

FOLLOW-UP VISIT REPORT

Sequoias Community College District
915 South Mooney Boulevard
Visalia, CA 93277

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 that visited College of the Sequoias
October 27, 2014

William H. Duncan, IV, Chair

College of the Sequoias
Visiting Team Roster
October 2014

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INTRODUCTION

INSTITUTION: College of the Sequoias

DATE OF VISIT: October 27, 2014

TEAM CHAIR: William H. Duncan, IV, Superintendent/President Sierra College

The Accrediting Commission for Community and Junior Colleges (ACCJC), Western Association of Schools and Colleges, placed College of the Sequoias (COS) on Show Cause at the Commission's January 2013 meeting, following a visit to COS by an eleven-member accreditation team in October 2012. A Show Cause visit was made by an eight-member accreditation team in November 2013, and the team found that COS had made significant progress in addressing the recommendations resulting from the 2012 visit. The Commission then acted in January 2014 to remove COS from Show Cause and place it on Warning.

A three-member accreditation team visited College of the Sequoias (COS) on October 27, 2014 to assess how well the College has addressed the remaining deficiencies in meeting Commission Standards as identified in the November 2013 Show Cause Team Report.

Prior to the visit, team members carefully read the 2014 Follow-up Report and assessed the various forms of evidence provided by the College. The team members completed written evaluations of the Follow-up Report and identified areas for further investigation.

During the visit the team met with faculty, staff, and administrators and found all constituency groups to be knowledgeable, enthusiastic, and committed to the success of the College and its students. The team also examined documents provided in the team room and in electronic format.

The team found the College to be welcoming and fully engaged in the accreditation process, and the team appreciated the work that the College has done to fully address deficiencies and prepare its Follow-up Report. The team compliments the College for its many accomplishments in responding to the recommendations of the 2012 External Evaluation Team Report and 2013 Show Cause Team Report.

RECOMMENDATIONS

2013 Recommendation 1 – Planning

In order to fully meet the Standards, the team recommends that the College follow its new Model for Integrated Planning to demonstrate the integration of institutional planning, resource allocation, implementation and re-evaluation. These processes should include appropriate participation from constituent groups and should be evaluated based upon analyses of both quantitative and qualitative data. (Standards I.B.3, III.D.1.a, III.D.1.d, III.D.4, IV.B.2.b)

2012 Recommendation 3 – Research Capacity

In order to fully comply with the Standards, the team recommends that the College increase the research capacity of the institution in order to compile and provide data to guide institutional planning and resource allocation, program review and assessment, and decision-making for institutional effectiveness. (Standards I.B.2, I.B.3, I.B.6, II.A.I.a, II.A.1.c, II.A.2.e, II.A.2.f, II.B.4, III.A, IV.B.2.b)

2012 Recommendation 7 – Evaluation of Processes

In order to meet the Standards, the team recommends that the College develop and implement a systematic evaluation of its decision-making and budget development processes and use the results of those evaluations as a basis for improvement. (Standards III.D.1.a; III.D.1.d; III.D.2.d; III.D.3; IV.A.2, IV.A.5; IV.B.1.g; IV.B.2)

INSTITUTIONAL RESPONSE TO RECOMMENDATIONS

2013 Recommendation – Planning

In order to fully meet the Standards, the team recommends that the College follow its new Model for Integrated Planning to demonstrate the integration of institutional planning, resource allocation, implementation and re-evaluation. These processes should include appropriate participation from constituent groups and should be evaluated based upon analyses of both quantitative and qualitative data. (Standards I.B.3, III.D.1.a, III.D.1.d, III.D.4, IV.B.2.b)

Findings and Evidence

In 2013, COS reorganized its planning processes and created the *College of the Sequoias (COS) Model for Integrated Planning*. One of the most notable changes observed during the 2014 Follow-Up visit was the increased campus awareness of the College's integrated planning, resource allocation, and decision-making processes.

During the 2013 Show Cause visit, the District's processes for governance, integrated planning, and resource allocation were new and had just been approved through the governance process. Since that time, there has been a tremendous amount of change regarding continuous improvement of the College's planning process.

During the site visit, the team was provided with excellent evidence that the College has an annual planning process that incorporates systematic evaluation of programs and services, improvement planning, linkages to budgeting, and reevaluation following implementation.

The primary institutional processes, which have been calendared for the next 10 years, are initiated annually and demonstrate a conscious and systematic effort to organizationally support student learning. The cycle begins with a review of the District Master Plan goals and the College's mission statement, which forms the foundation for planning at COS. The District Strategic Plan is reviewed annually with a report to the community on the status of each objective including the key actions taken to reach the District objective. The Strategic Plan assigns responsibility, accountability, and target completion dates for each District objective.

Individual instructional, student service, and administrative unit program reviews follow in spring of every year in which units are asked to describe how the unit will contribute to the achievement of the District objectives, identify strengths and improvements needed, and the opportunities and challenges of the unit. Each unit also reports on outcome results (course, service area, program, and institutional), prior year actions, and changes made based on outcome achievements. Next, each unit creates new actions and identifies the resources needed for each action with linkages to the District objectives.

Program review includes an analysis of unit-specific data supplied by the Office of Research, Planning and Institutional Effectiveness. Three years of standard achievement data (awards, completion, and course success rates) are provided to each unit in February of every year.

Any additional quantitative or qualitative data that is easy to interpret may also be requested online by faculty and staff. Because the 2013-2014 academic year was the first complete cycle for the annual program review process, the College will evaluate the actions in 2015 to see how well they have been met.

After program review is completed, the prioritized program needs as identified by each unit are forwarded to the dean and then the appropriate service area. The Board of Trustees determines the amount of above-base funds available in any given fiscal year. For the past two years, the allocation has been \$200,000 for above-base funding requests. These funding requests for staffing, equipment, technology, and equipment are prioritized at the service area level (Instructional Council, Student Services Council, Administrative Services, and the President's Office) and submitted as a prioritized list to the Budget Committee, who forwards any technology requests to the Technology Committee. Prior to forwarding the finalized list to the Superintendent/President, the District Governance Senate reviews the list and determines if the request can be funded from another funding source such as grants, Perkins funds, or other partnerships.

Once above-base funding is granted, the requestor must submit an assessment to the Budget Committee a year later regarding what the resource allocation accomplished and the measureable outcomes achieved. At the time of the site visit, the team was able to review some of these assessments that had been turned in prior to the October 31st deadline.

The team found evidence that the College has developed and implemented ongoing, systematic, college-wide processes that have been evaluated to determine the effectiveness of its program review and planning systems. With the evaluation of the prior year actions in 2015, COS will have aligned the program review cycle and the annual planning and budget cycles to ensure that planning and resource allocations are data-driven and based upon annual outcomes measures.

Conclusion

Based upon a review of the evidence and interviews conducted, the visiting team was able to confirm that the college has fully implemented and is using its integrated planning processes. The institution has fully addressed this recommendation, resolved the deficiencies, and meets the Standards.

2012 Recommendation 3 – Research Capacity

In order to fully comply with the Standards, the team recommends that the College increase the research capacity of the institution in order to compile and provide data to guide institutional planning and resource allocation, program review and assessment, and decision-making for institutional effectiveness. (Standards I.B.2, I.B.3, I.B.6, II.A.1.a, II.A.1.c, II.A.2.e, II.A.2.f, II.B.4, III.A, IV.B.2.b)

Findings and Evidence

Since the November 2013 visit, the Office of Research, Planning and Institutional Effectiveness added an administrative assistant to its staff which already included the Director of Research, Planning and Effectiveness and a Research Analyst. This experienced staff is aided by the work of both the Solutions and Innovations Work Group and the Research Advisory Group. Responsibilities for data integrity and effective reporting have become a shared effort among these groups. This collaborative effort allows the College to better understand where the data originates, how to interpret the data, and how to make the data understandable to the campus community.

The Office of Research, Planning and Institutional Effectiveness is relied upon to provide expertise and information for which to guide planning efforts on campus. Examples of data can be viewed in the internal and external scans performed for the annual report, identification of measureable objectives in the Strategic Plan, and a set of agreed-upon metrics for program review. The Research Analyst mentioned that ad hoc requests are more aligned to District goals and have increased in volume revealing that the constituencies trust the information provided by this office and find it beneficial for decision-making. Training offered by the Office of Research, Planning and Institutional Effectiveness has included identification and assessment of Student Achievement Outcomes (SAOs) and program review metrics. In addition, the Research Advisory Group aided in creating a survey to identify training needs of the campus community as it pertains to data.

The Office of Research, Planning and Institutional Effectiveness plays an integral role in resource allocation by supplying all units with qualitative and quantitative data via the program review process. These data elements are also evaluated by the Budget Committee using the rubric for above-base funding. In addition, using a survey produced by the Office of Research, Planning and Institutional Effectiveness, the Budget Committee, as well as those receiving funds, evaluate the resource allocation process.

Unit level planning and resource allocation begins with the program review templates populated with metrics provided by the Office of Research, Planning and Institutional Effectiveness. Additional program review related requests for qualitative or quantitative analysis is also provided by this office. Along with training for the users on program review metrics, this office also aided in the production of the program review audit process that evaluates, among other things, the data provided to each unit.

Data analysis is the central focus in the College's Integrated Planning model. Decisions and planning efforts stem from this data, yet information is also fed back in the form of evaluative efforts. The Office of Research, Planning and Institutional Effectiveness is front and center for accomplishing both tasks as evidenced in the creation of metrics for planning as well as the interpretation of findings that are understood by the campus community.

Conclusion

Based upon a review of the evidence and interviews conducted, the visiting team concludes that the college has significantly increased its research capacity. The institution has fully addressed this recommendation, resolved the deficiencies, and meets the Standards.

2012 Recommendation 7 – Evaluation of Processes

In order to meet the Standards, the team recommends that the College develop and implement a systematic evaluation of its decision-making and budget development processes and use the results of those evaluations as a basis for improvement. (Standards III.D.1.a; III.D.1.d; III.D.2.d; III.D.3; IV.A.2, IV.A.5; IV.B.1.g; IV.B.2)

Findings and Evidence

Using the mission, Master Plan, and Strategic Plan as the foundation, the College has developed a planning process initiated by institutional program review, integrated with resource allocation and outcome assessment processes, and reviewed annually via the Annual College Report on the Master Plan. The key component to this process is its cyclical nature where improvement is encouraged at each level through evaluative processes.

Procedural guidelines for implementing the integrated planning process are documented in the Governance and Decision-making Manual, the Resource Allocation Manual, and the Integrated Planning Manual. As outlined in the Governance and Decision-making Manual, all Senates, Committees, and Councils are evaluated annually. In addition, the Resource Allocation Manual stipulates the evaluation of the resource allocation process by the Budget Committee. Some timeline issues have been assessed using this process and improvements have been made and noted in the updating of the Resource Allocation Manual. An additional example of evaluative processes can be viewed in the creation of the audit process for program review. The Institutional Program Review Committee randomly selects a few units to undergo the audit process with the intent to identify the effectiveness of the Program Review Template, as well as the data and training provided.

To assure that all planning efforts are focused, the College begins by training governance groups on creating initiatives and procedural components such as effective and transparent documentation. Taking what is learned from this training, the governance groups develop the Mid-Year Report. The Office of Research, Planning and Institutional Effectiveness then disseminates the District Governance Survey to evaluate how the groups meet their roles and responsibilities and also to identify what resources may be needed in order for the groups to perform effectively. Once this information is analyzed and delivered to the governance chairs, the Year-End Report provides the accomplishments gained throughout the year.

During the fall 2013 Show Cause Follow-up visit the team noted that the college had created a new process and cycle of evaluation for decision-making and budget development and that the new process included annual evaluations of all governance, resource allocation, and planning processes.

Conclusion

Based upon a review of the evidence and interviews conducted, the visiting team concludes that the college has completed a systematic evaluation of its decision-making and budget development processes and has begun to use the results of those evaluations as a basis for improvement. The institution has fully addressed this recommendation, resolved the deficiencies, and meets the Standards.