

Follow-Up Visit Report

MONTEREY PENINSULA COLLEGE

980 Freemont
Monterey, CA 93940

This Report represents the findings of the evaluation team that visited
Monterey Peninsula College on April 9, 2018

Submitted to:

The Accrediting Commission for Community and Junior Colleges

Submitted by:

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DATE: May 1, 2018

TO: Accrediting Commission for Community and Junior Colleges

FROM: Dr. Sandra Caldwell, Team Chair

SUBJECT: Report of Follow-Up Visit to Monterey Peninsula College, April 9, 2018

Introduction:

An evaluation team visit was conducted to Monterey Peninsula College in October 2016. At its meeting of January 11-13, 2017, the Commission acted to issue Probation and require the College to submit a Follow-Up Report in March 2018 followed by a visit of an external evaluation team. The evaluation team conducted the Follow-Up visit to Monterey Peninsula College on April 9, 2018.

The purpose of the visit was to verify that the Follow-Up Report prepared by the College was accurate through the examination of evidence, to determine if sustained, continuous, and positive improvements had been made at the institution, and that the institution has addressed the recommendations made by the evaluation team, resolved the deficiencies noted in those recommendations, and meets the Eligibility Requirements, Accreditation Standards and Commission Policies (together Commission's Standards).

In general, the team found that the college had prepared carefully for the visit by arranging for meetings with the individuals and groups agreed upon earlier with the team chair and by assembling appropriate documents for the use of the team. Over the course of the day, the team met with the President of the College, Vice President of Instruction, Vice President of Student Services, Vice President of Administrative Services, Vice President Advancement, President's Executive Cabinet, Planning Research and Institutional Effectiveness (PRIE) Dean, Dean of Student Services-Marina, Associate Dean of Human Resources, Director of Student Success & Equity, Director of Research, Associate Researcher, Director of Information Systems, Controller, Academic Senate President, faculty co-chairs and members of the Learning Assessment Committee (LAC), and faculty co-chair of the Planning Research and Institutional Effectiveness (PRIE).

The Follow-Up Report and Visit were expected to document resolution of the following recommendations:

Recommendation 1: In order to meet the Standards, the team recommends the College completes the implementation of TracDat and begin to assess learning outcomes for all instructional programs and student and learning support services as well as disaggregating and analyzing learning outcomes and achievement data for subpopulations of students, and when the institution identifies performance gaps, implement strategies to mitigate those gaps and evaluate the efficacy of those strategies. (Standards I.B.2, II.A.11, ER 11)

Recommendation 2: In order to meet the Standards, the team recommends the College develop a process and calendar to assess College's progress and planning processes in a timely manner. (Standards I.B.2, I.B.7, II.A.1, II.A.3, IV.A.6, ER 9, ER 11)

Recommendation 3: In order to meet the Standards, the team recommends the College attain the sustainability level per the ACCJC rubric for Student Learning Outcomes (SLO) assessment by raising the percentage of courses for which SLOs have been evaluated and increasing the percentage of programs that have had PLOs assessed. To do so, the team recommends that the College complete the implementation of their planning and outcomes assessment software as identified by their QFE1 and begin to assess learning outcomes for all instructional programs and student and learning support services as well as disaggregating and analyzing learning outcomes and achievement data for subpopulation of students. (Standards I.B.2, I.B.6, I.C.1, I.C.3, II.A.3, II.A.11, ER 11)

Recommendation 4: In order to meet the Standards, the College needs to engage in continuous, broad-based, systematic evaluation, and planning. The institution needs to integrate program review, planning, and resource prioritization and allocation into a comprehensive process that leads to accomplishment of its mission and improvement of institutional effectiveness and academic quality. Institutional planning needs to be linked to short-range and long-range needs based on assessment of student learning and student achievement data. (Standards I.B.2, I.B.4, I.B.7, I.B.9, I.C.3, II.A.1, II.A.3, III.D.2, IV.A.6, IV.B.3, ER 11, and ER19)

Recommendation 5: In order to meet the Standard, the team recommends the College develop a process to ensure student complaints can be logged, resolved, reviewed, and analyzed for improvement. (Standard I.C.8)

Recommendation 8: In order to meet the Standards, the team recommends the College conduct regularly scheduled library surveys of all students and faculty, regardless of location, in order to gauge user satisfaction, knowledge of services, behavior and experience, and to use the results as the basis for improvement. (Standards II.B.1, II.B.3)

Recommendation 9: In order to meet the Standards, the team recommends the College improve its evaluation process of student support and learning services to include discussion of services offered at all centers and for distance education based on robust Service Area Outcomes and SLO assessments that lead to quality improvement of student support programs and services in support of the College's mission. (Standards II.C.1, II.C.2)

Recommendation 13: In order to meet the Standards, the team recommends that the College create a Human Resources staffing plan to ensure that staffing levels and assignments for faculty, staff and administrators are sufficient and appropriately distributed to support the institution's mission and purpose and are interwoven into a larger integrated planning process of the college. (Standards III.A.9, III.A.10, and ER8)

Recommendation 14: In order to meet the Standards, the team recommends the College regularly and consistently conduct employee evaluations for all employee groups. The team

further recommends that faculty, academic administrators, and others directly responsible for student learning have, as a component of their evaluation, consideration of how these employees use the results of learning outcomes assessment to improve teaching and learning. (Standards III.A.5 and III.A.6)

Recommendation 15: In order to meet the Standard, the team recommends the College establish a review schedule of policy and procedures relevant to Human Resources. (Standard III.A.11, Standard III.A.12, Standard III.A.13)

Recommendation 16: In order to meet the Standards, the team recommends the College immediately address network vulnerabilities starting with implementing a firewall solution in order for the College to ensure its technology infrastructure is appropriate and adequate to support the institution's management and operational functions. (Standards III.C.1 and III.C.3)

Recommendation 17: In order to meet the Standards, the team recommends the College complete and roll out the Information Technology Disaster Preparedness/Recovery Plan in order to recover data and system functionality for the College to operate in the event of a disaster. (Standards III.C.1 and III.C.2)

Recommendation 18: In order to meet the Standards, the team recommends the College complete the revisions and implementation of all board policies. The Board should fully implement the newly adopted board policies review cycle. The College should ensure that all existing, new, and revised Board policies and administrative regulations are easily accessible through the College's website and other methods it deems appropriate for the College community and the public. (Standards III.C.5, IV.C.6, and IV.C.7)

Recommendation 19: In order to meet the Standards, the team recommends the College discontinue deficit spending by adopting budgets that match ongoing revenue and expenditures in the unrestricted general fund without the need to make significant draws against the unrestricted fund balance, one-time resources, or transfers from other funds. (Standards III.D.1, III.D.11, ER 18)

Recommendation 20: In order to meet the Standard, the team recommends that the College develop a funding plan and set aside funds in each year's budget to fund the Other Post-Employment Benefits (OPEB) annual required contribution (ARC) each year. (Standard III.D.12)

Recommendation 21: In order to meet the Standard, the team recommends the College clarify Board, administrators, classified and faculty roles in the decision-making process and routinely evaluate and monitor these roles. These roles are not distinctly differentiated at the faculty level between Academic Senate and the faculty bargaining unit's role in participatory governance and labor relations. (Standard IV.A.6)

Recommendation 22: In order to meet the Standard, the team recommends that the College develop a calendar to regularly evaluate its policies, procedures, and processes to assure their integrity and effectiveness. (Standard IV.A.7)

Team Analysis of Responses to the 2016 Evaluation Team College Recommendations:

Recommendation 1: In order to meet the Standards, the team recommends the College completes the implementation of TracDat and begin to assess learning outcomes for all instructional programs and student and learning support services as well as disaggregating and analyzing learning outcomes and achievement data for subpopulations of students, and when the institution identifies performance gaps, implement strategies to mitigate those gaps and evaluate the efficacy of those strategies. (Standards I.B.2, II.A.11, ER 11)

Findings and Evidence: The College has completed the implementation of TracDat and has done a tremendous job of assessing learning outcomes for instructional programs and student and learning support services. Evidence provided by the college indicated that 90% of active courses have been assessed, 100% of instructional programs have been assessed, and 100% of student support services have been assessed. The assessment cycle calendar (two years for courses, with program assessment occurring in the 5th year and program review in the 6th year) ensures that assessment is linked to program review.

The College should be commended for the tremendous job of updating the curriculum to reduce the number of active courses in Catalog that were either have not been assessed or have not been offered. The newly implemented Office of Planning, Research, and Institutional Effectiveness has been working collaborative with LAC and PRIE Committee to develop various processes to ensure that College is in compliance of accreditation standard and engaging in continuous outcomes assessment.

With the implementation of Power BI, the College has started the work on disaggregating and analyzing achievement data for subpopulation of students. Use of data is reflected in the Data review work sheet provided by Dean of PRIE. The Office of PRIE has also developed an evaluation instrument developed designed to help departments identify and mitigate disproportionate impact. The College is working on the process of disaggregating learning outcomes and currently assessing Canvas module to do so.

Through the work of Equity, the College has been working to implement strategies to mitigate those gaps. To ensure continuous engagement, office of PRIE and Dean of PRIE provides support in forms of workshop and meetings and other interactions to help the campus understand and interpret data.

Conclusion: Through robust collaboration, intensive college-wide discussion, institutional buy-in from faculty, staff, and administration, the College has completed the implementation of TracDat and assessed 100 percent of pSLOs and SAOs (Service Area Outcomes), iSLOs, and 90% of course SLOs. The College is able to disaggregate student achievement data through the use of Power BI and have developed data reflection questions to facilitate conversations about identifying and mitigating disproportionate impact. The College is evaluating the use of Canvas for disaggregating student learning outcomes through “Gradebook module.” The College has addressed the recommendation and now in full compliance of the standards.

Recommendation 2: In order to meet the Standards, the team recommends the College develop a process and calendar to assess College's progress and planning processes in a timely manner. (Standards I.B.2, I.B.7, II.A.1, II.A.3, IV.A.6, ER 9, ER 11)

Findings and Evidence: Through a series of interviews and an examination of evidence, the Team verified that the College has developed a process and a calendar to assess its planning processes. The new Office of Planning, Research, and Institutional Effectiveness, including a newly hired dean and support staff, is responsible for oversight of planning processes. The newly created participatory governance Planning, Research, and Institutional Effectiveness (PRIE) committee developed a 10-year planning and evaluation calendar timeline that allows for regular and coordinated review of planning processes. The PRIE committee is continuing to refine the assessment process and calendar, including aligning the timeline with the budget calendar to support the prioritization of resource requests. The College developed new evaluation tools (Readiness Checklist, Process Evaluation Survey, Progress Evaluation Questions) to allow for ongoing assessment of processes. The Team reviewed documentation showing that the new surveys have been used to improve processes, including the updating of the Technology Plan. The recently approved Resource Guide to Institutional Decision Making and the draft Integrated Planning Handbook, to be approved in spring 2018, define these new planning processes and describe how the College will engage in ongoing assessment.

Conclusion: The College has a process and calendar that will enable it to assess its planning processes on an ongoing basis. The College has satisfied the recommendation and meets the standards.

Recommendation 3: In order to meet the Standards, the team recommends the College attain the sustainability level per the ACCJC rubric for Student Learning Outcomes (SLO) assessment by raising the percentage of courses for which SLOs have been evaluated and increasing the percentage of programs that have had PLOs assessed. To do so, the team recommends that the College complete the implementation of their planning and outcomes assessment software as identified by their QFE1 and begin to assess learning outcomes for all instructional programs and student and learning support services as well as disaggregating and analyzing learning outcomes and achievement data for subpopulation of students. (Standards I.B.2, I.B.6, I.C.1, I.C.3, II.A.3, II.A.11, ER 11)

Findings and Evidence: The College has completed the implementation of TracDat and has done a tremendous job of assessing learning outcomes for instructional programs and student and learning support services. By mapping course SLOs to program SLOs, the College is able to simultaneously assess pSLOs through cSLOs assessment. Evidence provided by the college indicated that 90% of active courses have been assessed, 100% of instructional programs have been assessed, and 100% of student support services have been assessed. The assessment cycle calendar (two years for courses, with program assessment occurring in the 5th year and program review in the 6th year) ensures that assessment is linked to program review.

The College should be commended for the tremendous job of updating the curriculum to reduce the number of active courses in Catalog that were either have not been assessed or have not been offered. The newly implemented Office of Planning, Research, and Institutional Effectiveness

has been working collaborative with LAC and PRIE Committee to develop various processes to ensure that College is in compliance of accreditation standard and engaging in continuous outcomes assessment.

With the implementation of Power BI, the College has started the work on disaggregating and analyzing achievement data for subpopulation of students. Use of data is reflected in the Data review work sheet provided by Dean of PRIE. The Office of PRIE has also developed an evaluation instrument developed designed to help departments identify and mitigate disproportionate impact. The College is working on the process of disaggregating learning outcomes and currently assessing Canvas module to do so.

Conclusion: The College has implemented TracDat and with mapping of course SLOs to Program SLOs, the College has attained sustainability level per ACCJC rubric for Student Learning Outcomes. Evidence provided by the College shows it has assessed 100 percent of pSLOs and SAOs (Service Area Outcomes), iSLOs, and 90% of course SLOs. The College is able to disaggregate student achievement data through the use of Power BI and have developed data reflection questions to facilitate conversations about identifying and mitigating disproportionate impact. The College is evaluating the use of Canvas for disaggregating student learning outcomes through “Gradebook module.” The College has addressed the recommendation and now in full compliance of the standard.

Recommendation 4: In order to meet the Standards, the College needs to engage in continuous, broad-based, systematic evaluation, and planning. The institution needs to integrate program review, planning, and resource prioritization and allocation into a comprehensive process that leads to accomplishment of its mission and improvement of institutional effectiveness and academic quality. Institutional planning needs to be linked to short-range and long-range needs based on assessment of student learning and student achievement data. (Standards I.B.2, I.B.4, I.B.7, I.B.9, I.C.3, II.A.1, II.A.3, III.D.2, IV.A.6, IV.B.3, ER 11, and ER19)

Findings and Evidence: Through a series of interviews and examination of evidence, the Team verified that the College has begun to engage in evaluation and planning using a recently refined integrated planning process of program review, planning, and resource prioritization. To support its integrated planning efforts, the College created the Office of Planning, Research and Institutional Effectiveness and hired new positions to support the College in decision-making and implementation. A new Planning, Research and Institutional Effectiveness (PRIE) committee and re-formed Learning Assessment Committee (LAC) also help the College support its integrated planning efforts.

The PRIE Committee developed a new integrated planning model, which is described in the draft Integrated Planning Handbook. In the program review cycle, programs are required to review data; identify achievement gaps in a Data Review and Reflection document; and update previous goals, create new goals, and prioritize resource requests in an online Annual Program Review Update. College-wide prioritization of resource requests occurs through units, deans, and the Cabinet. Faculty and staff hiring prioritizations occur separately in advisory groups. The College has taken a number of steps to support the program review process, including more robust learning outcomes assessments and new tools that provide disaggregated achievement data.

Revisions to the program review process have given the College more consistent data sources, increased transparency, and improved integration. The College has plans to further improve the process, including a rubric for resource request prioritization and a new program review interface. During the interviews the Team found that the changes to the program review process were welcomed by the College and have been beneficial, allowing for a longitudinal review of data to support the development of action plans and justify resource requests. The College constituents interviewed by the Team were well-versed in the new planning and program review processes.

In order to meet the recommendation, however, the College needs to fully implement the comprehensive process it has developed. Although the components are in place to allow the College to engage in continuous, broad-based, and systematic evaluation and planning, the planning cycle is being implemented for the first time this fiscal year. The elements of the process need to be evaluated for effectiveness and become fully institutionalized. The College needs to complete its draft Integrated Planning Handbook and determine the timeline and define who is accountable for each part of the planning process. To ensure full implementation, the outcomes of the decisions taken through the planning process need to be documented and widely communicated across the institution. The College also needs to use its evaluation cycle to determine the effectiveness of these new tools and planning processes. Upon full implementation of these processes, the College will be in a strong position to develop supporting documents required for continuous, broad-based, and systematic evaluation and planning, including the Educational Master Plan (EMP) and human resources staffing plan.

Conclusion: The College has begun to develop an evaluation and planning process. The College needs to complete the evaluation cycle and review the effectiveness of the process in order for it to become continuous, broad-based, and systematic. The College also needs to complete its Integrated Planning Handbook and supporting plans. The College has not satisfied the recommendation and does not meet the related standards.

Recommendation 5: In order to meet the Standard, the team recommends the College develop a process to ensure student complaints can be logged, resolved, reviewed, and analyzed for improvement. (Standard I.C.8)

Finding and Evidence: The College has updated its Administrative Procedure on “Students Rights and Grievances” to include a process to address student complaints and has developed a process to ensure student complaints can be logged, resolved, reviewed and analyzed. Evidence from follow-up report and interview with MPC’s VP of Student Services confirmed that the College has developed a “student complaint log,” a “student complaint form” and established the VPSS as the responsible administrator of maintaining a “Student Complaint Log.” In discussion with the VPSS, he indicated that the College’s process to resolve student complaints start at the lowest level with students trying to resolve with the department, then escalate to appropriate divisional dean, and then appropriate vice-president. For every case, VPSS will circle back to ensure that student complaints have been resolved. The VPSS also regularly reviews student complaints and grievances to identify any pattern in the complaints and report such patterns to the appropriate vice president. Based on analysis of complaints from 2010 to 2016, there is no pattern that suggest a systemic problem with the College or with quality of services.

Conclusion: The College has updated its AP on “Students Rights and Grievances,” developed a “student complaint form” and “student complaint log” and analyzed the log for improvement. The College has addressed the recommendation and now in full compliance of the standard.

Recommendation 8: In order to meet the Standards, the team recommends the College conduct regularly scheduled library surveys of all students and faculty, regardless of location, in order to gauge user satisfaction, knowledge of services, behavior and experience, and to use the results as the basis for improvement. (Standards II.B.1, II.B.3)

Finding and Evidence: The College developed and administered a series of surveys to gather input from students, faculty, staff, and community members. The College utilized survey results to inform Library’s “Program Reflections: and have made many changes to library services. The College has expanded the Library Hours effective of Fall 2017, increased IT support in the Library during peak times, and evaluating furniture replacement as well as mounted power/USB charging stations. Evidence from master College survey calendar indicates that the College will regularly conduct library surveys to gauge user satisfaction, knowledge of services, and to use the results for improvements.

Conclusion: The College conducted a series of surveys to students, faculty, staff, and community users and have utilized survey results to make significant changes to Library operations. The College has addressed the recommendation and is now in compliance of the standard.

Recommendation 9: In order to meet the Standards, the team recommends the College improve its evaluation process of student support and learning services to include discussion of services offered at all centers and for distance education based on robust Service Area Outcomes and SLO assessments that lead to quality improvement of student support programs and services in support of the College’s mission. (Standards II.C.1, II.C.2)

Findings and Evidence: Through a series of interviews and examination of evidence, the Team verified that the College uses service area outcomes and student learning outcomes assessments to improve its student support and learning support services. The revised program review process allows for discussion, evaluation, and improvement of the College’s two offsite locations (Education Center at Marina and Public Safety Training Center in Seaside) and distance education offerings.

The Education Center at Marina and Public Safety Training Center in Seaside programs engage in separate program reviews using student survey data and disaggregated learning support outcomes and student achievement data to allow the programs to assess the quality of its student support and learning support services. 100% of the service area outcomes for these programs have been assessed. Library and student support surveys are disaggregated by location and modality, and the centers are required to interpret the data in program review and use the assessment to develop action plans and request resources.

Disciplines assess their distance education courses through the newly revised program review process. Programs offering distance education courses use disaggregated learning support outcomes and student achievement data to allow them to assess the quality of support services. Additionally, the Online Education Committee is tasked with making recommendations regarding online student support services.

The Team found evidence that there has been broad discussion regarding service area outcomes and numerous actions were taken to improve services at the offsite centers. Oversight of the two off-campus centers moved from Academic Affairs to Student Services and the College hired a new onsite dean and a computer tech for the Education Center at Marina. At both locations the College redesigned and remodeled the facilities, increased promotion of services and resources for students, upgraded food options, improved communication with faculty, and added counselors, health, and financial services.

Conclusion: The College has improved its evaluation processes for student support and learning support services. Assessment and evaluation of the Education Center at Marina and Public Safety Training Center in Seaside, as well as for distance education, have led to quality improvement of student support programs and services in these areas. The College has satisfied the recommendation and meets all related standards.

Recommendation 13: In order to meet the Standards, the team recommends that the College create a Human Resources staffing plan to ensure that staffing levels and assignments for faculty, staff and administrators are sufficient and appropriately distributed to support the institution's mission and purpose and are interwoven into a larger integrated planning process of the college. (Standards III.A.9, III.A.10, and ER8)

Findings and Evidence: The College has made significant progress towards meeting their staffing needs to be sufficient and appropriately distributed to support the institution's mission. The College conducted research of other colleges' human resources staffing plans similar to their college and contracted the assistance of Collaborative Brain Trust Consulting Firm (CBT) to study the staffing levels of educational administrators, tenure and tenure-track faculty, academic temporary faculty, classified managers and supervisors, classified staff, and classified confidential staff at Monterey Peninsula College and at comparison colleges over the past five academic years -- from 2012-13 to 2016-17. This research helped to guide them in the evaluation of their current staffing and the restructure and hiring of multiple positions, including high-level administrative staff positions. Additionally, the soon-to-be adopted Integrated Planning Model has interwoven staffing needs among the resource requests and requests will be prioritized in consideration of resource allocations.

Although the College has not yet created their own Human Resources staffing plan, the comparative study will provide the foundational information for the plan., the college will be considering several external factors, which include the Chancellor's Office *Vision for Success* released in fall 2017 and the Governor's proposed budget with the new funding formula scheduled to go into effect in July 2018. These external factors will need to be incorporated in the College's next Educational Master Plan, which will determine the final staffing plan and other plans, such as the facilities plan, at the College.

Conclusion: Through collaborative research, assistance of CBT studies, and development of an Integrated Planning Model, the college has made significant progress in restructuring and hiring positions sufficient and appropriated distributed to support the institution's mission, they have not yet created a Human Resource staffing plan and therefore do not meet the standard.

Recommendation 14: In order to meet the Standards, the team recommends the College regularly and consistently conduct employee evaluations for all employee groups. The team further recommends that faculty, academic administrators, and others directly responsible for student learning have, as a component of their evaluation, consideration of how these employees use the results of learning outcomes assessment to improve teaching and learning. (Standards III.A.5 and III.A.6)

Findings and Evidence: The College has established a tracking system to initiate and monitor the regular and consistent completion of employee evaluations for all employee groups. The Office of Human Resources (HR) provides email notification to the appropriate faculty or staff member and to the responsible Administrator of the need for an evaluation to be completed tracking system. This notification occurs at the start of the evaluation process and includes the timeline of the evaluation process for that specific employee group. The Office of HR staff track progress during the evaluation cycle using excel spreadsheets and providing notification to the appropriate supervisor in the event of any delinquent evaluation. Completed evaluations were at or close to 100% for all employee groups at the time of the follow-up visit.

Additionally, the soon-to-be adopted Integrated Planning Model has interwoven staffing needs among the resource requests and requests will be prioritized in consideration of resource allocations. The College has integrated assessment and program review in the process, which now includes relevant data including student achievement data and outcomes assessment results for appropriate faculty and administrators, in consideration of how these employees use the results of learning outcomes assessment to improve teaching and learning.

Conclusions: Through collaboration with the management team and the Division Chairs, the Office of Human Resources has established processes and tracking mechanisms for the College to regularly and consistently conduct employee evaluations for all employee groups. They have successfully completed nearly 100% of employee evaluations for all employee groups. Additionally, the College has included a component of the evaluation for faculty, academic administrators, and others directly responsible for student learning, to address how the employee has used student learning outcomes assessment to improve teaching and learning. The College has satisfied this recommendation and meets the standard.

Recommendation 15: In order to meet the Standard, the team recommends the College establish a review schedule of policy and procedures relevant to Human Resources. (Standard III.A.11, Standard III.A.12, Standard III.A.13)

Findings and Evidence: The college cabinet reviewed and updated the Administrative Procedure 2410 on the review schedule of all board policies and procedures, including those relevant to Human Resources. Board polices relevant to Human Resources have been updated

based on the templates provided by the Community College League of California (CCLC). The relevant BP 2410 and AP 2410 are current and posted to the College website.

Conclusions: Through review of the evidence of the college website, the College has established a review schedule of policy and procedures relevant to Human Resources and related Board Policy 2410 and Administrative Procedure 2410 have been updated and are posted. The recommendation has been met and the College fully meets this standard.

Recommendation 16: In order to meet the Standards, the team recommends the College immediately address network vulnerabilities starting with implementing a firewall solution in order for the College to ensure its technology infrastructure is appropriate and adequate to support the institution's management and operational functions. (Standards III.C.1 and III.C.3)

Findings and Evidence: The College Director of Information Services considered proposals from several vendors to address network vulnerabilities starting with implementing a firewall solution in order for the College to ensure its technology infrastructure is appropriate and adequate to support the institution's management and operational functions. Upon completion of this research, the College selected Dimension Data as the vendor to design and implement the firewall solution, which includes a real-time threat monitoring and enhanced management features. The successful implementation of the firewall solution was completed with the assistance of the College Network Team.

Conclusions: After review of evidence provided, the College has addressed their network vulnerabilities including the implementation a firewall solution in order for the College to ensure its technology infrastructure is appropriate and adequate to support the institution's management and operational functions. The College has fully satisfied this recommendation and meets all related standards.

Recommendation 17: In order to meet the Standards, the team recommends the College complete and roll out the Information Technology Disaster Preparedness/Recovery Plan in order to recover data and system functionality for the College to operate in the event of a disaster. (Standards III.C.1 and III.C.2)

Findings and Evidence: The College Technology Committee and the Information Technology Department met and drafted an Information Technology Disaster Preparedness/Recovery Plan in order to recover data and system functionality for the College to operate in the event of a disaster in Fall, 2016. This draft plan was reviewed and endorsed through participatory governance prior to being adopted by the College in spring 2017. This plan was presented to the Board of Trustees (BOT) in March, 2017 as an addendum to the 2016-19 Technology Plan of the College. As evidenced in meeting minutes, the College has incorporated processes to be reviewed and updated periodically.

Conclusions: After reviewing evidence provided by the College in meeting agendas and minutes and BOT minutes, the College has completed and fully rolled out an Information Technology Disaster Preparedness/Recovery Plan in order to recover data and system

functionality for the College to operate in the event of a disaster. The College has satisfied this recommendation and meets all related standards.

Recommendation 18: In order to meet the Standards, the team recommends the College complete the revisions and implementation of all board policies. The Board should fully implement the newly adopted board policies review cycle. The College should ensure that all existing, new, and revised Board policies and administrative regulations are easily accessible through the College's website and other methods it deems appropriate for the College community and the public. (Standards III.C.5, IV.C.6, and IV.C.7)

Findings and Evidence: The college cabinet reviewed and updated the Administrative Procedure 2410 on the review schedule of all board policies and procedures. Board policies have been updated or are scheduled for update based on the templates provided by the Community College League of California (CCLC). The relevant BP 2410 and AP 2410 are current and posted to the College website.

Conclusions: Through review of the evidence of the college website, the College has established a review schedule of policy and procedures and related Board Policy 2410 and Administrative Procedure 2410 have been updated and are posted. The recommendation has been met and the College fully meets this standard.

Recommendation 19: In order to meet the Standards, the team recommends the College discontinue deficit spending by adopting budgets that match ongoing revenue and expenditures in the unrestricted general fund without the need to make significant draws against the unrestricted fund balance, one-time resources, or transfers from other funds. (Standards III.D.1, III.D.11, ER 18)

Findings and Evidence: The College has made significant progress to discontinue deficit spending by adopting budgets that match ongoing revenue and expenditures in the unrestricted general fund without the need to make significant draws against the unrestricted fund balance, one-time resources, or transfers from other funds. Through college-wide efforts and collaborative review and evaluation of ongoing revenues and ongoing expenses, the College developed a balanced budget for the 2017-18 tentative budget. The College took bold action to reduce expenses and become more efficient in enrollment enhancements and FTES generation, as evidenced in review of 2017-18 Tentative and Final budgets and in subsequent progress reports to the Board. Although the college has been successful in submitting a balance unrestricted general fund budget for 2017-18, the team cautions the College that in interviews with constituents regarding ERP, technology, human resources staffing and facilities maintenance indicates that the use of one-time resources may be necessary to meet the needs of the College; therefore, the sustainability of a balance budget without the need to make draws against the unrestricted fund balance, one-time resources, or transfers from other funds may be difficult.

Conclusions: Through evidence of collaborative college-wide efforts in evaluating necessary expenditures and engaging in deliberate enrollment management efforts, the College has discontinued deficit spending by adopting budgets that match ongoing revenue and expenditures in the unrestricted general fund without the need to make significant draws against the unrestricted fund balance, one-time resources, or transfers from other funds. The College has

satisfied this recommendation; however, the team cautions the College that sustainability of these efforts may be difficult, as they continue to maintain the needs of human, technology and facilities related resources.

Recommendation 20: In order to meet the Standard, the team recommends that the College develop a funding plan and set aside funds in each year's budget to fund the Other Post-Employment Benefits (OPEB) annual required contribution (ARC) each year. (Standard III.D.12)

Findings and Evidence: The College has taken action to develop a funding plan and set aside funds in each year's budget to fund the Other Post-Employment Benefits (OPEB) annual required contribution (ARC) each year. The Board of Trustees approved the establishment of an irrevocable trust authorizing the District's participation in the Community College League of California (CCLC) Retiree Health Benefit Program Joint Powers Authority in November 2015. Subsequently, the District established two accounts in the 2015-16 Fiscal Year to offset the liability with an outside banking institution as part of an approved Joint Powers Agreement (JPA) through the Community College League of California (CCLC). The District transferred three million dollars into a balanced investment account (irrevocable trust account) and one million dollars into an associated liquidity account. In the 2017-18 fiscal year, the District transferred an additional \$531 thousand of one-time funds into the irrevocable trust. This plan complies with Government Accounting Standards Board (GASB) rules for funding the liability and provides greater interest income to "discount" the liability. Additionally, the College is budgeting for its Annual Required Contribution (ARC) to appropriately address this long-term liability and is part of the College's institutional effectiveness goals. The District has an OPEB Unfunded Actuarial Liability of approximately \$9.2 million that is reassessed every two years to allow for any adjustments to the College's liability. A new actuarial report will be prepared in 2018 to determine a new ARC as it relates to the current employee base which has increased. The current unfunded actuarial accrued liability amortization costs produce an ARC of \$942,870. The team cautions the sustainability to fund this liability.

Conclusions: The College has developed a funding plan and set aside funds in each year's budget to fund the Other Post-Employment Benefits (OPEB) annual required contribution (ARC) at the present time and has met the recommendation and this standard. However, the team cautions the College that with the current liability and the pending actuarial report to be prepared in 2018, the sustainability of this liability could be at risk.

Recommendation 21: In order to meet the Standard, the team recommends the College clarify Board, administrators, classified and faculty roles in the decision-making process and routinely evaluate and monitor these roles. These roles are not distinctly differentiated at the faculty level between Academic Senate and the faculty bargaining unit's role in participatory governance and labor relations. (Standard IV.A.6)

Findings and Evidence: Through a series of interviews and an examination of evidence, the Team verified that the College has developed a process and a calendar to assess its planning processes. The new Office of Planning, Research, and Institutional Effectiveness, including a newly hired dean and support staff, is responsible for oversight of planning processes. The newly created participatory governance Planning, Research, and Institutional Effectiveness (PRIE)

committee developed a 10-year planning and evaluation calendar timeline that allows for regular and coordinated review of planning processes. The PRIE committee is continuing to refine the assessment process and calendar, including aligning the timeline with the budget calendar to support the prioritization of resource requests. The College developed new evaluation tools (Readiness Checklist, Process Evaluation Survey, Progress Evaluation Questions) to allow for ongoing assessment of processes. The Team reviewed documentation showing that the new surveys have been used to improve processes, including the updating of the Technology Plan. The recently approved Resource Guide to Institutional Decision Making and the draft Integrated Planning Handbook, to be approved in spring 2018, define these new planning processes and describe how the College will engage in ongoing assessment.

Conclusion: The College has clarified Board, administrators, classified and faculty roles in the decision-making process and routinely evaluate and monitor these roles. The College has satisfied the recommendation and meets the standards.

Recommendation 22: In order to meet the Standard, the team recommends that the College develop a calendar to regularly evaluate its policies, procedures, and processes to assure their integrity and effectiveness. (Standard IV.A.7)

Findings and Evidence: The college cabinet reviewed and updated the Administrative Procedure 2410 on the review schedule of all board policies and procedures. Board policies have been updated with a set schedule for review and update based on the templates provided by the Community College League of California (CCLC). The relevant BP 2410 and AP 2410 are current and posted to the College website.

Conclusions: Through review of the evidence of the college website, the College has established a review schedule of policy and procedures and related Board Policy 2410 and Administrative Procedure 2410 have been updated and are posted. The recommendation has been met and the College fully meets this standard.