiate, continuing and community education, distance education, and traditional courses and programs. This occurs through the Curriculum Committee’s five-year review cycle for academic courses and two-year cycle for Career Technical Education courses, and through annual Career Technical Education Program Advisory Committee review. The College has multiple processes in place for review of its courses and programs including Curriculum, Program Review, Guidelines for Program Management, and the Student Learning Outcomes Team. One is shepherded
by the Educational Action Plan Committee. New courses are brought forward through the New Concept Form. It should be noted that the most recent minutes provided for the Educational Action Plan Committee are October of 2012. The committee reviews the concept and assigns a Program Advisory Team whose members include representatives from institutional research, faculty, and community members. It should be noted that Program Advisory Teams do not publish minutes of their meetings but rather publish finding reports that are presented publicly. The approved New Concept Form is reviewed by the Educational Action Plan Committee and presented to the Planning and Budgeting Committee for review and approval. Course Student Learning Outcomes are included in outlines of record housed in CurricUNET. These are reviewed by the Student Learning Outcomes Team Coordinator and may be subject to further review by the Curriculum Committee. Evidence of the process is in the Curriculum Guideline Handbook 2012-13 which outlines the review steps established to ensure courses and programs meet the College mission and ensure Title 5 compliance. The other process is shepherded by the Planning and Budget Committee. The committee requires an annual online Program Review Process which encourages departments to consider their strengths and weaknesses through a review of course and program outcome data. The summary statements for each of the individual Program Student Learning Outcomes are then considered collectively to develop a summary statement for the program as a whole and are then included in department program review. The Student Learning Outcomes Team reviews Program Student Learning Outcome summary statements from all departments to identify themes which are then presented to the Planning and Budget Committee. This is documented in Planning and Budget Committee minutes from 2012 to 2013. Based on an examination of documents provided and an extensive interview with the Student Learning Outcome Coordinator, the team found evidence that demonstrated the Student Learning Outcomes Team helps faculty to systematically assess course outcomes and connect them to program level outcomes as part of the program review process. Faculty members are asked to consider input received through advisory committees, surveys, and reports from Institutional Research. This process prompts modifications to curriculum as needed. It also drives planning for future changes and resource requests. The central role faculty members play in this process is documented in the 2012-13 Curriculum Committee Handbook. The Curriculum Committee membership consists of nine voting members of which seven are faculty. In addition, the 2014-16 Faculty Contract, Section 7.10.7, requires that faculty participate in curriculum development, review, modification and deletion according to the guidelines and schedule for approval of the Curriculum Committee. (IIA.2, IIA.2.a)

Based on the 2012-13 Handbook for Committees, Curriculum Committee minutes for 2012 to 2014, Student Learning Outcomes Team minutes spanning 2009 to 2013, interviews with the Curriculum Committee Chair and Dean of Instruction, faculty take the lead role in identifying competency levels and measurable Student Learning Outcomes for courses, programs, and degrees. This is further evidenced by the 2012-13 Committee Handbook which lists seven of the nine voting members on the Curriculum Committee as faculty. In addition, the 2014-16 Faculty Contract, Section 7.9.10, stipulates faculty members are required to develop and assess student learning outcomes in the discipline or unit, at both course and program level as applicable. Based on the College’s Career Technical Advisory Committee minutes for 2010, program review documents for 2011, Curriculum Committee minutes for 2010 to 2014, and interviews with the Dean of Career and Technical Education, such programs rely on market research and analysis, regional consortia input, and program advisory committee input regarding industry standards in order to establish technical and professional competencies. The team noted that no documentation was provided for annual program advisory committee meeting discussions. According to the Dean of Career and Technical Education, the College is working to
develop an employer survey to assess the preparation level of graduates and generate another data point for the assessment of program competencies. (IIA.2.b)

In reviewing the 2011 Student Survey, the team found that ninety-one percent of respondents indicated that they were satisfied with the quality of instruction at the College. In reviewing the 2011 Graduate survey, the team found that all respondents agreed with the statement that the College was academically demanding. In reviewing selected faculty evaluations, the team found that faculty members are rigorously held to the performance standard specified in the 2014-16 Faculty Contract, Section 7.10.8, which states that “faculty must maintain currency in the classroom as necessary by analyzing, coordinating, and developing instructional materials; reviewing current literature and texts in the discipline; making recommendations for the College library collection; conferring with other faculty and the responsible Dean on curricular matters; and attending inter- and intra-college conferences and meetings of advisory committees. Faculty self-evaluations and evaluations by students, peers, and administrators establish that high quality instruction is maintained at the College.

Based on review of the Class Schedules for 2012 to 2014, course syllabi from traditional and distance education courses, discussion with faculty members, and review of program descriptions, the team found that instruction is sequenced to support reasonable time to program completion. The team also found that the College has developed Program Student Learning Outcomes for all certificate and degree programs which are assessed and then reviewed together to determine the degree to which each outcome has been met. In analyzing a representative sample of the outcomes of this process, the team found that these efforts ensure synthesis of student learning from entrance to completion. (IIA.2.c)

The team reviewed both classroom-based and online course delivery and teaching methods used by the College to meet the learning needs of its students. Based on interviews with the Vice President of Education and Student Services and the Distance Education Coordinator as well as classroom visits on the main campus and at the centers, the team found that course delivery and teaching are tailored to student need regardless of delivery mode or location. In addition, the team found that appropriate professional development is provided to assist faculty members as they adapt to changing delivery methods to assure student learning needs are met. Team review of Distance Education Committee minutes for 2011 to 2013, Flex and In-Service Technology Training Schedules, 2014 Faculty In-Service Survey results, and interviews with the Distance Education Coordinator indicate that the College provides appropriate training to faculty in order to maintain effective teaching methods to meet diverse student learning needs. (IIA.2.d)

Based on review of the Educational Master Plan 2010-18 and Strategic Plan 2009-15, interviews with the Vice President of Education and Student Services, Education Action Plan Committee Minutes for 2010 to 2012, Curriculum Committee minutes for 2011 to 2014, review of CurricUNET data, and the 2012-13 Handbook for Committees, the team found that the College consistently uses integrated, transparent, and inclusive review processes in order to determine currency and plan for the future of its collegiate, developmental, pre-collegiate, continuing and community education, distance education, and traditional courses and programs. The team examined results of the Curriculum Committee’s review cycle for academic and vocational courses. It also examined the annual online program review process. The team found that the process generates summary statements for each department’s Program Student Learning Outcomes, and these summary statements are reviewed by the Student Learning Outcomes Team to identify themes which are then presented to the Planning and Budget Committee. Based on an examination of documents provided and an extensive
interview with the Student Learning Outcome Coordinator, the team found evidence that faculty systematically assess course outcomes and connect them to program level outcomes as part of the program review process. Further analysis of the results of program reviews by the team showed that faculty members also consider input received through advisory committees, surveys, reports from Institutional Research, and other relevant input to make modifications to curriculum as needed and plan future changes and resource requests. Based on review of documents and interviews with persons cited above, this process has been carried out every year with the exception of 2012. (IIA.2.e)

To determine the extent to which systematic evaluation and integrated planning assure that decisions are made by the College to improve learning outcomes, the team analyzed the program review process, which is the driver for integrated planning at the College. The team found that the program review process generates summary statements for each department’s Program Student Learning Outcomes, and these summary statements are reviewed by the Student Learning Outcomes Team to identify themes which are then presented to the Planning and Budget Committee. This process is documented in Planning and Budget Committee minutes from 2011 to 2013. The team found that a similar process is used for Institutional Student Learning Outcomes. The team reviewed the themes and the requests for resources relevant to improving learning outcomes and found that the Planning and Budget Committee, through its integrated planning dialog, took actions in two ways. First, request for resources included criteria related to improving Student Learning Outcomes. Second, the development of the annual Strategic Action Plan was informed by the learning outcome themes originating in department program reviews and generated by the Student Learning Outcomes Team. (IIA.2.f)

The team found that the only departmental exam was the Nursing program’s use of results from ATI Nursing Education’s NCLEX Prep Exam as an assessment of student preparation for the National Council Licensure Examination, NCLEX. The team did not find evidence that the Nursing department uses the results of the ATI NCLEX Prep Exam to measure its stated Student Learning Outcomes. The team suggests that, if such results were to be used for assessment of Student Learning Outcomes, that the department validates the ATI NCLEX Prep Exam as an effective tool for measuring student learning. (IIA.2.g)

Based on review of the Curriculum Committee Handbook, a sampling of official course outlines housed in CurricUNET, and interviews with the Vice President of Education and Student Services, Curriculum Committee Chair, Admissions and Records Director, and Student Learning Outcomes Team Coordinator, the team found that units of credit are reviewed during the curriculum approval process and published in the College Catalog. This was also verified through review of the College’s articulation agreements and discussion with the College’s Articulation Officer. The team found that credits awarded are in alignment with Title 5, California Code of Regulations, Section 55002. A portion of the curriculum approval process also focuses on the review of the learning outcomes for the course. Credit awarded is based on student achievement of the course’s stated learning outcomes. (IIA.2.h)

Based on review of the College’s course-to-program Student Learning Outcome mapping, 2013 Program Level Student Learning Outcome Summaries, and discussion with the Student Learning Outcome Coordinator, it is clear the College awards degrees and certificates based on achievement of outcomes. Each certificate program and associate degree in the 2013-14 Catalog includes a list of program level outcomes. (IIA.2.i)
Based on a review of documents, including the Curriculum Handbook, and an interview with the Curriculum Chair, the team verified that general education courses are approved by the Curriculum Committee which consists of faculty and administrator representation from across the campus. The team found that the Curriculum Committee reviews course outlines of record in light of stated general education criteria and ensures that courses which are approved for inclusion in each of the general education areas meet the appropriate criteria based on outcomes, measurable objectives, topics, and methods of instruction and evaluation. The Institutional Student Learning Outcomes are mapped to general education course outcomes. Based on a review of selected transcripts, the team verified that, as stated in the 2013-14 College Catalog, all students who earn an associate degree are required to successfully complete a general education course pattern of at least eighteen units. The College states its general education philosophy in the 2013-14 Catalog. (IIA.3)

Team review of the 2013-14 Catalog, interviews with the Vice President of Education and Student Services, Student Learning Outcomes Team Coordinator, and the Curriculum Committee Chair verified that the College has general education areas that include humanities and fine arts, natural sciences, and social sciences. (IIA.3.a) Team analysis of the 2013-14 catalog and interviews Vice President of Education and Student Services, Student Learning Outcomes Team Coordinator, and the Curriculum Committee Chair, verify that the College’s general education requirements include areas related to lifelong learning, oral and written communication, information literacy, and reasoning and critical thinking. (IIA.3.b)

Through team review of the 2013-14 Catalog and interviews with the Vice President of Education and Student Services, Student Learning Outcomes Team Coordinator, and Curriculum Committee Chair substantiate that, beyond general education course requirements, the College has two additional institutional requirements designed to shape all students pursuing an associate degree and expand the scope of traditional general education categories. The first course is chosen from a group of courses in Studies in Culture designed to foster appreciation of cultural diversity as well as to provide students with historical and contemporary information to help them be informed citizens prepared to act ethically, thus reinforcing the College’s emphasis on good citizenship. The second course is chosen from a group of courses in Wellness designed to foster a lifelong pattern of active, healthy living. These two institutional requirements are mapped both to Program Student Learning Outcomes and to Institutional Student Learning Outcomes. (IIA.3.c)

The team verified that the Curriculum Committee ensures each program offered at the College includes focused study in at least one area of inquiry with the required minimum of eighteen units. Students must follow the requirements of this area as outlined in the 2013-14 Catalog. (IIA.4)

Based on Career Technical Education Advisory Committee minutes, Curriculum Committee minutes from 2010 to 2014, and review of the 2013-14 Catalog, program review reports, and Student Learning Outcome assessment documents, interviews with the Program Advisory Team, Dean of Career and Technical Education, and Student Learning Outcomes Team Coordinator, the team found that Career Technical Education programs rely on advisory committee input in order to establish program competencies that meet industry standards. These program competencies are captured in Program Student Learning Outcomes as well. The team suggests that regular, complete documentation of annual program advisory committee meeting minutes be kept and posted on the College’s web site. The
College has two programs which prepare students for external licensure examinations for certification: Nursing, whose program prepares students to pass the National Council Licensure Examination, NCLEX, and Automotive Technology, whose program prepares students to pass the Automotive Service Excellence, ASE, certification tests. Nursing graduates have an NCLEX pass rate of ninety-six percent which is above state mean. The team was not provided with statistics on the ASE exam pass rates other than an assertion in the 2014 Self-Study that refers to ASE pass rates as high. According to the Dean of Career Technical Education, the College is working to develop a survey of its Career Technical Education program graduate employers to assess preparation level of graduates and generate another data point for the assessment of program competencies and program outcomes. (IIA.5)

The team verified that the College Catalog, provided in print and online, contains detailed information on educational programs, courses, and transfer credit policies. The 2013-14 Catalog also includes a description of its degrees and certificates in terms of purpose, content, course requirements, and program level student learning outcomes. Based on the Spring 2014 update to the Self-Study, interviews with the Vice President and Dean of Instruction, and review of the 2014-16 Faculty Contract, Section 7.10.4, the team found that faculty are expected to prepare a syllabus for each course and distribute it to students at the first class meeting of the semester and/or electronically. Through conversations with students and sampling of course syllabi, the team verified that students are receiving a course syllabus in each class and that learning outcomes are evident and consistent with those found on the approved Course Outline of Record in CurricUNET. (IIA.6)

Based on interviews of the College’s Articulation Officer, Director of Admissions and Records, and the 2013-14 Catalog, the College utilizes multiple methods in making transfer of credit available to students. In the case of articulated courses, the College has a number of articulation agreements documented in the ASSIST system, and this transfer of credit is relatively straightforward. In the case of non-articulated courses, the Director of Admissions and Articulation Office meet with the discipline faculty member to review course descriptions, objectives and Student Learning Outcomes in light of the College’s requirements. In the case of advanced placement tests, non-traditional learning, military service, and foreign course work, the College also collaborates with its faculty to evaluate incoming transfer credit. (IIA.6.a)

Based on discussion with the Vice President of Education and Student Services, Curriculum Committee Chair, Dean of Career and Technical Education, and review of the 2012-13 Committee Handbook, the team verified that changes in programs require Curriculum Committee approval. In review of the College Catalog, the team found that the College allows students to retain catalog rights that were in effect at time of original enrollment. Based on interviews with the Curriculum Committee Chair, Dean of Career and Technical Education, and the Lake Center Director, as well as the College’s Educational Action Plan Committee’s Guidelines for Program Management, the team found that the College has an adequate program discontinuance process in place to address program elimination. However, there is evidence that the discontinuance processes are not consistently followed. According to the Dean of Career Technical Education, after the Paramedic program suffered a significant and protracted decrease in enrollment, the program was put under review. The Dean further explained that while the program is not officially discontinued, the College did not allow new student cohorts to begin during this review, but it did ensure that the last cohort was able to finish required classes. The program has been suspended since 2009-10 and was removed from the College Catalog beginning in the 2011-12 year, even though the College has not taken official action to discontinue the program.
The College produces a catalog every year and produces a schedule of classes two times per year. The team found that these publications are designed to provide students with easily accessible information on the College’s programs and courses. Previous years’ catalogs are available on the College’s website. Through interviews with the Vice President of Education and Student Services and Dean of Instruction, the online class schedule is not only accessible but also updated consistently as changes occur. The College posts current student achievement data in a publication entitled General Information/Fast Facts/Fall 2014. The team noted that the College has not yet set institutionally derived goals for improved levels of these achievement outcomes. Student Success Scorecard information is available to the public via a link on the website under General Info/Consumer Information. The United State Department of Education requires community colleges to disclose information regarding Gainful Employment for certificate programs. This information is disclosed on the same page with the program curriculum. In reviewing the 2013-14 Catalog, the team found evidence that this publication is regularly updated as reflected in its accurate depiction of policy changes on course repeatability. Board Policies and Administrative Procedures are available to the public on the College’s website. The posting clearly indicates the revision dates for each. However, the team noted that nineteen policies and procedures have not been reviewed in the last twenty years. The most notable is Board Policy 7711, Classified Personnel, which has the date of its last review as 1978.

The team reviewed Board Policy 411, Academic Freedom, which is located on the College’s website. The team noted that it was last reviewed in 1984. The team also reviewed Administrative Procedure 533.2, Academic Honesty Guidelines, also on the website, which addresses issues including plagiarism and cheating as well as consequences of academic dishonesty. The team noted that it was last reviewed in 2011. This policy is also referenced in the 2013-14 Catalog. Interviews with key faculty, staff, administrators, and governing board members found reasonable awareness of the policy and procedure on academic freedom and uncovered no implementation issues.

The team found that the College has an established and published policy concerning student academic honesty that includes consequences for dishonesty in the form of Administrative Procedure 533.2, Academic Honesty Guidelines. Although the Dean of Instruction and Dean of Continuing and Technical Education highly recommend that faculty include specific statements regarding penalties for instances of academic dishonesty in their syllabi, not all syllabi reviewed by the team contained these statements.

The team found that the College’s code of conduct for staff, faculty, and administrators is delineated in Board Policy 302, District Code of Ethics, and the related Administrative Procedure 302.1. These were last reviewed and approved in June and May 2013, respectively. The team also verified that the there is
a code of conduct for students. For Board members, it is depicted in Board Policy 208, Board of Trustees Code of Ethics, last reviewed in May 2008. For students, it is specified in Board Policy 533, Code of Student Conduct, and Administrative Procedure 533.1, Student Conduct Guidelines, which were last revised in September 2011 and April 2013, respectively. These policies and procedures are found on the College’s website and are also referenced in the 2013-14 Catalog. (IIA.7.c)

**Conclusion**

The College does not fully meet the Standard, in particular Standard IIA.6.c.

All instructional programs, regardless of location or means of delivery, address and meet the mission of the College and uphold its integrity. The College relies upon research and analysis to identify student learning needs. The College gathers and analyzes data on student outcomes achievement and is actively using it to improve its programs. The team suggests that the College keep current its program review reports on its website. (IIA.1.a, IIA.1.b)

The College has identified Student Learning Outcomes for its courses and programs, and assessment is occurring systematically. The suggested improvements based on these results are documented within department program reviews. The College is encouraged to make available to all constituents a summative list of recent improvements based on outcomes assessments in order to enumerate the successes and strengthen campus wide buy in. It is also encouraged to make a consistent effort to post current program review documents on the College website. (IIA.1.c)

The College assures the quality and improvement of all instructional courses and programs offered in the name of the College, both new and ongoing, through two systematic, integrated, and transparent processes. Faculty play a central role in these processes, particularly in the area of curriculum. (IIA.2, IIA.2.a)

The College relies on individual faculty members as well as industry representatives on advisory committees and regional consortia input to identify competency levels and measurable student learning outcomes for courses, certificates, and programs including general and vocational education and degrees. The team suggests that records be kept of program advisory committee input. Student progress toward achieving course and program outcomes is regularly assessed and consistently documented. (IIA.2.b) The College offers high quality instruction and appropriate breadth, depth, rigor, sequencing, time to completion and synthesis of learning. (IIA.2.c) The College uses delivery modes and teaching methodologies that reflect the diverse needs and learning styles of its students. (IIA.2.d)

Assessment of learning outcomes along with course relevance is occurring systematically and suggested improvements based on these results are documented within program review documents. (IIA.2.e) The College has identified Student Learning Outcomes for its academic courses and programs, and assessment is occurring systematically. The suggested improvements based on these results are documented within department program reviews. The College acts to improve student learning by basing resource allocation and strategic planning on results of assessing student learning outcomes. (IIA.2.f) The College does not use departmental exams to measure Student Learning Outcomes. (IIA.2.g)
The College is awarding credit based on student achievement of the course’s stated learning outcomes. Units of credit awarded are consistent with institutional policies. (IIA.2.h) The College awards degrees and certificates based on student achievement of both a program’s stated Program Student Learning Outcomes and of Institutional Student Learning Outcomes. (IIA.2.i)

The College’s support of its general education philosophy as stated in the College Catalog is found in its general education requirements for associate degrees. The Institutional Student Learning Outcomes are mapped to general education course outcomes, reinforcing the College’s commitment to its philosophy of general education. (IIA.3) The College requires all students seeking an associate degree to complete general education courses in humanities, fine arts, natural sciences and social sciences. (IIA.3.a) The College requires all students seeking an associate degree to complete general education courses in areas related to lifelong learning, oral and written communication, information literacy, and reasoning and critical thinking. (IIA.3.b) The College has an associate degree requirement which focuses on preparing students to function as ethical human beings and effective citizens. (IIA.3.c)

The Curriculum Committee ensures that programs include focused study in at least one area of inquiry with the required minimum of eighteen units. (IIA.4) The College assures that students completing vocational and occupational certificates and degrees demonstrate technical and professional competencies that meet employment and other applicable standards as determined by industry advisory input. Student pass rates for external licensure and certification in Nursing are excellent; however, pass rate data for students taking the Automotive Service Excellence exams are not available. (IIA.5)

The College assures that students and prospective students receive clear and accurate information about educational courses and programs and transfer policies. Degree and certificate requirements and learning outcomes are clearly described on the website and in the print catalog and are required on course syllabi which are provided to all students in each class. (IIA.6) The College publishes its transfer credit policies and promotes a collaborative approach to ensure fair and objective assessment of student course work and non-traditional learning experiences. (IIA.6.a) The College makes arrangements for students in discontinued programs to complete their course work. Changes in program requirements are vetted through established committees, and processes exist to minimize student disruption. Guidelines for program discontinuance exist; however, it cannot be determined that the College consistently utilizes these processes. (IIA.6.b)

The College does not meet the Standard IIA.6.c. Although the College represents itself clearly, accurately, and consistently to prospective and current students, the public, and its personnel through its catalogs, statements, and publications, including those presented in electronic formats, it does not regularly review policies and procedures. (IIA.6.c)

The College is guided by its governing board policies that establish administrative procedures addressing academic freedom and student dishonesty. Board policies and administrative procedures are publicly available. (IIA.7) The College has a clear and accessible policy regarding the distinction between personal conviction and professionally accepted views in a discipline, and this policy is well understood and followed. (IIA.7.a) Policies are established and published pertaining to student academic honesty and consequences for dishonesty are established and published. (IIA.7.b) Students, staff, faculty, administrators, and governing board members are given clear notice of applicable codes of conduct in board policy, administrative procedures, and, in the case of students, the College Catalog.
(IIA.7.c) The College does not offer curricula in foreign locations to students other than U.S. nationals. (IIA.8)

Recommendations

Recommendation 2. Review of Board Policies and Administrative Procedures
In order to meet the Standards, the team recommends that the College establish a cycle to systematically review and update board policies and administrative procedures. (IIA.6.c, IVB.1.e)
General Observations
The College provides an array of support services including Admissions and Records, CalWORKs, College Assistance Migrant Program, Career and Transfer Center, Counseling, the Disability Resource Center, Extended Opportunity Programs and Services, Financial Aid, the Learning Center, the Math, Engineering and Science Achievement Program, and Veteran Services.

Primary student support services are arranged in a one-stop-shop concept in the Macmillan Building. Students can go to one location for services related to Admissions & Records, Counseling, and Financial Aid. The two Centers similarly provide comprehensive support services. Student support services units engage in the planning and program review process. The Student Services Council serves as the vehicle for disseminating and sharing among the Council members. The College recently lost their dean of students, who had been hired less than a year ago. Online support services are provided. The recent online tutoring service is housed in Learning Resource Services. Compliance requirements in policy and otherwise are in print and on respective websites of the corresponding and responsible office/department.

Communications regarding campus activities and opportunities for students are prominently posted and highly visible throughout the three College locations. In addition, monitors installed throughout the three primary College locations provide valuable information for students, staff and the community.

Findings and Evidence
Evidence, including visits to both Centers and conversations with staff and students, demonstrate that the College assures quality of services at the main campus and at both the North County and Lake Centers. The team found that student support opportunities offered to the Round Valley/Covelo area are enhanced by online and personal outreach visits on financial aid, particularly. Through web site investigations and interviews, the team found that the College offers online tutoring, online counseling, and online orientation. Through analysis of data, the team noticed that the College has diversified its student demographics, and has specifically recruited Native American and Latino students. The Native American enrollments are at five percent, and the Latino enrollments are at twenty-seven percent. The latter has designated the College as an Hispanic-Serving College. (IIB, IIB.1)

The team found that College publishes a full catalog every year which contains precise, accurate and current required information including major policies affecting students. This information is also available on the College website and portal. (IIB.2)

Through review of program review documents and associated plans, the team found that the College regularly solicits input from faculty and students on learning support needs. These needs are prioritized and funded through the College’s planning and budgeting process. For example, in an interview with the Learning Center Assistant the team learned that, as a result of an identified need for online tutoring, a new online tutoring technology utilizing Wacom Intuos tablets and CCC Confer has been implemented that will facilitate and strengthen online tutoring. This will permit students at remote locations in the College’s service area to participate in tutoring services. The initial subject matter for
this online tutoring will be math, physics and chemistry with online English tutoring to follow. It was also confirmed that the College assigns a counselor to online students for guidance and advising services. Following a similar needs analysis and prioritized funding, a counselor was recently hired to focus on Native American outreach and advising. (IIB.3)

Through site visits which included interviews with faculty and students, the team found that students attending the Ukiah Campus, North County Center, and Lake Center are all consistently offered support services which are comprehensive in nature. Evidence found on the website and in the catalog, in addition to visits to the main campus and to the two centers, demonstrated that the College provides equitable student access to College programs and services. This is accomplished through the delivery of services which include the following. The Admissions and Records Office ensures equitable access by supporting online and in-person admissions and registration processes. Students are provided assistance via in-person services at the Ukiah Campus, Lake Center and North County Center, and by telephone and email. The Financial Aid Office provides computer access and assistance in completing online applications for financial assistance on the Ukiah Campus, Lake Center, and North County Center. Presentations and workshops are made to parents and students in the service areas and done bilingually in Spanish and English. Counseling Services are provided on the Ukiah Campus, Lake Center, and North County Center and online. Services include academic, career, and transfer advising as well as personal counseling. New student orientations are available in person at all three locations and online through the College website. Online counseling services are available. Disability Resource Center counseling services are available at the Ukiah Campus, Lake Center and North County Center. Accommodations are provided to students at all three locations as well as to online students; Extended Opportunity Programs and Services targets first generation and under-represented students in higher education. The services begin with special outreach and enrollment support to help these students more easily complete the applications and orientations necessary to actually enroll. California Work Opportunities and Responsibilities for Kids Program support eligible students. The College Assistance Migrant Program assists students who are migratory or seasonal farmworkers or children of such workers enrolled in their first year of undergraduate studies. Services include outreach prior to the first year of college enrollment, financial stipends and book vouchers, counseling, tutoring, skills workshops, health services and housing assistance. (IIB.3.a)

Board Policy 302 and Administrative Procedure 302.1, District Code of Ethics, outline expectations of behavior District-wide. The Mission, Vision and Values and Goals also address the College’s commitment to encouraging an environment of personal and civic responsibility as well as intellectual, aesthetic, and personal development for all students. The team talked to many faculty, staff, administrators, and students on the main campus and at the centers. The team found an environment of support, inspiration, involvement, and connection with the community that was exemplary. (IIB.3.b)

The team found that counseling functions and evaluations appear in the program reviews of the Counseling, Career Center, Matriculation, Orientation, and Transfer Center units. In addition, conversations and visits with counselors at the main campus, North County Center, and Lake Center demonstrate that counseling services are available to all students to ensure students succeed in completing their educational goals in a timely fashion. Counselors are found in general counseling as well as in special programs. A full-time counselor is located at the Lake Center. The North County Center has part-time counselors. In 2011 a certificated/tenure track counselor was hired by the College specifically to focus on advising Native American students. The Lake Center Counselor has included a
Counseling 119 course for the Summer of 2014, specifically for local high school students. An online orientation was developed by counselors. Students are required to take this orientation before they take the assessment exam which better prepares them for maximized placement in math and English. Faculty is sent Early Alert requests by counseling in order to identify students having difficulties and for prescribing appropriate interventions. Counselors participate in College flex day staff development activities and are encouraged to participate in professional development workshops. Instructional faculty members are also invited to meetings to provide up-to-date information regarding program changes and requirements. The team reviewed the Counselor Handbook which shows detailed information regarding practices and policies. The Counseling Department, represented by counselors providing online counseling services, participates as a member of the Distance Education Committee. (IIB.3.c)

As stated in the College Catalog, all students completing an Associate degree must complete a three unit Studies in Culture course. Meetings with student leaders and outreach staff revealed that diversity is celebrated through events such as the Native American Motivation Day and Latino Student Retreat in addition to activities sponsored by the Gay Straight Alliance and culturally themed art events through the Art Gallery, Theatre and Art Departments. In addition, the review of Board Policy 307 on Non Discrimination describes that discrimination will not be practiced at the College. (IIB.3.d)

The Accuplacer test is used for placement into English as a Second Language and all math and English course levels. In an interview/meeting with learning center staff, the institutional researcher, and professors in math, English as a Second Language, and English, the team found regular attention to the validation of cut scores for placement instruments. The last validation of placement instruments themselves was performed in 2009, and the College is currently in process for updating validation of placement instruments in 2014. Through an interview with the Director of Admissions and Records, it was learned that the admissions and enrollment procedures were updated in 2011 and slated for updating in 2015. (IIB.3.e)

A review of Board Policy 304 and Administrative Procedures 304.1 and 304.2 provide definition of public records, accessibility to records and the College procedure for the maintenance of records. A review of Board Policy 506 and Administrative Procedure 506.1 describes privacy policy and procedures that meet the requirements set forth by the Family Educational Rights and Privacy Act and state regulations regarding privacy, backup, and retention of records. These procedures and regulations were confirmed in an interview with the Director of Admissions and Records. (IIB.3.f)

Student Support Services are evaluated through the program review process. In addition, a document entitled SAO Workshop indicates that in spring of 2013 an in-service on Service Area Outcomes was held for the benefit of Student Support Services areas. A document entitled Mendocino College-Service Area Outcomes describes the Service Area Outcomes developed by Student Support Services. These were revised and updated in Fall 2013. Student Support Services identify Service Area Outcomes then identify when they will be assessed, how they will be assessed, and what the results of the assessment are. Discussions with Student Support Services staff indicated that the results of these assessments are used to improve how services are delivered, but there is no documentation of this use of assessment results for improving the effectiveness of the services. The team suggested to the Vice President of Education and Student Services that such documentation be a regular part of the process. (IIB.4)
Conclusion
The College meets the Standard.

The College provides quality student support services which are adequately available to students on the main campus, at the North County, and Lake Centers, and to online students. The College designs and implements these services to appropriately support student learning. (IIB, IIB.1) The College provides a catalog for constituencies with precise, accurate, and current information in all required areas. (IIB.2)

The College researches and identifies the learning support needs of its student population and provides appropriate services and programs to address those needs. (IIB.3) The College insures equitable access to all of its students by providing appropriate, comprehensive, and reliable services to students regardless of service location or delivery method. (IIB.3.a) The College provides an environment that encourages personal and civic responsibility, as well as intellectual, aesthetic, and personal development for all of its students. (IIB.3.b) The College designs, maintains, and evaluates counseling and academic advising programs to support student development and success and prepares faculty and other personnel responsible for the advising function. (IIB.3.c) The College designs and maintains appropriate programs, practices, and services that support and enhance student understanding and appreciation of diversity. (IIB.3.d)

The College regularly evaluates admissions and placement instruments and practices to validate their effectiveness while minimizing biases. (IIB.3.e) The College maintains student records permanently, securely, and confidentially, with provisions for secure backup of all files, regardless of the form in which those files are maintained. The College publishes and follows establishes policies for release of student records. (IIB.3.f)

The College evaluates student support services to assure that they meet student needs and that the services contribute to the achievement of student learning outcomes. The results of these evaluations are used to improve the delivery of the services. (IIB.4)

Recommendations
None
Standard II. Student Learning Programs and Services

Standard IIC. Library and Learning Support Services

General Observations
The library and learning support services buildings at the College have a student-focused design. Space is provided to meet the various education needs of its students including quiet study areas, small groups study rooms, ample computers, and a high tech center computer lab for students with disabilities. Students at the North County and Lake Center campuses have access to a Learning Commons for individual and group study as well as access to computers.

Library and learning support services at the College provide resources and services for students, faculty, and staff at all its locations. Students at all locations have access to academic online sources including online databases, e-books and streaming videos. Center students also have access to physical library resources by requesting them online and having them delivered by the College courier who travels to each center daily. All faculty, staff and students, regardless of location, have access to library instruction on information competency skills and tutorial services.

Both the library and learning support services are involved in assessment and have used that information to assess their program. Library and learning support Service Area Outcomes and assessment tools are also being assessed and revised. Information competency skills have been identified in the College’s Institutional Learning Outcomes.

Findings and Evidence
According to evidence in the library handbook and librarian requests for selection recommendations, library materials are selected and effectively support student learning. The Head Librarian confirmed that he frequently emails faculty for recommendations and stated in interviews that he works closely with faculty in new and continuing programs to ensure that materials are selected to support student learning. He cited his work with the new Culinary Arts programs as an example of this collaboration.

According to evidence from the College Library Data survey the library has also increased e-book and streaming video collections to meet the needs of its distance education students. The Head Librarian stated in interviews that he is working with the Distance Education Coordinator to add questions about library and learning resource needs in a distance education survey to better identify student needs. The technology action plan shows evidence that equipment for the library is identified and requests are linked to the College Mission and Strategic Goals. An interview with the Head Librarian confirms that library projects in the technology action plan were completed. Evidence for technology and equipment requests is also provided in the Library and Learning Center Program Reviews. (IIC.1, IIC.1.a)

Evidence was provided that the College provides multiple avenues for users of library and learning support services to develop information competency skills including the curriculum outline for Library 200 Course and data represented in the Library Data Survey. The data survey shows that over eighty orientations were presented in 2012-13. In an interview with the Head Librarian, he stated that he provides workshops and faculty requested orientations, focusing on information competency skills, at both Center locations. Interviews with the North County Center Assistant and the Center Operations Supervisor confirm that students at the center locations have sufficient opportunity to develop information competency skills. Evidence provided in handouts including the learning center tutor
schedule, interviews with the Interim Learning Center Tutoring and Assessment Coordinators and interviews with select students from the Ukiah campus, confirm an adequate number of tutorial options and general satisfaction with the availability and quality of tutorial services for students. Information competency skills have also been identified by the College as a new Institutional Student Learning Outcome. (IIC.1.b)

The team found through reviewing documents and interviews with the Head Librarian, the Interim Learning Center Tutoring and Assessment Coordinators, Learning Center Assistants, the North County Center Assistant, and the North County Center Operations Supervisor that the College provides adequate access to library and learning support services regardless of their location and means of delivery. Through analyzing material on the library website, the team found evidence of multiple online resources available to students regardless of location. These resources include multiple online databases, e-books, and a streaming video database. Interviews with the North County Center Assistant and the North County Center Operations Supervisor confirm that students are provided assistance with requesting physical books from the Ukiah campus. Requested books are delivered by daily couriers and include access to reserve textbook materials. Team interviews with the Faculty Coordinator at the Lake Center confirm that the same process and opportunities are available to Lake Center students and faculty. From reviewing data from the library student satisfaction survey, the team found that student input on access is well evaluated and that students were satisfied with library services regardless of location or mode of delivery. Tutor hours are provided adequately during the day and evening as evidenced by the tutor schedule. Signage in the North County Center and interviews with staff provided evidence that tutoring in math and English is available at the Center including evening hours. Tutor hours and number of students served at the Center locations are collected and were produced for evidence. Interviews with the Interim Learning Center Tutoring and Assessment Coordinators and Learning Center Assistants confirm that this data is reviewed for future scheduling improvement. When interviewed, students from the Ukiah campus confirm their satisfaction with access to library and learning support services. (IIC.1.c)

The team found through analyzing program review documents and interviewing the Head Librarian, the Interim Learning Center Tutoring and Assessment Coordinators, and the Learning Center Assistant that the College does provide effective maintenance and security for its library and learning support services. Evidence shows that maintenance and security needs are identified by the library and learning resources in their program reviews. A physical review of the facilities and an interview with the Head Librarian confirm that there is adequate security for library and learning support services. Interviews with Interim Learning Center Tutoring and Assessment Coordinators confirmed that maintenance and security were effective. They both stated that as issues were reported, such as locked doors, they were quickly and effectively addressed. (IIC.1.d)

The College collaborates with other institutions by sharing materials through interlibrary loan. This occurs through membership in the Online Computer Library Center. The College also belongs to the California Community College Consortium and has a shared eBook collection as well as a suite of research databases. (IIC.1.e)

The team found, through review of the Library and Learning Center Program Reviews, that Service Area Outcomes have been identified and evaluated. The library uses surveys, provided as evidence to the team, to identify student needs. Program review evidence shows that the programs use the program
review process to assess staffing, facilities and resource needs along with the Service Learning Outcomes. Interviews with the Head Librarian, the Interim Learning Center Tutoring and Assessment Coordinators, and the Learning Center Assistants confirm that the identification and assessment of Service Learning Outcomes are systematic and used to review the programs for improvement. Program review evidence and interviews with the Interim Learning Center Tutoring and Assessment Coordinators were provided to the team to show that the Learning Center worked with the English as a Second Language Department to request part time staffing for the Language Lab through the program review process. The Language Lab is located in the Learning Center, and both programs worked together to identify the need for additional staffing. That staffing request was reviewed through the staffing process and hiring will take place in 2014. Evidence provided in an email from the Interim Learning Center and the Student Learning Outcomes Team Coordinator and interviews with the Interim Learning Center Tutoring and Assessment Coordinators and Learning Center Assistants show that they have worked with the Student Learning Outcomes Team Coordinator to review and revise their Service Learning Outcomes and assessment tools. Evidence on their new draft outcomes was provided to the team. (IIC.2)

**Conclusion**

The College meets the Standard.

The College selects and maintains materials to support student learning. Materials are sufficient for students regardless of location. This process is faculty driven and links to the mission of the College. (IIC.1, IIC.1.a) The College provides ongoing instruction in information competency. (IIC.1.b) The College provides students, faculty, and staff adequate access to the library and other learning support services, regardless of their location. (IIC.1.c) The College does provide effective maintenance and security for its library and learning support services. (IIC.1.d) The College does not rely on or collaborate with other institutions or other sources for library and other learning support services. (IIC.1.e) Library and learning support services use evaluative measures to assess their achievement of student learning outcomes and use that information to improve their programs. (IIC.2)

**Recommendations**

None
General Observations
The College’s Human Resources Department is currently led by an Interim Director. The College has implemented an integrated planning and program review process in the last two years and has made substantial improvements in this area. The College has hired consultants to review the department structure and a consultant to help with legal review as policies are reviewed and revised as needed.

Findings and Evidence
The team found, by reviewing documents and interviewing constituent leaders and the Staffing Committee, that the College has a thorough process for determining its hiring needs. Position requests begin in the program review process. The Staffing Committee then uses a rubric linked to the College Mission, Educational Master Plan, and College Strategic Goals to score the requests. This information goes to the Planning and Budget Committee for review. Through consensus, the committee makes recommendations to the Superintendent/President who announces the hiring lists to the College community. The thorough screening and interview process also ensures personnel are sufficiently qualified to guarantee the integrity of programs and services. (IIIA, IIIA.1)

The team found by reviewing documents that job announcements are comprehensive, clearly stated, describe the duties and qualifications for the position being recruited, and are linked to the College Mission. Criteria for selection include subject expertise. The hiring process for faculty is part of the program review process in order to strengthen the role of faculty in the faculty hiring process. The Academic Senate and administration are in a lengthy process of reviewing and strengthening the faculty minimum qualification/equivalency policy. Foreign degrees must be certified by an agency approved by the Commission for Foreign Transcription Evaluation. (IIIA.1.a)

The team found, by reviewing documents, that the College evaluates employees systematically and at stated and regular intervals. Written criteria for all employee groups exist. All evaluation procedures include the opportunity to provide evaluative information, commendations, and feedback regarding job performance, including the opportunity to address areas where improvement and/or professional development are needed as well as goals for the future. Of the faculty and staff surveyed in Fall 2012, 77.6% agreed that job performance evaluations are conducted in a manner supporting continuous improvement. (IIIA.1.b)

The team found, by reviewing documents and conducting interviews with the Human Resources Director, constituent leaders, and members of the constituent groups that faculty evaluations do not include discussion or documentation of effectiveness in producing student progress toward achieving student learning outcomes. While the faculty contract allocates two flex days to work on Program Review and Student Learning Outcomes, there is no reporting of how each faculty member developed or assessed outcomes. The Flex Report included fifty-six full-time faculty summaries of individually designed flex hour activities; only four referenced their Student Learning Outcome work. (IIIA.1.c) The team found, by reviewing documents, that the College has a Code of Ethics which includes acting appropriately and with integrity, civility, responsibility, confidentiality, accountability, knowledge, accuracy, and professionalism. (IIIA.1.d)
The team found, by examining documents and interviewing constituent leaders, that the College has experienced a reduction in staffing due to fiscal circumstances with retirements and resignations not always being filled. Several years ago employees agreed to take a four percent reduction in salary to avoid layoffs. The College is now replacing positions once vacant. For example, a new Human Resources Director begins work in April, and a Human Resources Technician, a position listed as vacant on the organization chart, is slated to be filled. The Public Information Office, a position left unfilled for many years, is also slated to be filled. (IIIA.2)

After reviewing documents and conducting interviews with the Human Resources Director, constituent leaders, and members of constituent groups, the team found that the College continues to undergo a review of particular personnel policies and procedures, such as the Minimum Qualifications Policy and the faculty role in the hiring process, which do not conform to current practice or do not reflect current laws or regulations. The team found through an onsite visit that personnel records are securely stored in locked files and cabinets in the Human Resources Office, which is also locked when staff members are not present. Personnel files are maintained by Human Resources in accordance with California Education Code, collective bargaining contracts, and meet-and-confer agreements. (IIIA.3.b)

The team found, by reviewing documents and conducting interviews with the Human Resources Director and constituent leaders, that the College supports and encourages diversity through its policies and hiring practices. The College has adopted as one of its Core Values a statement on diversity such that those at the College commit to respect the dignity of each individual, value the creativity and insight that emerge from individual differences, and recognize the importance of diversity in achieving College goals. The College has conducted a review of its Human Resources Department and revised policies and documents such as the Non-Discrimination Policy and the Equal Employment Opportunity Plan. The College conducted surveys in the fall of 2012 and 2013. Both surveys asked if the College, through its policies and practices, demonstrates an appropriate understanding and concern for issues of equity and diversity. The Fall 2012 Faculty Staff Survey reported that 84.2% strongly agreed/agreed with the statement. The Fall 2013 Full-time Employee Survey reported that 82% strongly agreed/agreed. (IIIA.4, IIIA.4.a)

Through review of documents the team found that the College revised its Equal Employment Opportunity Plan; the Board of Trustees approved the plan June 5, 2013. Through the plan, the College annually updates statistics on employee demographics by job category. In addition, the January 2013 workforce analysis shows a growth in Hispanic/Latino employees from 10% to 14% of the work force. (IIIA.4.b)

The team found by reviewing documents that the College subscribes to and advocates integrity as it is included in its Core Values which states through the statement that those at the College maintain public trust by being honest, fair and equitable and by honoring commitments to students, staff and communities. Integrity is also referenced in the Institutional Code of Ethics which commits those at the College to act with honesty and integrity, avoid actual or apparent conflicts of interest between personal and professional relationships, respect differences of opinion, and make best efforts to resolve those differences in an ethical and professional manner. Based on a review of documents and interviews with the Human Resources Director and all constituent leaders, the team found that the College demonstrates integrity in the treatment of its administration, faculty, staff, and students through its inclusive shared governance and complaint processes. (IIIA.4.c)
The team found, by reviewing documents, that the College has a Professional Development Committee with representatives from all employee groups. The committee annually reviews the professional development needs of College personnel and develops appropriate professional development activities. The professional development needs are based on the College Mission, Vision, Values And Goals; needs and priorities identified in planning documents such as the Educational Master Plan; and an annual survey of employees. The Professional Development Committee oversees planning for both Fall and Spring In-Service and Flex workshops the day before In-Service. It also provides recommendations to the Planning and Budget Committee and the Superintendent/President in the annual Professional Development Report. (IIIA.5, IIIA.5.a)

The team found, by reviewing documents, that the College systematically evaluates professional development programs and uses the results of these evaluations as the basis for improvements. Full-time faculty members submit annual professional development plans to the Flex Committee which reviews and approves the plans. Faculty members also submit year-end reports to the committee, summarizing the benefits of the activities. Part-time faculty may also choose to participate, file a plan with their dean, and complete a follow-up report. The Flex Committee forwards its report to the Professional Development Committee which meets each semester to discuss and plan future professional development opportunities. It reviews the annual summary report, survey results, and suggestions from constituents in planning future professional development opportunities. (IIIA.5.b)

The team found, by reviewing documents and meeting with the Planning and Budget Committee and the Staffing Committee, that the College integrates human resources planning with institutional planning. Staffing needs emerge through the Program Review process; the Staffing Committee evaluates and ranks staffing requests, assigning points based on a rubric that references the College Mission, Educational Master Plan, and Strategic Goals. The Staffing Committee’s rankings move to the Planning and Budget Committee which makes recommendations to the College President who makes the final decisions and reports to the College community. The team found that the portion of the personnel planning that involves personnel requests is evaluated through the Program Review process. However, the team did not find evidence that the entire process, from Program Review to Staffing Committee to Planning and Budget Committee, has been reviewed. (IIIA.6)

Conclusion
The College does not fully meet the Standard, specifically Standards IIIA.1.c.

The College follows a systematic process in determining personnel needs. (IIIA, IIIA.1) Hiring processes are comprehensive, clear, open, and mission-based. The College employs faculty and staff who are qualified to further student learning and institutional effectiveness. Faculty members possess recognized degrees and have appropriate teaching and scholarly expertise as determined by those with discipline knowledge. (IIIA.1.a) Each year the Human Resources department provides lists of employees to be evaluated and tracks the completion of evaluations. (IIIA.1.b)

The College does not meet Standard IIIA.1.c. Faculty evaluations do not include discussion or documentation of effectiveness in producing student progress toward achieving student learning outcomes. (IIIA.1.c) The Code of Ethics is a district policy and appears in the College Catalog. (IIIA.1.d) The College has made critical decisions to maintain a number of qualified staff,
administrators, and full-time faculty sufficient to achieve its mission. (IIIA.2)

The College demonstrates, through its policies and support, its understanding of equity and diversity. (IIIA.4, IIIA.4.a) The College regularly assesses the diversity of its employees by job category. (IIIA.4.b) The College demonstrates integrity in the treatment of its administration, faculty, staff and students. (IIIA.4.c)

The College provides all personnel with appropriate opportunities for continued professional development activities to meet their respective needs. (IIIA.5, IIIA.5.a) The College regularly reviews the effectiveness of its professional development activities and uses input from employees to update activities annually. (IIIA.5.b)

Recommendations

Recommendation 3. SLOs in Faculty Evaluations

In order to meet the Standard, the team recommends that the College establish effectiveness in producing student learning outcomes as an evaluation component for all faculty and for all others directly responsible for student progress toward achieving those learning outcomes. (IIIA.1.c)
Standard III – Resources
Standard IIIB – 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.

With the completion of new facilities funded by Measure W in August 2013, the overall quality of physical resources, including facilities, equipment, land, and other assets, supports student learning programs and services and improves institutional effectiveness at all College sites. The 2009 committee reorganization process restructured the Facilities Committee, revised Program Review, and created the Planning and Budget Committee. This resulted in integration of the physical resource planning process with institutional planning through the Program Review Process, prioritization and recommendations by the Facilities Committee, and ultimate funding by the Planning and Budget Committee. The general attitude of all College constituents including governing board members, foundation members, administrative team, faculty, staff, students, educational partners, and members of the public, is pride in the campus and new facilities.

Findings and Evidence
The team found that the College adequately provides safe physical resources as evidenced by the 2010-2011 Clery report, the Board Policy, and Administrative Procedures. The team found that the College conducts an annual safety audit. The most recent safety report dated 2011 recommended on-going safety training for staff. The team found that the College provides sufficient physical resources as evidenced by the 2013-2014 Maintenance & Operations Program Review. Additionally, the 2014-15 Utilization Report shows a 67.9% average utilization for all College facilities, with six rooms over 90% utilization and one classroom over 100%. The team found that the College’s physical resources appropriately support and assure the integrity and quality of its programs and services, regardless of location or means of delivery as evidenced by the Maintenance & Operations Program Review. (IIIB.1)

Based on interviews with the Vice President of Administrative Services and the Director of Maintenance and Operations, Program Reviews, Facility Request Prioritization Matrix, Facility Review of Program Review Table, Facility Utilization Report, and Facility Master Plan, the team found that the College plans, builds, maintains, and upgrades or replaces its physical resources in a manner that assures effective utilization and the continuing quality necessary to support its programs and services. However, the team found that the planning process for physical resources was not consistently documented. Through review of documents and interviews, the team did not find evidence of a physical resource replacement schedule. However, the team did find evidence that the College does rely on the program review process to guide physical resource replacement. The team did not find evidence that physical resource utilization consistently guided planning for new, upgraded or replacement physical resources. The team suggests that the College add a facilities replacement schedule to its Facilities Master Plan. The team further suggests that the extent of facilities utilization be included as a factor the Facilities Master Plan. (IIIB.1.a)
Based on site tours, interviews, the Safety Inspection Report and Clery Report, the program review process and the Maintenance and Operations Program Review, the team found that the College adequately assures that physical resources at all locations where it offers courses, programs and services are constructed and maintained to assure access, safety, security, and a healthful learning and working environment. The team found, based on Facility Use Agreements and an interview with the Vice President of Administrative Services, that the College did not consistently document assurances that physical resources at off-campus sites are maintained to assure access, safety, security, and a healthful learning and working environment. The team suggests that the College document that off-campus sites are adequately maintained. (IIIB.1.b)

The team found, based on program reviews, Facilities Committee meeting minutes, and interviews, that the College plans its long-term physical resource needs through the Facilities Master Plan and its short-term physical resource needs through the program review process. The team found evidence in the program review process that utilization and other data was taken into account in the planning and evaluation of facilities and equipment. However, based on the Facilities Committee analysis of program review requests for facilities projects and the program review documents themselves, the team found that utilization and other relevant data was not systematically used in the planning and evaluation of facilities and equipment. The team suggests that the College incorporate utilization data in the planning and evaluation of facilities and equipment. (IIIB.2)

The team found evidence through review of the Facilities Master Plan and the Five-Year Capital Outlay Plan that the College has long-range capital plans which support institutional improvement goals. The team also found through document review that the College has a program review process through which each program identifies facilities and equipment needs. According to interviews with the Vice President of Administrative Services and the Director of Maintenance and Operations, the team found that the Facilities Committee conducts a review of program review resource requests which compiles all facility requests, ranks those requests based on a rubric linked to the College goals and mission, develops a budget for total costs associated with those facilities requests, and makes recommendations for prioritizing and funding these facility requests to the Planning and Budget Committee. However, the team found through the same sources of evidence that the College does not consistently reflect projections of the total cost of ownership for all facilities and equipment in long-range capital plans. The team suggests that the College consider total cost of ownership when budgeting for facilities and equipment. (IIIB.2.a)

The team found through the self-evaluation and document review that the College has a program review process through which each program identifies facilities and equipment needs and assesses the effectiveness of use of physical resources. The team found, according to interviews with the Vice President of Administrative Services and the Director of Maintenance and Operations, that the Facilities Committee develops a Facilities Review of program review resource requests which is communicated to the Planning and Budget Committee in its prioritization of requests of other types of resources and integrates those requests into an overall budget plan. The team found that the Facilities Committee incorporates the facility needs and assessments from the program review process into the Maintenance and Operations Program Review. The Maintenance and Operations Program Review uses these assessments as a basis for improvement. (IIIB.2.b)
Conclusion
The College meets the Standard.

The College provides safe and sufficient physical resources that support and assure the integrity and quality of its programs and services, regardless of location or means of delivery. (IIIB.1) Through planning, building, maintaining, and upgrading or replacing its physical resources the College assures effective utilization and the continuing quality necessary to support its programs and services. (IIIB.1.a) The College assures that physical resources at all locations where it offers courses, programs, and services are constructed and maintained to assure access, safety, security, and a healthful learning and working environment. (IIIB.1.b)

Through planning and evaluating its facilities and equipment on a regular basis, the College assures the feasibility and effectiveness of physical resources in supporting institutional programs and services. (IIIB.2) The College’s long-range capital plans support institutional improvement goals through the program review process and the Facilities Committee Review of program review and recommendations to the Planning and Budget Committee. (IIIB.2.a) The College integrates physical resource planning with institutional planning. The College, through the program review process, systematically assesses the effective use of physical resources and uses the results of the evaluation as the basis for improvement. (IIIB.2.b)

Recommendations
None
Standard III – Resources

General Observations
The 2010 Technology Master Plan expresses an information technology vision for the College and drives the Technology Action Plan 2010-2015 (2012 update) which contains both strategic goals and objectives. The College engages constituents at all levels in discussions about technology needs and planning for ways to meet these needs in light of the strategic goals and objectives documented in the Technology Action Plan. The College also uses Service Area Outcomes to assess its technology support and service.

Findings and Evidence
The 2014 Self Evaluation, Technology Action Plan 2010-2015 (2012 update), and interviews with the Director of Information Technology, Learning Center Assistant, and the Telecommunications Technician confirmed that the College has organized and systematic planning processes in place to ensure that its technology needs are identified and met. Evidence indicates that the Technology Committee receives technology requests in department-generated online program review reports and that the Technology Committee prioritizes those requests after thorough analysis which includes consideration of survey results when available. (IIIC.1)

The team reviewed minutes for the Instructional Technology Leadership Team and the membership roster for the Technology Committee and held interviews with the Director of Information Technology, Telecommunications Technician, Distance Education Coordinator, and members of the Distance Education Committee confirming that the College uses integrated and systematic planning to determine the level of technology services, professional support, facilities, hardware, and software needed to enhance institutional effectiveness. (IIIC.1.a) The team reviewed the Technology Action Plan 2010-2015 (2012 update), minutes of the Distance Education Committee, the Technology Committee Purpose and Function statement, Flex and In-service Technology Training Schedules, results of 2014 Faculty In-service Survey, and conducted interviews with the Distance Education Coordinator and members of the Distance Education Committee all of which demonstrated that College provides appropriate and effective training to students, faculty, and staff. (IIIC.1.b)

The team reviewed the Strategic Plan 2009-2015, Strategic Annual Action Plan for 2013, Technology Master Plan 2010, the Educational Master Plan 2008-15 (update 2012), the Technology Action Plan, 2010-2015 (2012 update), the March 2014 Technology Refresh Plan, Measure W reports, minutes of the Bond Implementation Committee and the Planning and Budget Committee, and carried out interviews with the Director of Information Technology and the Telecommunications Technician all of which confirmed that technology planning is integrated with institutional planning. During the program review process, online program review reports are collected, multiple resource request lists, including technology requests, are compiled and sent to the appropriate committees for prioritization in light of the strategic goals and objectives housed in the Strategic Plan. The 2012-2013 Committee Handbook identifies seven committees, including the Technology Committee, that complete the primary work for planning. Upon prioritization, the requests go to the Planning and Budget Committee. The less than enthusiastic response captured in Fall 2012 Faculty Survey, where 55% of faculty and staff reported satisfaction with maintenance, upgrade and replacement of technology equipment, The Technology Committee has completed its inventory of all of computers at all sites and
has generated a refresh and re-purposed plan dated March 2014. Interviews with the Director of Information Technology and the Telecommunications Technician confirm that the Information Technology Department provides proper management, maintenance, and operation of the College’s technological infrastructure and equipment. (IIIC.1.c)

Team review of the March 2014 Technology Refresh Plan, interviews with the Director of Information Technology and Telecommunications Technician, Coordinator of Distance Education and the Distance Education Committee members reflect that the availability and utility of technology support the effectiveness of its programs and services. (IIIC.1.d)

Team review of the Strategic Plan 2009-2015, the Strategic Annual Action Plan for 2013, the Technology Master Plan 2010, the Educational Master Plan 2008-15 (2012 update), the Technology Action Plan, 2010-2015 (2012 update), the Measure W reports, minutes of the Bond Implementation Committee, and the Planning and Budget Committee, and results from interviews with the Director of Information Technology and the Telecommunications Technician confirm technology planning is integrated with institutional planning. Following program review and analysis of technology requests by the Technology Committee, these requests are prioritized with a standard rubric by the Planning and Budget Committee which integrates technology priorities with the request in other resource areas. Although the planning processes are functional, neither the technology planning process itself nor the resulting activities are consistently evaluated. In addition, there is insufficient documentation of the ways in which evaluation results drive improvement. Two Key Success Factors listed as being required for the successful implementation of the Technology Action Plan, 2010-2015 (2012 update), integration with planning efforts and continual revision, are noted along with the creation of measurements and a process to review and update the plan, yet there is no further evidence that the College has taken action along these lines. (IIIC.2)

**Conclusion**
The College does not fully meet the Standard, specifically Standard IIIC.2.

Through its use of formal technology planning processes, the College assures that any technology support it provides is designed to meet the needs of learning, teaching, (IIIC.1) The Services and support provided by Information Technology contribute to the effectiveness of the College by ensuring that facilities, hardware, and software are successfully planned, implemented to enhance the operation and effectiveness of the College. (IIIC.1.a) The College provides quality training in the effective application of its information technology to students and personnel. (IIIC.1.b) The College systematically plans, acquires, maintains, and upgrades or replaces technology infrastructure and equipment to meet institutional needs. (IIIC.1.c) The distribution and utilization of technology resources support the development, maintenance, and enhancement of its programs and services. (IIIC.1.d)

The College does not meet Standard IIIC.2. Technology planning is integrated with institutional planning, but neither the technology planning process itself nor the resulting activities are consistently evaluated. (IIIC.2)

See **Recommendation 1. Review and Evaluation Mechanisms** (IIIC.2)
Standard III – Resources
Standard IIID. Financial Resources

General Observations
The Vice President of Administrative Services and Director of Fiscal Services have both been with the College for many years. The College also has internal controls that have been in place for many years. Audit reports are clean and any instances of non-compliance are addressed immediately.

The College is self-insured for health benefits and has set funds aside for other post-employment benefits. These funds have not yet been moved to an irrevocable trust, but there are currently enough funds on reserve in two funds to cover the liability that has been created by not fully meeting the annual required contribution the last three years.

The College has utilized stability funding every other year for five cycles. The College appears to be relying on this opportunity available to them to intentionally decrease full-time equivalent students, FTES, rely on the funding level from the prior year, and then rebuild FTES and funding levels through the process of putting two summer sessions, that is, both ends of the fiscal year, to maximize apportionment. This process does not ensure that resources are sufficient to maintain financial solvency. The College should be in a planning year in 2013-14 with reductions planned for 2014-15. However, it appears that the College plans to utilize 2014-15 as its planning year. If summer programs are not as robust as anticipated, a significant reduction in FTES could have a negative impact on their ending balance. The evidence that we have reviewed does not show that this planned reduction in FTES has been vetted with the governing board and campus community.

Findings and Evidence
Through review of the Programs and Budget Integrated Timeline, the team established that the Planning and Budget Committee continually reviews the College Mission, Vision, Values, and Goals throughout the fiscal year. Evidence analyzed by the team demonstrates that this is an ongoing process. The team verified by extensive perusal of program review documents that this process establishes goals and identifies needed resources, that the Planning and Budget Committee provides input from all College constituency groups during this process, and that this committee makes recommendations on all major budget assumptions including staffing. The team also established through interviews and review of minutes that, while evaluating items for funding, the Planning and Budget Committee evaluates how the item supports the Strategic Action Plan, impact on the fifty percent law calculation, compliance with the faculty obligation number, and other planning type activities. (IIID.1, IIID.1.a)

Team review of documentation and interviews with key personnel established that the College significantly connects institutional planning to allocation of financial resources. Based on a review of Planning and Budgeting Committee minutes, the team verified that dialogue on the planning and budgeting process is occurring, but the team also found that this dialogue has not consistently resulted in realistic enrollment assumptions when setting budget levels. Although the Self-Study states that revenue assumptions are made in a conservative manner to recognize realistic enrollment levels, team analysis of the annual adopted budgets found that these budgets do not reflect such realistic assumptions. Review of the extensive budget deficits that would result from current FTES levels in each year, convinced the team that inclusion in the College budget of a one percent deficit factor is not sufficient to address the recent serious enrollment declines and accompanying budget impact. In
reviewing the adopted budget for 2013-14, the team found an assumed increase of fifty-two Full Time Equivalent Students, FTES. This increase resulted in an increase in budgeted revenues of approximately $230,000. In reviewing the first principal apportionment report for 2013-14, the team found a decrease in FTES of 674.85. The budget documentation does not show that this was a planned decrease. In interviews with the Superintendent/President and Vice President of Administrative Services, the team was told that the College intends to go on stability funding in 2013-14 and then intends to use enrollment in both summer 2014 and summer 2015 to boost the 2014-15 FTES back up to the base funding level. The College utilized two summer sessions in its 2012-13 FTES report in order to maximize funding. This summer capture of FTES to maximize 2012-13 revenue precludes growth of 52 FTES in 2013-14 as projected in the Adopted Budget for 2013-14. Additional review of enrollment management documents shows that the College has utilized this summer shift since the 2004-05 fiscal year. The College has shifted summer enrollments every other year for five cycles. This cycle will continue in 2014-15 for a sixth cycle. (IIID.1.b)

Through review of the Board of Trustees Budget Parameters for the 2013-14 fiscal year, the team found that the College includes a minimum fund balance reserve target of eight percent, which is above the required accreditation minimum level of five percent. The College has a Special Reserve Fund as noted by the team in reviewing budget documents. This fund includes reserves for accrued vacation, load banking, health benefits, Other Post-Employment Benefit requirements, and self-insurance reserves.

As established by Board Policy 601, Budget Planning and Preparation, the team found that the College follows its guidelines and processes for financial planning and budget development. Through discussions with the Planning and Budgeting Committee and the Vice President of Administrative Services, the team established that dialogue and communication is occurring across the College and that this committee seeks consensus as items are brought forward. Interviews with members of the committee affirmed that they understand the expectation that they inform their constituencies about decisions and discussions occurring at the Planning and Budget Committee. The team analyzed the program review and budgeting process and verified that program reviews generate priorities that are reviewed by Planning and Budget Committee and that items that are approved by the committee are included in the budget documents presented to the governing board. The team also reviewed the Budget Augmentation Request Form and found that this process allows for funding outside of the committee structure and the current resource allocation process with the signatures of the Vice President of Administrative Services and the Vice President of Education and Student Services. (IIID.1.d)

Through review of governing board agendas and minutes, the team verified that the governing board annually approves a Tentative Budget each June, a Final Budget each September, and a Revised Budget each April. The team found that these budgets provide the most information including information on all funds and that additional budget information is provided to the board on a monthly and quarterly basis. Through review of Board Policy 606, Audit Policy, the team verified that the annual audit includes all funds of the College and is performed in accordance of the law. The independent audit is completed on a timely basis and is submitted to the state chancellor’s office by December 31st each year. (IIID.2, IIID.2.a)
Through team review of the last three independent audit reports, the College has a strong internal control structure. The team observed that audit findings relating to internal controls and federal and state compliance are rare and are corrected immediately. The College has not had findings repeat to a subsequent year over the last three audit reports. (IIID.2.b)

Team review of budget documents reveal that the College prepares a Tentative and Final Budget as required by law. Monthly, quarterly, and another April budget are prepared and presented to the governing board. The College has had negative cash in the General Fund the last two fiscal years. This has happened as a result of cash deferrals all California community colleges have been facing for the last several years. Through discussion with the Director of Fiscal Services, the College is able to borrow through the County Treasury when funds go negative. The County Treasury charges interest at the same rate when funds are positive. Low interest rates mean that this borrowing is less costly for the College than issuing a tax revenue anticipation note or finding another source. The College is self-insured for health and is a member of Northern California Community Colleges Self Insurance Authority for workers compensation and liability insurance. These programs provide sufficient coverage for the College. (IIID.2.c)

Through review of audit documents, the team found that the financial operations of the College including the foundation are audited on an annual basis. The various audit reports show that the College has good procedures in place to manage internal controls. Through discussion with the Director of Fiscal Services, the financial operations of the College Foundation follow the same procedures as the College. Audit findings for the College are minimal in nature and do not repeat into the second year per review of the audit reports. Audit findings are addressed in a timely manner. Review of budget and expenditure document reveal that the College has properly managed short and long term debt instruments. The payments on the solar field are managed through rebates and a reduction in utility expenses. The Measure W bond is handled through the county treasury and the assessment of property taxes. (IIID.2.d)

Through review of the last three independent audit reports, the team found that the College has a strong internal control structure. Findings relating to internal control and federal and state compliance are rare and are corrected immediately. (IIID.2.e)

Through review of Annual Budget and Financial Reports, specifically the CCFS 311, and College budgets, the team determined that the College maintains reserves above the minimum established by the Chancellor’s Office. The governing board has established its own criteria of an eight percent reserve for the general fund. Recent CCFS 311-Q budget information shows that the College maintains these levels as established by the board. The College has had negative cash flow in the general fund in the last two fiscal years; however, the College has had sufficient reserves in other funds and has the ability to borrow through the county treasury at low interest rates. The State of California has deferred apportionment revenue to the College. This deferral process will be lessening in 2013-14 and cash reserves will be increasing. (IIID.3, IIID.3.a)

Through discussion with the Director of Fiscal Services, the team established that the College provides effective oversight of College and Foundation finances. This includes financial aid, grants, categorical programs, and institutional investments. The finances of the College and Foundation are reviewed each year by an external audit firm. This yearly audit ensures compliance with federal, state, and local rules.
and regulations. The College processes payroll and distributions through the Mendocino County Office of Education and the county treasury which adds another layer of compliance and review to make sure funds are expended appropriately. (IIID.3.b)

Through review of the June 30, 2013 audit report, the team established that the College has a net Other Post-Employment Benefits (OPEB) obligation liability of $498,052. The annual required contribution for 2012-13 was $635,674. The College is utilizing the pay-as-you go method with total payments amounting to $447,718. The newest actuarial report will be effective for the 2013-14 fiscal year and shows a reduced annual required contribution of $599,990. The College will continually fall behind on its net OPEB obligation liability if it is not able to increase contributions towards retiree benefit costs. The College is a part of the California Community College League of California OPEB trust but has yet to deposit any funds into the irrevocable trust. Team review of College fiscal statements shows that the College has a Fund 61 Special Reserve fund with approximately $640,000 set aside as a reserve for OPEB type liabilities. The College also has a Fund 62 Health Fund with a reserve of over $1,000,000. Both of these reserve amounts can be used to meet OPEB liabilities. Through review of a College prepared Plan to Fund OPEB draft dated December 9, 2013, it is the intent of the College to transfer the $640,000 reserve funds to the irrevocable trust. (IIID.3.c) Through review of the actuarial study dated December 7, 2013, the team determined that the College has a document prepared as required by appropriate accounting standards. (IIID.3.d)

Through review of the audit report, the team established that the College has two issuances outstanding for general obligation facilities bonds. Combined, the issuances are slightly under 4:1 in interest to principal. The second issuance has capital appreciation bonds, interest rates that range up to 11.75%, and a term of 40 years. However, this issuance is fully callable after ten years, including the capital appreciation bonds. Assessed valuation has been increasing so the county should not have an issue with repayment of the bond. Through discussion with the Vice President of Administrative Services, the amount charged by the county has remained under $25 per $100,000 of assessed valuation. In reviewing audit reports, the team found that the College has taken on two programs that relate to energy efficiency. Through discussion with the Director of Fiscal Services, these projects are paid for with the savings the College recognizes through decreased costs in utilities. The general fund budget is not impacted by the implementation of these programs. (IIID.3.e)

Team review of the United States Department of Education website on default rates, revealed that the College has the following default rates: 3 year rate for 2010 is 26.5% and 2009 is 17.8%; 2 year rate for 2011 is 13.3%, 15.1% for 2010, and 14.5% for 2009. Through discussion with the Assistant Dean of Financial Aid, the team found that the draft three year rate for 2011 is 14.4%. These default rates are within federal requirements. The College website has robust information for students relating to financial aid. Through review of the College website, all students wanting a Direct Student Loan are required to attend a Responsible Borrowing Workshop. (IIID.3.f)

The team reviewed the College process to manage contractual agreements and found that all such contracts are reviewed by the Vice President of Administrative Services to make sure they have appropriate language to protect the College. He verifies mission and goals with the appropriate department if he is not already aware of the specific agreement. Through discussion with the Director of Fiscal Services, the business office manages and reviews expenditures for categorical programs and contracts. The external audit process helps assure that federal regulations are met. (IIID.3.g)
Through review of the last three independent audit reports, the team found that the College has a strong internal control structure. Findings relating to internal control and federal and state compliance are rare and are corrected immediately.

Through review of documents and extensive interviews, the team established that College has a process of integrating budget development into the planning process. The program review process drives the development of needed resources. Evidence indicates that every program completes program review annually. Programs seeking additional resources have that information forwarded to the appropriate committee depending on the type of resource requested. The committee priorities make their way up to Planning and Budget Committee where priorities that are funded are then included in the budget. Planning and Budget Committee makes recommendations on staffing, capital equipment, technology, facilities, professional development, and outreach for the upcoming budget year. The Superintendent/President may accept recommendations of Planning and Budget Committee and forward them on to the governing board. The College recently opened two centers. Through discussion with the Vice President of Administrative Services, the team found that creation of these centers was vetted through program review. All committees use a rubric to evaluate priorities. These priorities may go through the bond committee for building projects or other committees before the recommendations make their way to Planning and Budget Committee. (IIID.4)

**Conclusion**
The College does not fully meet the Standard, in particular Standard IIID.3.h.

Financial planning is integrated with strategic planning through the Planning and Budget Committee. (IIID.1, IIID.1.a)

The College does not meet Standard IIID.1.b. College planning does not reflect a realistic assessment of financial resource availability. The long-term use of alternating annual stability and restoration claims of FTES-based funding is neither realistic nor sustainable. Inaccurate budget assumptions misrepresent financial resource availability. (IIID.1.b)

The College does not meet Standard IIID.1.c. The College does not have a long-range plan to align annual expenditures with actual academic year FTES-earned funding. The College is not considering long-range financial stability when creating short-term annual budgets. (IIID.1.c)

The College does not meet Standard IIID.2.a. College budget documents have extensive fiscal information but contain inaccurate assumptions which misrepresent financial resource availability. Independent audits have a high degree of credibility and accuracy. (IIID.2, IIID.2.a)

College audit findings are rare and corrected immediately. (IIID.2.b) Appropriate financial information is provided in a timely manner. (IIID.2.c) All financial resources, including short and long-term debt and College Foundation funds, are used with integrity and in compliance with restrictions on the use of such funds. (IIID.2.d) The College has strong internal controls and audit findings are corrected immediately to strengthen the ongoing use of such controls. (IIID.2.e)
Although the College has experienced negative cash flow in the last two years, a combination of reserves and low interest borrowing have enabled the College to maintain stability and avoid fiscal emergencies. (IIID.3, IIID.3.a) The College provides effective oversight of College and Foundation finances including financial aid, grants, categorical programs, and institutional investments. (IIID.3.b) The College plans for and allocates appropriate resources for the payment of liabilities, specifically Other Post-Employment Benefits obligation. The team suggests that the College secure this resource in an irrevocable trust. (IIID.3.c)

The College has a current actuarial study of the OBEP obligation which contains the planned contribution to meet appropriate accounting standards. (IIID.3.d) General obligation bonds issued by the College are repaid on an established schedule through secure local property tax increments, and energy projects are paid through utility cost savings. (IIID.3.e) The College monitors and manages student loan default rates and is in compliance with federal requirements. (IIID.3.f) Contracts with external entities are reviewed by the College for appropriateness to the mission of the College, and such contracts are executed by management to assure required compliance. (IIID.3.g)

The College does not meet Standard IIID.3.h. Although the College has strong internal controls, no documentation was provided of evaluation of financial management practices. (IIID.3.h)

Financial resource planning is integrated with institutional planning through a process that leads from program review through the Planning and Budget Committee to the governing board. The Planning and Budget Committee regularly discusses the process and makes improvements. (IIID.4)

**Recommendations**

**See Recommendation 1. Review and Evaluation Mechanisms** (IIID.3.h)
Standard IV — Leadership and Governance
Standard IVA — Decision-Making Roles and Processes

General Observations
Institutional leaders have established policies and procedures regarding participatory governance. Board Policies, Administrative Procedures, and governance documents, define the roles of faculty, staff, administrators, and students in decision-making processes. Written guidelines describe the manner in which an individual’s ideas are brought forward to constituency groups and moved through the appropriate governance committee structures and processes. The faculty and Academic Senate, through its Curriculum Committee, and faculty administrators make recommendations on student learning programs and services. Through the established participatory governance committee structure, ideas are discussed and information is disseminated to all constituent groups. The College has various mechanisms to establish and maintain relationships with external agencies and compliance with Accrediting Commission Standards.

Findings and Evidence
Through review of documents and interviews with campus leaders, the team verified that the College’s mission, vision, values, and goals and objectives are reviewed at the annual planning retreat, which includes representatives from all constituent groups and committees as well as governing board members. The low turnover over the past six years in permanent faculty and staff provides evidence of participant satisfaction with the institution. The Fall 2013 Full-Time Employee Survey provided key evidence that full-time employees have ample opportunity to participate in institutional decision-making, including long-term planning, budget, and mission. Of the respondents, seventy-three percent indicated that they have sufficient opportunity to participate in dialogue about the improvement of student learning. Through discussions with senior administrators and with Academic Senate leaders, the team found that both groups recognize the importance of the contributions of adjunct faculty in the participatory governance process. Review of minutes showed that every participatory governance committee contains a designated number of faculty slots. These slots may be filled by either full-time or adjunct faculty, so adjuncts have the opportunity to participate in the processes of the governance structure of the College. The processes for goal assessment and revision are based upon a participatory governance model. Interviews with the constituent leaders indicate that this is the case. Individuals or constituency leaders bring forward ideas through the participatory governance process. Board Policy 213 defines the roles of constituent groups in the participatory governance process, establishing that faculty, staff, and student have roles in College governance. Minutes from committee meetings and interviews with constituent leaders confirm that constituent groups are represented on all governance committees. (IVA.1)

Board Policy 213 addresses the governing board’s commitment to ensuring that participatory governance practices are followed at the College. Administrative Procedure 213.1 defines the role of each constituent group in the participatory governance process and reinforces the purpose of participatory governance in bettering the educational opportunities of students. Administrative Procedure 213.1 also establishes committee representation, ensuring the right of the Academic and Classified Senates and Student Senate to appoint representatives to governance committees. The Planning and Budget Committee has established and approved “Guidelines for Effective Participation in College Governance,” which describes the roles and responsibilities of constituent groups in participatory governance at the College. Through interviews with a cross-section of administrators,
faculty, and students, the team found that these guidelines establish clearly defined and effective roles for those groups, are understood, and followed with reasonable consistency. (IVA.2, IVA.2.a)

Administrative Procedure 213.1 documents the primacy of the faculty in developing curricula, establishing degree and certificate requirements, and setting grading policies. Board Policy 402 ensures the Academic Senate’s responsibility in recommending curricula to the governing board through the Curriculum Committee. The Educational Action Plan Committee has developed a document entitled Program Management Guidelines for assessing and making recommendations about current programs. This committee forms Program Advisory Teams to assess the feasibility of new program proposals and makes recommendations about program discontinuance. Through interviews with academic administrators and faculty leaders, the team found that these policies and procedures are well understood, followed with reasonable consistency, and result in recommendations upon which the College relies. (IVA.2.b)

Administrative Procedure 213.1 establishes the governing board’s desire for all participants to work together for the good of the students and the institution. The written policies on committee membership and governance procedures appear in the Guidelines for Effective Participation in College Governance informing all constituent groups of their inclusion in College governance. This document specifies the number of seats for faculty, staff, students, and administrators on the committees and ensures participatory decision making. Through review of topics of discussion captured in governance committee agendas and minutes taken during discussions at governance committees, the team verified that these practices are followed with reasonable consistency by the College. The team visited meetings of key governance committees and saw a culture of openness, free discussion, and collaborative decision-making. Communication extended beyond those attending meetings through posting of agendas and minutes on the College Portal. The Portal is a repository for information where announcements, agendas and minutes, and program review documents are posted. Through discussion with many faculty, staff, and administrators across campus, the team verified that there are also onsite opportunities for the dissemination of information to all on campus. In-service days and budget forums are two examples of meetings in which staff are informed and invited to participate in decision making at the College. Dialogue was frequently cited by constituent members as the basis for decision making. (IVA.3)

Past responses to accreditation recommendations, particularly in responding to recommendations from 2008 and in its submission of Substantive Change Reports, demonstrate the College’s intention to meet Commission Standards expeditiously. The team verified that all career technical programs have active advisory groups composed of occupational representatives from the community and those which require external accreditation are in compliance with the appropriate accrediting bodies. Documents demonstrated that federally-funded programs continue to meet requirements and receive funding and that financial aid programs are in compliance with United States Department of Education guidelines and requirements. The College communicates educational quality and institutional effectiveness by making accreditation documents available to the public through the College’s website. (IVA.4)

The team verified that governing board has instituted a regular self-evaluation and an evaluation of the President/Superintendent. The College relies upon its Office of Institutional Research to provide data in the form of surveys and other studies to evaluate its planning processes and structures, and the team
reviewed examples of some forms of available data. Still, there is little evidence of a regular, quantitative, data-driven, systematic review of College governance processes and structures. The Self-Study asserted that the Planning and Budget Committee assesses the shared governance committees, but in interviews with members of that committee, the team found that systematic assessment was indeed a goal, but had yet to be implemented. These interviews did establish that a recent revision of the College’s committee structure has led to better communication and resource allocation. (IVA.5)

Conclusion
The College does not fully meet the Standard, particularly Standard IVA.5.

The College provides an inclusive environment in which all constituent groups have a voice. (IVA.1) The governing board has implemented Board Policy 213 to ensure that faculty, staff, administrators, and students are included in the decision-making processes of the College. Approved College documents vetted by the Planning and Budget Committee, which includes representatives from all constituent groups, define participatory governance and explain how it works. (IVA.2, IVA.2.a) The College relies upon faculty, its academic senate, the curriculum committee, and academic administrators for recommendations about student learning programs and services. (IVA.2.b)

The governing board has ensured, through its administrative procedures, policies, and processes, that all constituent groups work together for the good of the institution. (IVA.3) The College complies with the Accreditation Commission and other external agencies. (IVA.4)

The College does not meet Standard (IVA.5). The College’s governance and decision-making structures and processes are not regularly evaluated. (IVA.5)

Recommendations

Recommendation 4. Evaluation of Participatory Governance Structures
In order meet the Standard, the team recommends that the College systematically evaluate its participatory governance and decision-making structures and processes to assure their integrity and effectiveness and to use them as the basis for improvement. (IVA.5)
General Observations
The Mendocino Community College District’s governing board includes seven members who are elected by geographical areas to serve a four-year term and a student member who is elected by the Associated Students of Mendocino College to serve a one-year term. Board Policy 203, Board Duties and Authority, articulates the board’s responsibility to establish policies to assure the quality, integrity, and effectiveness of the student learning programs and services and the fiscal stability of the three campuses of the district, the Ukiah main campus, Lake Center, and North County Center. Board Policy 211 and 212 delineate the process for the selection and evaluation of the Superintendent/President.

The governing board relies primarily on the advice of the academic senate as appropriate to academic and professional matters and on recommendations from the President’s Policy Advisory Committee to ensure quality, integrity and effectiveness of board policies. The College’s board policies and procedures are organized by sections, including: academic affairs, student services, business and fiscal services, and human resources. Historically, the review of board policies was initiated by administrative support in the president’s office or by regulatory changes effecting specific policies. Under the direction of the new Superintendent/President, legal counsel was engaged to assist with a thorough review of board policies and procedures beginning with those in human resources. All board policies and procedures are available on the College’s governing board web page.

Board Policy 201, Board Membership, requires that governing board members shall not hold any office that is incompatible with the duties of an independent policy-making body, including serving as an employee of the district during the term of office. Board Policy and Administrative Procedure 214 covers Conflict of Interest, and 208 deals with the Code of Ethics. Board Policy 210 describes Board Professional Development and Administrative Procedure, 201.1 contains Board Professional Development Guidelines which define the parameters for conference attendance and orientation/mentoring of new Trustees. Board Policy 208, Code of Ethics, delineates the principles to which the Trustees will adhere. This Policy was revised in May 2008 to include procedures for dealing with violations to its code of ethics.

Board members are informed of the accreditation process during the new member orientation, and also through regular presentations to the Board by the Accreditation Liaison Officer and the Student Learning Outcome Team Faculty Coordinator. In addition, the governing board reviews and approves all accreditation documents prior to submission to the Commission.

Members of the governing board participate in the annual strategic planning retreat and work with staff to review and revise the College’s strategic goals and activities for student success, student access, student engagement, resource management, and community connections. At a recent governing board workshop, an outside consultant led the board members through a process to establish overarching board priorities. These priorities provide general direction to the College.

The Superintendent/President has primary responsibility for the quality of the institution. His areas of responsibilities include planning, organizing, budgeting, and assessing institutional effectiveness. He also is responsible for selecting and developing personnel and ensuring the inclusion of all
constituency groups in the governance of the College. This responsibility includes ensuring participation of the employees at the centers. He participates in the bi-annual flex trainings at all locations and includes North County Center and Lake Center employees in constituency group meetings and on various College committees.

The Superintendent/President chairs the Planning and Budgeting Committee and participates in this committee’s dialogue regarding institutional needs and budget allocations. The Superintendent/President also chairs the Cabinet and through this body delegates appropriate authority to reporting administrators in the implementation of Board Policies and Administrative Procedures. The College maintains organizational charts that identify the reporting structure of the institution.

The Superintendent/President has developed and maintains relationships with the local community through presentations at various meetings and events and by inviting the community to utilize College facilities when appropriate. Utilization of College facilities has included Rotary, local K-12 districts, local business and industry, Mendocino Ballet, Millview Water District, and Mendocino County Health Department. In addition, local school districts have initiated field trips to College facilities including the centers. Since beginning his tenure at the College, the Superintendent/President has reached out to two student populations, Latino and Native American, which make up a large percentage of the population and have historically been underserved. The College hosts annual retreats for high school juniors and seniors in these two groups.

All administrators, faculty, and staff are encouraged to actively participate in the local communities. The Superintendent/President also stepped in temporarily to chair the Outreach and Marketing Committee which is responsible for keeping the community informed about College programs and events.

Findings and Evidence
Based on review of materials covering extensive training of the governing board on its roles and responsibilities, validation through interviews, and analysis of board evaluations, the governing board members support board decisions as a whole and defend the institution from undue pressures. (IVB.1, IVB.1.a)

The team found that the governing board has established policies which are consistent with the mission statement and adequately serve as the basis for ensuring the quality, integrity, and improvement of student learning programs and services as well as the resources necessary to support them. As evidenced by governing board minutes, the board periodically reviews and approves the College’s mission and vision statements. The governing board receives monthly reports from all constituency group leaders to remain informed about student learning programs and services and student achievement. The governing board also receives monthly financial reports from the Vice President of Administrative Services in addition to the tentative budget in June, final budget in September, and a revised budget in April. Governing board members also participate in the annual strategic planning retreat that is hosted by the Superintendent/President. (IVB.1.b)

Through review of minutes of governing board meetings, study sessions, and annual retreats, the team found that the governing board has ultimate responsibility for educational quality, legal matters, and financial integrity. Through review of governing board minutes and interviews with board members,
the team verified that the governing board sets budget parameters and holds the College accountable for maintaining a budget within those parameters. The team reviewed minutes and reports to the Citizens’ Bond Oversight Committee, whose members are appointed by the governing board, and verified that this process has ensured the financial integrity of facility bond funds. By analyzing the governing board’s annual review of the College’s goals in the Strategic Action Plan, the team found that the governing board provides sufficient direction and demonstrated concern for educational quality and financial integrity. At a recent governing board workshop, an outside consultant led the board members through a process to establish overarching board priorities. Upon completion, these priorities will inform the strategic goals and objectives that are set and reviewed at the bi-annual retreats. (IVB.1.c)

Through review of Board Policies 201 on Board Membership, 203 on Duties and Authority, 204 on Board Organization, and 205 on Meetings of the Board of Trustees, the team found that the College delineates board structure, responsibilities, and procedures. Policies and bylaws are posted on the College website and available through the Superintendent/President’s office. (IVB.1.d)

Through interviews, reviews of policies, by-laws and board minutes, the team found that the College provides evidence that the governing board acts in a manner consistent with its policies and bylaws and follows up on policies adopted by the board to ensure that they are implemented. The team reviewed the governing board’s process for revising policies. The process includes and initial vetting by the President’s Policy Advisory Committee followed by representatives sharing with their constituency groups. The policy then comes back to the President’s Policy Advisory Committee for a second reading and a discussion of the constituency groups’ comments and suggestions. Through review of minutes and interviews with those involved in this process, the team found that this process is followed with adequate consistency. Policies are then forwarded to the governing board for approval. After approval, the Superintendent/President discusses the policies and procedures with Cabinet and charges the appropriate administrator with implementation. Historically, initiation of review of policies came from staff in the President’s Office or was initiated in response to regulatory changes. The current President brought in legal counsel to assist with a thorough review of board policies and created a chart of progress documenting the review of policies. The team recognized significant work on revision of Board Policies and Administrative Procedures, but found that for some, such as Board Policy 301, Organization, the most recent revision was dated 1983. Other examples include: BP 309 Drug Free Workplace—1989; BP 312 Use of Physical Fitness Lab—2002; BP 403 Course Outline—2002; and BP 412 Contract Education—2002. Based on this evidence, the team concluded that a regular evaluation cycle for Board policies does not exist at the College. (IVB.1.e)

Through interviews and a review of Board Policy 210 and Administrative Procedure 210.1, the team documented that new Board members are provided an orientation, encouraged to participate in the Community College League of California training sessions for new board members and that all board members are encouraged to attend two major conferences annually. These documents also delineate that the student governing board member is to be mentored by the Superintendent/President, Executive Assistant to the Superintendent/President and the Board Chair. Interviews and review of board minutes verified that the board holds regular retreats and study sessions and receives presentations on major issues at these retreats and at regular board meetings. Board Policy 201, Board Membership, defines that terms of the members are staggered so that one-half of the members shall be elected in odd-numbered years. (IVB.1.f)
The team reviewed Board Policy 215, Trustee Self-Evaluation, and AP 215.1, Trustee Self-Evaluation Process, and minutes of the November 2013 board meeting to verify that the board’s self-evaluation process occurs every two years and includes feedback from each board member on his or her individual performance as well as the board as a whole. In addition, all members of the College who regularly participate in board meetings also participate in the board’s evaluation. Results of this evaluation are shared at the November Board meeting each year and become a public document. (IVB.1.g)

The team found that Board Policy 208, Board of Trustees Code of Ethics, defines principles to which governing board members are expected to adhere and includes the process for sanctioning behavior that violates the code. There were no documented occurrences of the use of such sanctioning. (IVB.1.h) Through interviews and a review of governing board agendas and minutes, the team found that board members are informed of the accreditation process during the new member orientation and also through regular presentations to the board by the Accreditation Liaison Officer and the Student Learning Outcomes Team Faculty Coordinator. In addition, the board is also informed through its reviews and approval of all accreditation documents prior to submission to the Commission. (IVB.1.i)

Board Policy 211, Chief Executive Officer Selection and Succession, and Board Policy 212, Evaluation of Superintendent/President, delineate the processes for selection and evaluation of the Superintendent/President. Board Policy 301, which has not been updated since 1983, defines the roles of the Board and of the Superintendent/President with respect to the establishment, supervision, and operation of the College. Interviews and a review of minutes of Board meetings and study sessions confirmed that both entities had received extensive training in their respective roles and how to work within those defined roles. Board members expressed confidence in the Superintendent/President’s ability to do his job. They commented on his friendly demeanor and professionalism. The board evaluates the Superintendent/President annually in the first three years and biannually after that. The evaluation process includes confidential input from board members; those positions which directly report to the Superintendent/President; the President and Vice-President of the Academic Senate, Classified Senate, the Management/Confidential group, and the Student Senate; Deans; Directors; the President of the Mendocino College Foundation; and three members each of the full-time faculty, part-time faculty, and classified staff mutually selected by the governing board president and the Superintendent/President. (IVB.1.j)

Through interviews, review of Staffing Committee, and Planning and Budget Committee minutes, as well as Board Policies 301, Organization, and 701, Employment of District Personnel, and Administrative Procedure 701.1 Selection Process – Regular Employees, the team found that the Superintendent/President has demonstrated effective leadership in planning, overseeing and evaluating the administrative structure and delegating appropriate responsibilities. All units of the College, including the Centers, participate in the program review process through which all resources are requested. In his role as Planning and Budget Committee chair, the Superintendent/President receives direct input from constituency groups and program review documents and participates in continuing dialogue about the staffing needs of the institution. If a vacancy occurs outside of the program review process, dialogue occurs at the Staffing Committee and Planning and Budget Committee to determine whether the recommendation should be made to replace the position or that organizational changes should be made in lieu of replacing that position. Through interviews and a review of job descriptions,
the team determined that the Superintendent/President has delegated authority to the other College administrators consistent with their responsibilities. (IVB.2, IVB.2.a)

In review of committee minutes and through interviews with key faculty, staff, students, and community members, the team saw clear evidence that the Superintendent/President is guiding the institutional improvement of the teaching and learning environment in accordance with the Standards prescribed by the Commission. Through his leadership on various committees, the Superintendent/President demonstrates a collaborative and collegial approach to governing the College. He supports participatory governance by ensuring that all constituency groups are represented on College governance committees as described in the Guidelines for Effective Participation in College Governance. The goals and strategic goals and activities are established through a collaborative and inclusive process at the annual strategic planning retreat which is led by the Superintendent/President. His commitment to strengthen and support the data-driven planning model already in place was demonstrated by his hiring of a permanent Director of Institutional Research, Effectiveness, and Grants. The development of this position will increase the effectiveness of the evaluation processes by ensuring utilization of data to guide decisions. As chair of the Planning and Budget Committee, the Superintendent/President ensures the linkage between planning and resource allocation and the equitable distribution of funds to achieve student learning. The Educational Master Plan, which was approved by the board in February 2010 and revised in April 2012, guides the College’s overall institutional planning efforts. (IVB.2.b)

The team found that Board Policy 207, Delegation of Authority, establishes the Superintendent/President’s responsibility for acting as the professional advisor to the Board in the development of College policies and in administering the policies adopted by the Board. Through review of minutes and interviews, the team found that the President’s Policy Advisory Committee, which includes representation from all constituency groups, is the participatory governance committee responsible for reviewing and revising board policies and administrative procedures. This committee conducts two reviews of all policy and procedure revisions prior to forwarding to the governing board for approval. In between the first and the second review, representatives consult with their constituency groups for additional feedback. The Superintendent/President reviews new policies and administrative procedures at bi-monthly Administrative Cabinet meetings and delegates authority to appropriate administrators to ensure that they are implemented. (IVB.2.c)

The Superintendent/President leads the bi-annual strategic planning retreat where constituency groups of the College evaluate progress toward and then review and revise the College’s strategic goals and activities for student success, student access, student engagement, resource management, and community connections. Through his role as the chair of the Planning and Budget Committee, the Superintendent/President ensures that budget allocations and expenditures are tied to planning and meet institutional needs. This committee meets bi-weekly to review recommendations from various College planning committees and make ultimate recommendations for allocation of resources. The Superintendent/President effectively controls budget and expenditures and is ultimately responsible for the budget of the College. Regular conversations and various venues, including the Planning and Budget Committee, regular reports to the governing board, and audit reports have assured that budget information has been disseminated district-wide. (IVB.2.d)
Through interviews and review of the Superintendent/President’s reports to the governing board, the team found that he has built goodwill and opened lines of communication with the external community through presentations to various community groups, participation in community events, and welcoming the community members to participate in College events. The Superintendent/President has also increased internal and external communication through his temporary service as the chair of the Outreach and Marketing Committee. The Superintendent/President’s monthly reports to the governing board include information about his community involvement. Program review documents include an Outreach and Recruitment Activities section that demonstrates how that program area participates in community activities and events on behalf of the College. During the past year, the governing board and the Superintendent/President have focused attention and efforts to increase the relationship between the Latino community members and the College. Interviews with governing board members identified that they recognize the growth of the Latino segment of the population and its importance to the economic future of the region. They also recognized the significant progress that the Superintendent/President has made in building trust with the Latino community and a feeling amongst them that the College is a viable option for them and for their children. (IVB.2.e)

**Conclusion**

The College meets Standard IVB.

The College’s governing board is an independent policy-making body that reflects the public interest in board activities and decisions. Once the board reaches a decision, it acts as a whole. It advocates for and defends the institution and protects it from undue influence or pressure. (IVB.1, IVB.1.a) The governing board establishes policies consistent with the mission statement to ensure the quality, integrity, and improvement of student learning programs and services and the resources necessary to support them. (IVB.1.b) The College’s governing board has ultimate responsibility for educational quality, legal matters, and financial integrity. (IVB.1.c) The institution publishes the governing board bylaws and policies specifying the board’s size, duties, responsibilities, structure, and operating procedures. (IVB.1.d)

Work has begun for the board to regularly evaluate its policies and practices. (IVB.1.e) The College has established a program for governing board development and new member orientation. It has a mechanism for providing for continuity of board membership through staggered terms of office. (IVB.1.f) The governing board’s self-evaluation process for assessing board performance is clearly defined, implemented, and published in Board Policy 215 and Administrative Procedure 215.1. (IVB.1.g) The governing board has a code of ethics that includes a clearly defined policy for dealing with behavior that violates its code. (IVB.1.h) The governing board is informed about and involved in the accreditation process. (IVB.1.i) The governing board has the responsibility for selecting and evaluating the Superintendent/President. The governing board delegates full responsibility and authority to him/her to implement and administer board policies without board interference and holds him accountable for the operation of the College. (IVB.1.j)

The Superintendent/President plans, oversees, and evaluates the administrative structure which is organized and staffed to reflect the College’s purposes, size, and complexity. He delegates authority to administrators and others consistent with their responsibilities, as appropriate. (IVB.2, IVB.2.a) The Superintendent/President guides institutional improvement of the teaching and learning environment by establishing a collegial process that sets values, goals, and priorities; ensuring that evaluation and
planning rely on high quality research and analysis on external and internal conditions; ensuring that educational planning is integrated with resource planning and distribution to achieve student learning outcomes; and establishing procedures to evaluate overall institutional planning and implementation efforts. (IVB.2.b) The Superintendent/President assures the implementation of statutes, regulations, and governing board policies and assures that institutional practices are consistent with institutional mission and policies. (IVB.2.c) The Superintendent/President effectively controls the budget and expenditures. (IVB.2.d) The Superintendent/President works and communicates effectively with the communities served by the institution. (IVB.2.e)

**Recommendation**

None