



DRAFT

College of Alameda
Follow-Up Report

Submitted by:

College of Alameda

555 Ralph Appezato Memorial Parkway Alameda CA 94501

Submitted to:

Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges 10
Commercial Boulevard, Suite 204, Novato, CA 94949

Date Submitted:

October 1, 2021

Certification Page for Follow-Up Report

To:

Accrediting Commission for Community and Junior Colleges,
Western Association of Schools and Colleges

From:

Nathanial Jones, III, Ph.D. President
College of Alameda
555 Ralph Appezzato Memorial Parkway
Alameda CA 94501

We certify there was board participation/review by the campus community and believe this report accurately reflects the nature and substance of this institution.

Signatures:

Dr. Nathanial Jones, III, President Date

Dr. Jannett N. Jackson, Interim Chancellor Date

Dr. Cindi Napoli-Abella Reiss, Board President Date

Dr. Matthew Goldstein, Academic Senate President Date

Kawanna Rollins, Classified Senate President Date

Dr. Tina Vasconcellos, Accreditation Liaison Officer Date

Table of Contents

Report Preparation	4
Response To The Commission Action Letter.....	7
Requirement 1	9
Requirement 2 & Fiscal Issue 6.....	16
Requirement 3.....	22
Requirement 4.....	25
Requirement 5.....	30
Requirement 6.....	32
Requirement 7.....	33
Requirement 8.....	35
Requirement 9.....	38
Requirement 10.....	40
Appendix A – Evidence Files	48
Appendix B – Abbreviations.....	51

Report Preparation

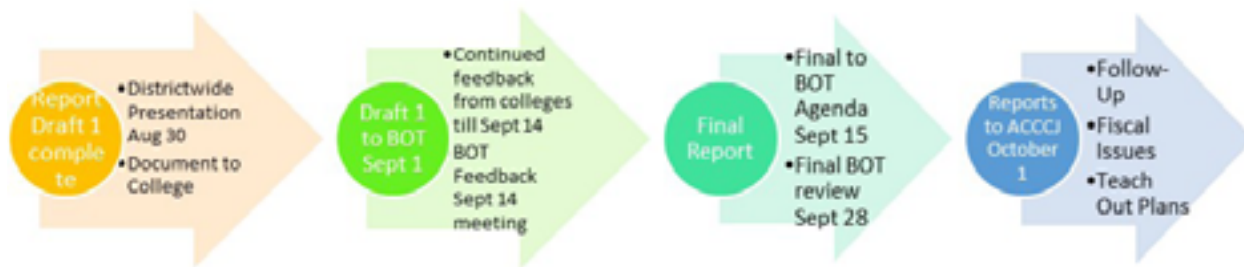
ACCJC Requirements for Peralta Community College District and College of Alameda

The Accrediting Commission for Community and Junior Colleges (ACCJC), Western Association of Schools and Colleges, took institutional action on the accreditation status of College of Alameda in an ACCJC action letter on June 28, 2021 [RP1] that included ten district compliance requirements and eight fiscal issues from the Special Team Report in January 2021 [RP2] to be addressed in a Follow-Up Report. The College continues on Probation with a Follow-Up Report due October 1, 2021, and a team visit. Issues addressed in this report were detailed in the Peer Review Team Report March 2021 and the Special Team Report December 2020. The College was also required to create a Teach Out Plan and submit it by October 1, 2021.

Ten Peralta Community College District (PCCD or District) non-compliance requirements were identified. There were no non-compliance requirements identified at the College. The requirements are referred to as Requirement 1, 2, 3, etc. The eight fiscal issues (FI) were numbered for clarity and referred to as FI. 1, FI.2, etc. The PCCD Requirement and Fiscal Issues Matrix [RP3] was constructed aligning ACCJC Requirements/Fiscal Issues, Peer Review Team Report, Special Reports, and Relevant ACCJC Standards to clarify overlap and provide the status of each requirement cross-referenced with the fiscal issue where appropriate. While some requirements and fiscal issues are resolved many are in the process of resolution or improvement as indicated. Action has been taken by the College and District on all non-compliance requirements and fiscal issues. Resolution of each is at varied stages as specifically detailed in this report.

The ACCJC Action letter was received in the June 28, 2021. The rapid turn-around time required a modified review with the college constituents, particularly with the reopening of the College under Covid concerns. For this reason, and because the requirements were directed chiefly at the district, the report was derived primarily from District administration and staff collaboration through biweekly expanded Chancellor's Cabinet Meetings. Additional information was prepared through specific college Taskforces and Teams such as the BP/AP Taskforce on Policy review, VP and ALOs committee, Finance and Audit Team, and PCCD Financial Aid Leadership. Significant information was contributed by administrative leaders and staff in areas responding to authority and controls in Financial Aid, Information Technology, Business and Finance, the Chancellor's Office, and Board of Trustees support areas.

Immediately after receipt of the letter a timeline was developed to complete the report and provide it to constituents for review and comment prior to submission to the Board [RP4]. The meetings held, topics discussed, and participants names were documented [RP5]. The District/College would like to remind readers that this review occurred during the re-opening and return to college following Covid in August 2021. Every effort was made to fully address requirements and fiscal issues and to communicate broadly amongst campus constituents.



This report will address changes since the completion of the ISER in in January 2020 through August 2021. Evidence has been included to validate work on all ten requirements and all 8 fiscal issues. This Follow-Up report describes the status of the requirements and fiscal issues, some of which were resolved in the short timeframe. Other requirements and fiscal issues addressed large changes to the institutional infrastructure, organizational structures within the District and among the colleges, functional maps with updated delineation of responsibilities, policy and procedure improvements, sustainable controls and accountability, as well cultural changes within the Institution and Board of Trustees. While these changes were very difficult due to administrative turnover, the last 6 months have seen growing stability.

The College acknowledges the role of the District Chancellor’s Office in preparing this Follow-Up Report. The collaborative narrative provided in this document speaks to contributions made by the Chancellor, Vice Chancellors, and other members of the team relating to the requirements directed at district responsibilities and oversight. In addition to the narrative sections, the College included a significant number of supporting documents to provide clarity and context to the Follow-Up Report. These documents appear as links to a folder that contains all accompanying files. The report scheduling document [RP4] indicates the rapid writing process throughout August, to allow the college governance participants to review the report. The Expanded Chancellor’s Cabinet Administrative Team [RP6] is responsible for most of the content of this report. Finally, this Follow-Up Report was reviewed by members of the PCCD Board of Trustees at the meetings on September 15 and 23, 2021 Board meetings when it received approval.

Members of the team are listed as follows:

NAME	TITLE
Jannett Jackson	Interim Chancellor
Rudy Besikof	President, Laney College
Angelica Garcia	President, Berkeley City College
David M. Johnson	President, Merritt College
Nathaniel Jones III	President, College of Alameda
Siri Brown	Vice Chancellor of Academic Affairs & Student Support
Adil Ahmed	Interim Vice Chancellor of Finance & Administrative Services
Ron McKinley	Acting Vice Chancellor of Human Resources & Employee Relations
Atheria Smith	Interim Vice Chancellor of General Services
Francisco Herrera	Associate Vice Chancellor of Institutional Research
Royl Roberts	Chief of Staff
Antoine Mehoulley	Chief Technology & Information Systems Officer
Mark Johnson	Executive Director of Marketing, Public Relations & Communications
Sasha Amiri	Board Clerk/Assistant to the Chancellor
Maisha Jameson	Executive Assistant, Chancellor’s Office

NAME	TITLE
Tina Vasconcellos	ALO & VPSS, College of Alameda
Rebecca Opsata	ALO & VPI, Laney College
Denise Richardson	ALO & VPI, Merritt College
Kuni Hay	ALO & VPI, Berkeley City College
Derek Pinto	Vice President of Administrative Services, Laney College
Stacey Shears	Vice President of Student Services, Berkeley City College
Sean Brooks	Vice President of Administrative Services, Berkeley City College
Diana Bajrami	Acting Vice President of Instruction, College of Alameda
Lilia Chavez	Vice President of Student Services, Merritt College
Garth Kwiecien	Vice President of Administrative Services, Merritt College
Joseph Bielanski	Chancellor's Designee, Facilitator Board Policies & Administrative Policies
Marla Williams-Powell	Interim Executive Director of Fiscal Services
Albert Maniaol	Director of Academic Affairs - District Office
Janet Fulks	Consultant

Response To The Commission Action Letter

The Accrediting Commission for Community and Junior Colleges (ACCJC), Western Association of Schools and Colleges, took institutional action on the accreditation status of College of Alameda in an ACCJC action letter on June 28, 2021 [RP1] that included ten district compliance requirements and eight fiscal issues from the Special Team Report in January 2021 [RP2] to be addressed in a Follow-Up Report. Below is a summary of the status of each Requirement. The status of the Fiscal Issues are summarized in a table with detailed information/updates under that section of the report, except for Fiscal Issue 6 concerning audit responses which is covered under Requirement 2.

District Requirement	Current Status	Sustained action to meet Standard
<p>Requirement 1: In order to meet the Standards, the Commission requires the District have appropriate internal control mechanisms and regularly evaluate its financial management practices and use the results for improvement to ensure financial documents have a high degree of credibility. Standards (III.D.5, III.D.6, III.D.8)</p>	<p>Good Progress</p>	<ul style="list-style-type: none"> • Resolution through delineated functions for Requirement 10. • Continued IT improvements • Continued business practices improvement • Adequate staffing • Staff development
<p>Requirement 2: In order to meet the Standard, the team recommends the district respond to all external audit findings and such responses are comprehensive, timely, and communicated properly. (III.D.7)</p>	<p>Standard met All findings responded to in a timely manner and communicated properly.</p>	<ul style="list-style-type: none"> • Audit findings are not all cleared • Dependent on Requirement 1 and 3 being completed
<p>Requirement 3: In order to meet the Standard, the district must practice effective oversight of its financial aid programs. (III.D.10)</p>	<p>Good Progress</p>	<ul style="list-style-type: none"> • Resolution through delineated functions for Requirement 10. • Continued IT improvements • Continued business improvement • Adequate staffing • Staff development
<p>District Recommendation 4: In order to meet the Standard, the team recommends that the Board of Trustees assure the academic quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution. (IV.C.1)</p>	<p>Progress and Improvement</p>	<ul style="list-style-type: none"> • Needs sustained training • Improved communication
<p>District Requirement 5: In order to meet the Standard, the team recommends that once the Board of Trustees reaches a decision, all board members act in support of board decisions. (IV.C.2)</p>	<p>Progress and Improvement</p>	<ul style="list-style-type: none"> • Needs sustained training

District Requirement	Current Status	Sustained action to meet Standard
<p>District Requirement 6: In order to meet the Standard, the team recommends the Board adhere to their clearly defined policy for evaluating the CEO of the district. (IV.C.3)</p>	Resolved	<ul style="list-style-type: none"> Continue following policy
<p>District Requirement 7: In order to meet the Standard, the team recommends the governing board is an independent, policy-making body that reflects the public interest in the institution’s educational quality. (IV.C.4)</p>	Progress	<ul style="list-style-type: none"> Needs sustained training Improved communication
<p>District Requirement 8: In order to meet the Standard, the team recommends that the Board establish a formal process for regularly assessing its policies for effectiveness in fulfilling the district’s mission and revise them as necessary. (IV.C.7)</p>	Resolved	<ul style="list-style-type: none"> Continue following policy
<p>District Requirement 9: In order to meet the Standard, the team recommends the Board delegate full responsibility and authority to the Chancellor to implement and administer board policies without Board interference. (IV.C.12)</p>	Resolved	<ul style="list-style-type: none"> Continue following policy
<p>District Requirement 10: In order to meet the standard, the team recommends the District clearly delineate, document, and communicate the operational responsibilities and functions of the District from those of the Colleges and consistently adhere to this delineation in practice. (IV.D.2).</p>	Resolved and Improvement in Progress	<ul style="list-style-type: none"> Needs completion of Functional Mapping by December

District Requirement 1: In order to meet the Standards, the team recommends the district have appropriate internal control mechanisms and regularly evaluate its financial management practices and uses the results for improvement to ensure financial documents have a high degree of credibility. (III.D.5, III.D.6, III.D.8)

III.D.5. To assure the financial integrity of the institution and responsible use of its financial resources, the internal control structure has appropriate control mechanisms and widely disseminates dependable and timely information for sound financial decision making. The institution regularly evaluates its financial management practices and uses the results to improve internal control systems.

III.D.6. Financial documents, including the budget, have a high degree of credibility and accuracy, and reflect appropriate allocation and use of financial resources to support student learning programs and services.

III.D.8. The institution's financial and internal control systems are evaluated and assessed for validity and effectiveness, and the results of this assessment are used for improvement.

The Peer Review Reports identified three key areas to meet the standards (III.D.5, III.D.6, III.D.8):

- implementing appropriate internal controls,
- regular evaluation of financial management practices, and
- improvement to ensure credible documents

District updates addressing these three issues relate to improvements beginning January 2021 up to the writing of this report. In some cases older documents are referenced to validate the implementation of earlier planning.

- **Identifying and Addressing Internal Control Issues**

Internal control weaknesses and solutions were described in *The Peralta Community College District Fiscal Improvement Plan* (June 6, 2019) by California Brain Trust (CBT) [1.01] and in the *Financial Review and Fiscal Health Risk Analysis* by FCMAT (June 28, 2019) [1.02]. Internal controls encompass methods that enhance the accuracy and reliability of records and reduce the risk of unintentional errors and irregularities in the accounting and business processes.

In response to the first ACCJC letter (January 25, 2019) the District created the *PCCD Integrated Financial Plan 2019-2024* [1.03]. PCCD contracted with Cambridge West for a detailed analysis called the *Data Integrity Report* (2020) [1.04] which identified gaps in internal controls as well as business practices and reorganization strategies that were needed to implement adequate controls for data integrity. Many of the core issues are technical errors, requiring extensive analysis and correction. These issues will take time to resolve but resolution is actively under way, despite challenging staffing turnover, primarily due to collaboration with consultants. The following infrastructure steps are helping resolve technical issues.

- **PeopleSoft Upgrade:** PCCD addressed a major recommendation by updating to PeopleSoft 9.2, which laid the foundation for PCCD to improve its business processes. All three pillars (Finance, Human Capital Management, and Campus Solutions) were strengthened and updated with the enhanced features and functionality of PeopleSoft 9.2. Infrastructure security was shifted to Oracle's advanced cloud security. Protection and liability are now guaranteed through Oracle. An additional critical benefit was the creation of a designated disaster recovery site to replicate and store systems at separate geolocation in case of a technology malfunction or a serious natural or man-made disaster with a recovery time objective (RTO) of one hour.

This phase also enhanced business processes with role-based security, assigning specific staff responsible for each element of the process, segregating duties, ensuring access, and allowing reliable accountability. Role-based security is an ongoing part of the business processes. Enhancements were also made to ensure oversight protection on user access, requisition approval and ensure only authorized administrators scrutinize and approve appropriate expenditures based upon Board Policy, regulations, and PCCD planning and budgeting practices. Processes were put in place to ensure user accounts are terminated in conjunction with their employment end date. A security approval system was also established to ensure the Vice-Chancellor of Finance can review and approve who will access the financial system.

The district continues to address the Financial Aid processes, and EdgeRock consultants have been contracted to support in addressing financial aid business processes, documentation, and user training. Progress has been made, but there have been some issues associated with reconciliations.

The district is currently working on the implementation of Phase 2 of the upgrade. PCCD is implementing new modules and reviewing Peralta's business processes for enhancement.

- Manager Self-Service
- Position Management
- Time and Labor
- Commitment Accounting
- Asset Management
- Expense Management
- Supplier Contracts

These new modules follow best practices, ensure compliance with board policies, and adhere to administrative procedures. An important aspect of Phase 2 is implementing important control structures with clear lines of accountability and responsibility. To ensure Phase 2 is executed successfully, the district has retained Huron to assist with the business process review, training, and deployment. The details of the upgrade are online at the District IT website and on the attached document [\[1.05\]](#).

- **EdgeRock Technology Partners Assistance-** Historically, PCCD has not used the full capacity of PeopleSoft. To build out capacity, digital control mechanisms and to test current processes, PCCD contracted with EdgeRock Technology Partners [\[1.06\]](#). This company has worked closely with PCCD on the ground, particularly with the Financial Aid Processes (please see detailed evidence in the response to Requirement 3). Cross functional work teams have been meeting to determine how best to resolve issues and enhance current process, as well as identifying training needs and the need for access to applications that support the work that they must perform. The Scope of Work for EdgeRock details specific technical solutions addressing internal control mechanisms:

- Establishing quality control systems to correctly begin processing the new financial aid year, which includes:
 - Working with IT to develop implementation checklists
 - Aligning administrative online functions
 - Establishing test modules for migration to production
- Assessing and implementing test controls that define and ensure data accuracy
- Creating and consolidating data collection queries and reports
- Troubleshooting ongoing issues to include reconciliation with Common Origination and Disbursement (COD) as mandated by the Department of Education

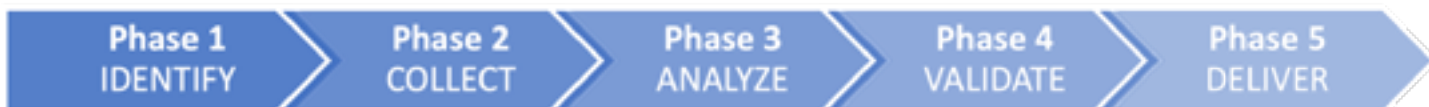
- Validation of disbursements with reject reporting
- Providing documentation and on-board training for new and existing financial aid staff on all campuses and the district office
- Enhancing district capacity to incorporate best practices using updated data processes for future financial aid operations across the district

The BOT extended its contract with Edgerock on May 11, 2021 [\[1.07\]](#). Examples of current process-testing with EdgeRock for August are included to validate accountability and follow-through [\[1.08\]](#). The attached evidence shows specific issues raised by IT specialists and Financial Aid workers at the district and colleges. Edgerock consultants have been instrumental in providing analysis and solutions with technical coding and processes on a real-time basis. The careful implementation, testing, and re-checking responds directly to the call for controls.

- **Cambridge West Data Integrity Analysis Status Report** -The Cambridge West Data Integrity Project reported to the Board of Trustees BOT (April 2021) evaluating outcomes [\[1.09\]](#):

Data Integrity Project Report to the Board of Trustees April 22, 2021, by Cambridge West	
Process	Status
Review of the data required for mandated reporting requirements including MIS, IPEDS and 320 reports and the District's current data using the CCCCCO Data Mart	Completed
Review and validate processes used to produce these reports via interviews with key staff	Completed
Perform analysis on all student information systems used to collect and process this data	Completed
Deliverables	Status
Develop process maps of data sources, data collection and manipulation processes and data storage locations for all data used in MIS reporting	Completed
Develop a data map of all data elements used in MIS reporting	70% Complete
Develop example data governance policy	Completed
Develop data entry standards for all mandated reporting data to ensure consistency of data	Completed
Develop recommendations for process improvements in the mandated reporting processes	Completed
Next Steps	Status
Complete data maps	In progress
Conduct trainings on the use of the Process Flows and Data Map/Element Dictionaries	In progress
Steering Committee refine Data Governance Policy and Data Entry Standards	Completed for FA [3.20]
Steering Committee review priority and begin gap recommendations	In progress
Departments Prioritize and begin work on departmental recommendations	In progress
Steering Committee monitors progress on recommendations	In progress

- Huron Consulting Services LLC** – A new contract was initiated August 12, 2021, with Huron Consulting Agency with a goal to evaluate PeopleSoft update implementation gaps [\[1.10\]](#). Huron’s PeopleSoft Assessment Methodology will evaluate PCCD’s Phase II financial and internal control systems update. The evaluation is based upon PeopleSoft implementation best practices. The activities are visualized below.



- Regular Evaluation of Fiscal Management Processes**

- The Board of Trustees Goal IV- The recent BOT Goals Update April 2021 [\[1.11\]](#) is evidence of sustained accountability over the last year by the BOT. PCCD recently, re-constituted BOT sub-committees including a Finance sub-committee to review data and information and make recommendations to the full BOT regarding policies, Aps, etc.

Board Goal	Updated Activities
IV.A Provide direction for budget policy and priorities that support good decisions and clean audits by receiving reports each semester on schedule development in relation to availability of funds and other financial issues	<p>The following financial priorities were developed with the current chancellor, with fiscal being at the top.</p> <ul style="list-style-type: none"> Audit Findings - Year-after-year financial aid, budget and reconciliation, HR position control, etc. verification of processes, sampling by internal or external auditor to ensure every finding is authentically resolved. Development of a financial plan through budget years between 2021/2022 and 2024/2025. There must be a plan to adjust the size of the institution to meet the extreme drop off in revenue in the budget year 2023/2024. We need to begin reducing the size immediately to feather the process. An accurate financial picture including all COVID and cares expenditures, consultant fees for the district office and IT Stabilizing the district’s finances. Give trustees an accurate picture of the district’s financial health SERP status GANN/ EPA/ HEERF spending (CR) How do we ensure these, and all other funds show up on BUDGETS and are spent / allocated appropriately while continuing to shape the budget for fiscal cliff.

Board Goal	Updated Activities
<p>IV.D. Monitor the District budget to ensure spending is within budget and meets the needs of the District.</p>	<ul style="list-style-type: none"> • OPEB informational 4/13/21 • Budget approval 1/19/21 • Audit report: 3/9/21 • Parcel tax summary for 19-20 presented on 4.6.21 • Parcel tax: each college presented their two-year parcel tax plans on 10.27.20: Review of Financial Statements and cash flow 2/9/21 • Quarterly financial CCFS -311 • Cambridge West was hired to ensure data integrity in processes. • Changes were made in financial aid so that the dept was under business admin rather than academic affairs and with presence at each college, rather than District. Two Financial aid technology analysts were hired with two more to be hired. Two technology experts to present tech overview and strategy specific to where breakdowns in our processes are, related to data integrity in the April 13, 2021, meeting.

- **PCCD district-wide shared governance monitoring** - Regular meetings of the Planning and Budgeting Council (PBC) monitor fiscal documents [\[1.12\]](#) based upon the Budget Allocation Model (BAM). The BAM committee [\[1.13\]](#) has been revising the model with a goal to create a sustainable and fiscally stable allocation model as validated in the Meeting Notes for May 13, 2021 [\[1.14\]](#). There was a study session with the BOT Finance and Budget Committee [\[1.15\]](#). These regular fiscal planning meetings have contributed to dependable and timely financial decision making. (III.D.5
- **Internal audits** –An internal auditor was hired April 8, 2020. The job description for the internal auditor [\[1.16\]](#) includes planning and directing the district-wide internal audit program; conducting internal audits; examining financial aid records, procedures, operational and accounting systems of the District and college organization units to determine compliance with District policies and government regulations.
- **External audits** - Annual external audits have been effective in identifying significant deficiencies and material weaknesses. A response to these external audit findings will be covered in the section on Requirement 2 and the Fiscal Issue related to audit findings. Last year, and this upcoming year, an external audit will be conducted by CLAconnect [\[1.17\]](#).
- **Additional Monitoring and Evaluation of Processes by the Department of Education (DOE)** - In response to financial aid issues the college is also on regular monthly monitoring with the DOE and has voluntarily worked with Minority Serving Under-Resourced Schools Division (MSURSD) to identify and resolve financial aid issues. This will be discussed in detail under Requirement 3 on financial aid.
- **Additional Monitoring and Evaluation of Processes by California Community College Chancellor’s Office Board of Governor’s (CCCCO BOG)** - As a result of the FCMAT findings additional regular reports to the CCCCCO BOG have been required. Two reports have been provided to the BOG one on December 31, 2020, by Chancellor Walter [\[1.18\]](#) and a follow up specific to audit findings by the current Chancellor, Dr. Jackson [\[1.19\]](#). More information and a more current audit update file will be presented under Requirement 2. The monitoring of the CCCCCO BOG for Fiscal resiliency is described on these BOG agenda items [\[1.20\]](#).

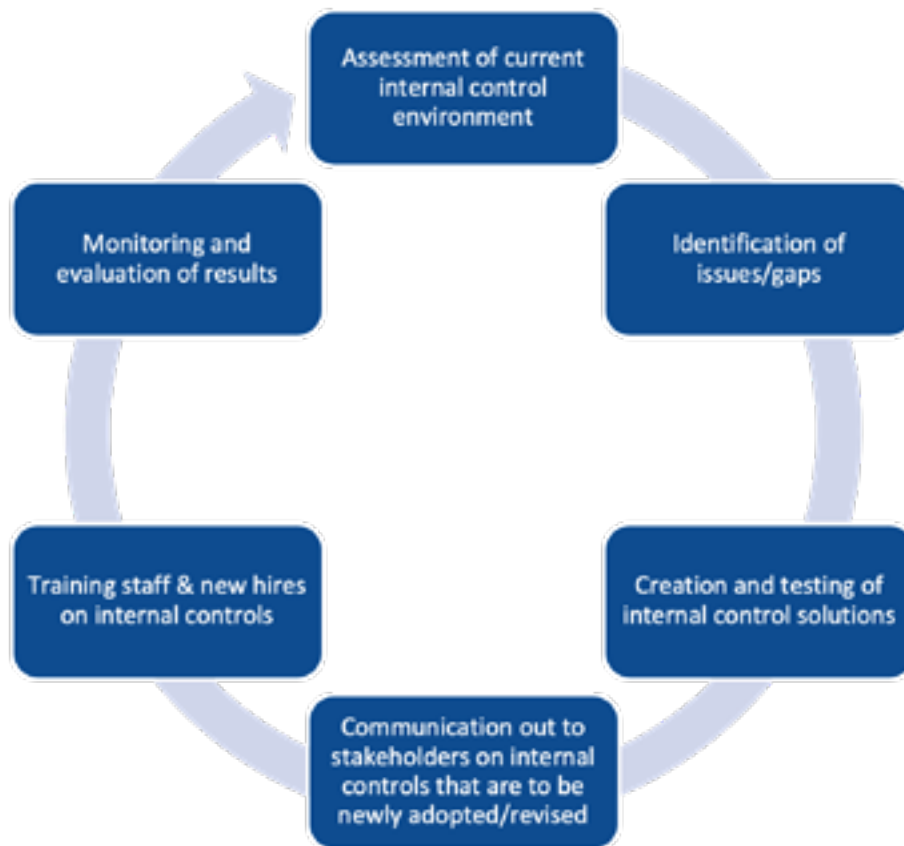
- **Improvement to Ensure Credible Documents**

- During CO, some program reviews were put on hold. Beginning this summer, PCCD Finance and Administration will undergo a Program Review process with the help of an outside consultant. The draft template is attached but will be updated [\[1.21\]](#)
- The result of the internal controls, close monitoring and improvements made to financial documents are evident in the CCCC CO MIS reporting over the last 5 years [\[1.22\]](#). Whereas the first tabs for the first three years (2015-16, 2016-17, 2017-18) evidence fiscal instability, there is definite improvement after implementation of controls, improved processes, and enhanced accountability in the 2018-19, 2019-20 budget reports.

Fiscal Year	Budget Year	Fund Balance	% ending balance
2019-20	2020-21	32,151,308	17.70%
2018-19	2019-20	25,408,841	15.0%
2017-18	2018-19	18,569,094	10.1%
2016-17	2017-18	11,345,623	5.8%
2015 -16	2016-17	22,116,275	12.9%

- Perhaps the final evidence of improving fiscal health and increased fiscal controls lies in the PCCD 2021-2022 Tentative Budget [\[1.23\]](#). The introductory comments, visions and goals connect the combined hard work among the colleges and the district with the vision to serve their students.

The District has progressed in implementing appropriate internal control mechanisms and is regularly evaluating its financial management practices, with the advice of consultants and outside monitoring by CCCC CO, DOE and ACCJC. While there is already evidence of improvement, it is also clear that more work is necessary and more permanent staffing is needed to bridge the gap when the consultants leave.



PCCD Internal Control Assessment Cycle Activities	Responsibility	Timeline
Assessment of current internal control environment	Huron, PCCD & Colleges, ACCJC	Completed – May 2020
Identification of issues/gaps	CBT, DOE, CW Data Integrity, ACCJC	Completed – April 2021
Creation and testing of internal control solutions	EdgeRock PeopleSoft	In process August 2021
Communication out to stakeholders on internal controls that are to be newly adopted/revised	Chancellor’s Cabinet Presidents, VP Finance and Administration	Scheduled October 2021
Training staff & new hires on internal controls	TBD	Scheduled October 2021
Monitoring and evaluation of results	Internal – Internal Auditor and VC Finance/Program Review External- CCCCCO, DOE, FCMAT, ACCJC	November 2021, Ongoing Cycle will be repeated at the end of each Fiscal year or with auditors report, or ACCJC assessment...

Requirement 2: In order to meet the Standard, the team recommends the district respond to all external audit findings and such responses are comprehensive, timely, and communicated properly. (III.D.7)

III.D.7 Institutional responses to external audit findings are comprehensive, timely, and communicated appropriately.

This section of the report will respond to Requirement 2 as well as Fiscal Issue 6, which is “addressing all audit findings”.

PCCD has had audit findings for the last two decades. Some findings were repeat findings, indicating things were not corrected, three such audit findings occurred in the recent FY 2020 Audit [\[2.1\]](#) However, PCCD is making progress on audit issues because of many improvements mentioned in the Requirement 1 report. A review of those infrastructure and human capital changes are below and then each audit issue will be updated. The following conditions set the stage for the audit resolutions:

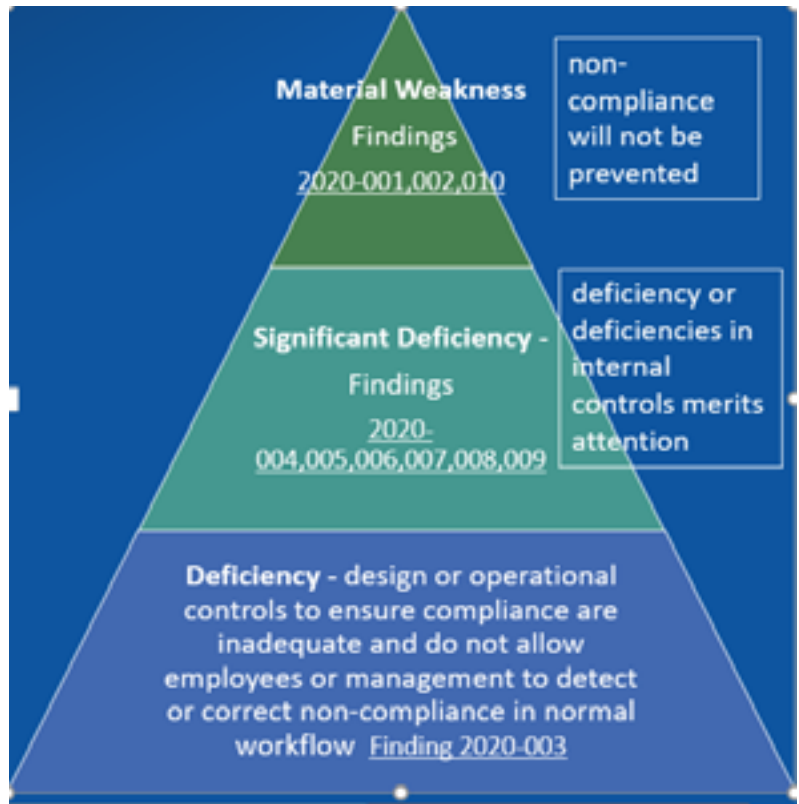
Currently PCCD is under external monitoring to clear audit findings

- The district is under the Fiscal Crisis Intervention Authority of the CCCC [\[2.02\]](#). Regular reports and updates are holding PCCD accountable to the system office [\[2.03\]](#) and [\[2.04\]](#). The most recently updated matrix on the audit findings includes FY2019 and FY2012 describing actions taken and the status of corrective actions [\[2.05\]](#).
- PCCD has voluntarily participated in DOE monitoring with respect to the financial aid area. The district provides monthly reports and has cooperated in several training sessions as well as evaluations of systems and practices to identify and resolve issues. In response to financial aid issues the college is also on regular monthly monitoring with the DOE and has voluntarily worked with Minority Serving Under-Resourced Schools Division (MSURSD) to identify and resolve financial aid issues. This will be discussed in detail under Requirement 3 on financial aid.

Changes within PCCD addressing audit issues

- PCCD has hired an internal auditor (4/8/2020), a position that was previously vacant and recommended by FCMAT.
- PCCD has reorganized the Finance and Administration Office for reporting and oversight. An Interim Executive Director Fiscal Services (District) was hired, and Financial Aid was shifted to reporting to the VC of Finance and Business Services [\[2.06\]](#).
- PCCD has reconstituted the Board Budget and Finance Committee and implemented goals which are being met. This committee reviews all data relevant to audit findings.
- PCCD implemented PeopleSoft 9.2 with upgrades [\[2.07\]](#) improves internal controls that specifically address audit findings as noted below:
 - enhancing business processes with role-based security (finding 2020-006)
 - assigning specific staff responsible for each element of the process and segregating duties, role-based security business processes (findings 2020-001, -007, -009)
 - ensuring oversight protection on user access, requisition approval and ensure only authorized administrators scrutinize and approve appropriate expenditures based upon Board Policy, regulations, and PCCD planning and budgeting practices (findings 2020-001, -002, -005, -007, -009)

- correct internal control and business practices as needed (e.g., SOPs, PCI, DRP, purchasing, work order system, etc. findings 2020-001, -002, -005, -007, -008, -009)
- improve systems and processes in administrative functions: checks and balances (internal controls), prioritization of purchasing and technical requests; automation of manual processes; IT onboarding/exit of employees (findings 2020-001, -002, -005, -007, -008, -009)



Audit Report

Both the Special Visit Team Report (2020) and the Peer Review Team Report (2021) indicated the importance of receiving the 2020 audit findings. Clifton, Larson Allen LLC completed the PCCD Financial Audit FY 2020 [2.1] and submitted it to the District on February 24, 2021.

The table below is used to report the status on each audit finding. Evidence links are embedded in the last column where appropriate.

Of the FY 2020 Audit findings 2020-006, 008, 009, and 010 are resolved and completed. Audit findings 2020-001, 005 and 007 are in progress and 002 and 003 are partially completed with remaining actions in progress.

Audit Finding	Cause	Corrective Action	Status
2020-001 Closing Process and Control Environment (Repeat from 2019-001) Material Weakness	Control environment not adequate to ensure accurate financial reporting	The District: <ul style="list-style-type: none"> • is implementing a monthly close to improve districtwide accounting practices. • will provide year end closing documentation from prior year. • is exploring options to manage and report student receivables. Staff training will be implemented for improved capacity and controls.	In Progress Completion was estimated by April 2021 however continued issues resulted in an EdgeRock contract to identify and correct scripts for posting and report details. End goal: <ol style="list-style-type: none"> 1) Closing schedule 2) functioning PeopleSoft module to close periods, 3) documentation 4) training 5) districtwide communication, 6) support to College Business Managers [Edgerock contract 2.08] [PeopleSoft anything] <u>Responsible:</u> Dr. Marla Williams-Powell, Interim Executive Director Fiscal Services (District)

Audit Finding	Cause	Corrective Action	Status
<p>2020-002</p> <p>Capital Assets are not properly monitored</p> <p>\$3.7 million in incorrectly identified assets</p> <p>Material Weakness</p>	<p>Internal controls do not provide reasonable assurance that financial statements are U.S. Generally accepted accounting principles (GAAP)</p>	<p>PCCD PeopleSoft Finance modules upgrades (Expense Management, Asset Management, and Contract Management). The project is 70% complete and is in its final phase of testing enhanced utilities to accommodate the fixed assets module.</p> <p>Brian Slaughter Director of Purchasing Services has been working on inventory and locations of District and College assets.</p>	<p>Resolved/Completed</p> <p>Phase I - system upgrade</p> <p>In Progress</p> <p>Phase II - PeopleSoft module execution {PeopleSoft ASSET MANAGER 2.09}</p> <p>The Chancellor has convened a Steering Committee (IT, Finance, HR & PeopleSoft) to assess progress and project timelines.</p> <p>External assessment to be completed over the next month</p> <p>to ensure successful transition to full utilization of the new modules. [Huron 2.10]</p> <p>Extensive staff training and development of training materials expected to go live no later than November 2021.</p> <p>End goal:</p> <ol style="list-style-type: none"> 1) complete implementation of districtwide purchasing, tracking, monitoring and depreciation management. 2) Proper accounting of assets from frontend user to backend 3) Reporting of depreciation 4) Accurate coding for various areas: Procurement/Warehouse/Fiscal Services. <p><u>Responsible:</u> Dr. Marla Williams-Powell, Interim Executive Director Fiscal Services (District) and Brian Slaughter Director of Purchasing Services</p>
<p>2020-003</p> <p>Vacation Accrual</p> <p>\$3.9 million in accrued vacation</p> <p>(Repeat from 2019-004)</p> <p>Significant Deficiency</p>	<p>Vacation accrual without or beyond limits are the result of ineffective monitoring</p>	<p>Vacation accrual cap for management and admin.</p> <p>Enforcing vacation usage for employees without cap policy</p> <p>Negotiate vacation accrual caps for remaining employees</p> <p>A consultation with legal counsel indicated this was legally allowable</p>	<p>Completed for some employee groups</p> <p>Fall 2020 accrual cap for 374 administrators</p> <p>To complete Spring 2021</p> <p>Spring 2021-Contractual item for labor groups and will be addressed for all unions during reopeners</p> <p>Consulted with legal counsel</p> <p><u>Responsible:</u> Dr. Ronald McKinley, Interim VC Human Resources Dr. Marla Williams-Powell, Interim Executive Director Fiscal Services (District)</p>

Audit Finding	Cause	Corrective Action	Status
<p>2020-004</p> <p>Eligibility and Certification Approval Report</p> <p>Significant Deficiency</p>	<p>The colleges and district must report staffing changes within a required amount of time to DOE (FA)</p>	<p>Reported and received certification of latest President and Financial Aid Director. A training document was created for reporting.</p>	<p>Resolved Completion date March 31, 2021 [2.11]</p> <p><u>Responsible:</u> Colleges will now be responsible to report</p> <p>[2.12]</p>
<p>2020-005</p> <p>Common Origination and Disbursement (COD)</p> <p>Repeat 2019-007 & 2018-04</p> <p>Reporting for Pell and Direct Loans</p> <p>Significant Deficiency</p>	<p>The DOE requires the Colleges to ensure that disbursement dates reported to the Common Origination and Disbursement (COD) system are within 15 days of disbursing Pell (34 CFR 690.83(b)(2) and Direct Loan (34 CFR 685.309) funds to a student.</p>	<p>Change of authority and accountability from VC Academic Affairs to VC Finance & Admin</p>	<p>In Progress</p> <p>EdgeRock consultants meet weekly with FA leaders [2.13] and daily with finance to address and test issues [2.14, 2.15, 2.16] with daily worklist corrections [2.17].</p> <p>The system has many internal staffing vacancies that have disrupted progress.</p> <p><u>Responsible:</u> Dr. Marla Williams-Powell, Interim Executive Director Fiscal Services (District) Antione Mehoulley, Director of Network Services (District)</p>
<p>2020-006</p> <p>Information sharing practices must be disclosed to protect data, particularly financial aid data.</p> <p>Significant Deficiency</p>	<p>Risk assessment is not performed to detect, prevent, and respond to attacks and safeguard documents.</p>	<p>PeopleSoft Infrastructure Security is shifted to Oracle's advanced cloud security</p>	<p>Resolved/Completed</p> <p>ADMINISTRATIVE PROCEDURE 5040 STUDENT RECORDS, DIRECTORY INFORMATION, AND PRIVACY was updated May 2021 [2.18]</p> <p>PeopleSoft Upgrade resolved this issue on security</p> <p>PeopleSOft Cloud Security will perform function [2.19]</p> <p>The District is exploring a risk assessment tool</p> <p><u>Responsible:</u> Dr. Marla Williams-Powell, Interim Executive Director Fiscal Services (District) and Colleges</p>

Audit Finding	Cause	Corrective Action	Status
<p>2020-007</p> <p>Return to Title 4 (R2T4)</p> <p>Repeat of previous 2018-3 for Merritt</p> <p>Significant Deficiency</p>	<p>No formal review process for R2T4 to ensure compliance with federal requirements.</p>	<p>Technical issues (scripts) have caused problems with internal controls.</p> <p>EdgeRock is working with Finance and Financial Aid in daily meeting and weekly updates to correct this.</p>	<p>In Progress</p> <p>ADMINISTRATIVE PROCEDURE 5130 FINANCIAL AID was update May 2021 [2.20]</p> <p>The Financial Aid Policy and Procedure Manual was updated and documents R2T4 processes [2.21, 2.22]</p> <p>Documentation for R2T4 was created for training</p> <p>DOE has been doing monthly monitoring</p> <p>Financial Aid has participated in MSURDS training and DOE evaluation of procedures</p> <p>Edgerock is working on technical details.</p> <p><u>Responsible:</u> Dr. Marla Williams-Powell, Interim Executive Director Fiscal Services (District) and Colleges</p>
<p>2020-008</p> <p>Enrollment Reporting</p> <p>Significant Deficiency</p>	<p>Changes in student status effect financial aid. Student status was not reported according to reporting requirements</p>	<p>Oversight was shifted from VC Academic Affairs and Student Success to VC Finance and Business Administration. Review of with colleges the reporting information on enrollment and programs.</p>	<p>Resolved/Completed</p> <p>ADMINISTRATIVE PROCEDURE 5130 FINANCIAL AID was update May 2021</p> <p>Regular meetings with campus FA leaders [Meeting records]</p> <p>Meetings with Edgerock to review and revise manual processes, document, and train for improved automated processes</p> <p>Training has been done on EW training [ppt from A&R]</p> <p>The Financial Aid Policy and Procedure Manual was updated.</p> <p><u>Responsible:</u> Dr. Marla Williams-Powell, Interim Executive Director Fiscal Services (District)</p>
<p>2020-009</p> <p>Outstanding Refund Checks</p> <p>\$38,825</p> <p>Significant Deficiency</p>	<p>Student refund checks must be returned within 45 days and documentation must show this</p>	<p>District reviewed policy for refund check within 30 days. Meeting with Financial Aid. Campus Business Officers to be involved in the outreach efforts to get funds to students prior to return via COD.</p>	<p>Resolved/Completed</p> <p>Implemented on colleges.</p> <p>Currently working automating communication to increase speed and accuracy</p> <p><u>Responsible:</u> Dr. Marla Williams-Powell, Interim Executive Director Fiscal Services (District)</p>

Audit Finding	Cause	Corrective Action	Status
2020-010 Allowable Cost Principles \$808,943 Deficiency	Unclear whether certain contractor fees were correctly charged to COVID relief Block Grant Student Bus passes were not allowable	The District moved questionable amounts \$378,498 and \$430,445 (total \$808,943) from CRF Block Grant back to General Fund and reclassified with allowable costs. A	Resolved/Completed Accounts reconciled This was corrected in a one-time journal for a one-time expense. The grant of \$808K has been expensed and final reporting has been completed. <u>Responsible:</u> Dr. Marla Williams-Powell, Interim Executive Director Fiscal Services (District)

All audit findings have been responded to, although not all are fully resolved.

District Recommendation 3: In order to meet the Standard, the district must practice effective oversight of its financial aid programs. (III.D.10)

III.D. 10 The institution practices effective oversight of finances, including management of financial aid, grants, externally funded programs, contractual relationships, auxiliary organizations or foundations, and institutional investments and assets.

The Peer Review Team Report March 2021 (page 48) identified issues in III.D.10 specifically found in the 2020 Audit findings related to ineffective oversight in Financial Aid (FA). The FA unit is an indicator of the issues, changes, and improvements occurring in PCCD, but also the complexity of rectifying these issues. Please reference the historical analysis and reports about technical issues in Requirement 1 (CBT, FCMAT, ACCJC, and Cambridge West) that also relate to FA.

The challenges in FA include technical problems, internal controls, in a highly regulated area, staffing issues, and delineation of functions and responsibility. The FA unit also provides a clear picture of the time and effort required to sustainably address complex issues that were years in the making and will take time to rectify. Requirement 3 report will begin with the FA audit findings that describe issues related to FA oversight, but also the dedication of the FA leadership and Finance area to make progress.

- **Reporting changes in new presidents and directors of financial aid to the US Department of Education within 10 business days**

Audit Finding 2020-004 Special Tests and Provisions: Eligibility and Certification Approval Report

This finding was the result of three of the four colleges that had failed to comply with the federal regulation that requires reporting to the Department of Education (DOE) within the required 10 days when key governance leadership changes. This was not a repeat finding.

This issue has been corrected. All new presidents and FA directors have been reported to the DOE. The attached document [3.01] verifies DOE confirmation of the Laney President, and the new Director of Financial Aid, on July 7, 2021. This issue has been corrected into the future, by assigning the responsibility of reporting changes in governance to the College Financial Aid Offices. A training document called Financial Aid Reporting of Change of Governance Procedures [3.02] was created to describe the process and clearly delineate responsibility.

- **Failure to accurately report disbursement dates to the Common Origination and Disbursement (COD) system**

Audit Findings 2020–005: Special Tests and Provisions: COD Reporting

The DOE requires colleges to accurately report disbursement dates within 15 days for Pell and Student Loans. Testing by auditors revealed that incorrect disbursement dates had been reported which can result in incorrect interest accrual. This was also a previous year finding (2019-007).

A new process was implemented in 2020 to report the COD and drawdown on a weekly basis. Staff were trained to execute reconciliation of COD on a weekly basis. The District has experienced continuous voids in critical staffing roles and has recently hired two Financial Aid Directors at the colleges, but two vacancies still exist. The District has been holding regular meetings with campus financial aid leaders, providing increased training opportunities, and addressing compliance, accuracy, and timeliness of reporting. The PCCD Policies and Procedure Manual [3.03] was updated as a district-wide effort which helped align the college practices and the district. This collaborative effort between staff on the frontline and those in IT and Finance have identified problems and sought solutions, many of which were technical.

Technical issues associated with this finding are being analyzed by the EdgeRock consultants as described in the Statement of Work (SOW) [3.04]. The consultants attend the regular troubleshooting meetings May [3.05], June [3.06], July [3.07], August [3.08] which have been painful, but productive, resolving technical problems with tangible improvements. Examples of process testing with Edgerock to close the loop on solutions for August are included as evidence [3.09]. Weekly meetings with campus financial aid leadership are held to evaluate outdated and inefficient processes. Agenda samples are included for evidence [3.10]. Documentation and training for automated processes will be essential to sustain these improvements.

- **Process for Return to Title IV (R2T4)**

Audit Finding 2020-007: Internal Controls Over Federal Awards

The DOE requires that colleges establish and maintain effective internal controls over Federal awards to provide reasonable assurance that the College is managing awards in compliance with Federal statutes. The audit found that there was no formal documented review process of R2T4 calculations and student award packaging. The audit noted a lack of documentation for those students selected for verification by the Department of Education at Alameda, Berkeley, and Merritt Colleges. In addition, Direct Loan, Pell Grant, Federal Work Study, and Supplemental Education Opportunity Grant reconciliations were not reviewed by someone other than the preparer for Berkeley and Merritt College. This was not a repeat finding. This issue relates to delineation of responsibility and internal checks on work after it is done.

PCCD has a documented review process for R2T4 [3.11] and the PCCD Financial Aid Policy and Procedures Manual clearly covers the process of R2T4 on pages 63-66 [3.03]. The Colleges and District are working to reinforce the control structure for Federal awards, through increased training opportunities and clear role and function description. The District and Colleges continue to work with Edgerock to create IT controls and better automated communication. Finance is working on business processes.

- The District, Merritt College, and Laney College engaged in voluntary Minority Serving Under-Resourced Schools Division (MSURSD) visits for FA training and evaluation through the Department of Education (DOE). Virtual visits occurred in September 2020 (Merritt) and November 2020 (Laney) [3.12, 3.13] that clarified the essential steps forward which are being implemented now. Summary reports from Merritt and Laney Colleges by the VPSS and Dean [3.14] and a final assistance report from the DOE [3.15] provide direction for continued work to resolve issues. The DOE has continued monthly monitoring. Improvement is occurring R2T4 processes, including important communication and interaction with students [3.16]. Reports to the Board have clarified FA issues [3.17].
- **Correct Enrollment Reporting**

Audit Finding 2020 – 008: Special Tests and Provisions: Enrollment Reporting (not a repeat)

The DOE requires colleges to review, update, and verify student enrollment statuses, program information, and effective dates that appear on the “Enrollment Reporting Roster” file. During the audit testing there were issues identified in:

- late reporting of student status changes
- improper student status reporting at the campus-level and program-level records and
- instances where the effective date of a student status change was improperly reported at both the campus-level and program-level record

The initial corrective actions for this audit finding were to shift oversight from the VC Academic Affairs and Student Success to the VC Finance and Administration [3.18]. However, these problems extend to timely campus and program level information on students including accurate reporting by every faculty member. PCCD FA regular meetings with campus financial aid leaders resulted in increased training to address compliance, accuracy, and timeliness of reporting [3.19]. The R2T4 web posting by Merritt College [3.20] is good evidence of best practice and improved processes to align messaging.

- **2020–009: Outstanding Student Refund Checks (not a repeat)**

This finding is also related to the R2T4 in audit finding 2010-007 and 2020-008. An institution must have a timely process to return Title IV funds. If the disbursed funds are not cashed, the funds must be returned no later than 240 days after the date it issued the check. If a check is returned, or an EFT is rejected, the institution may make additional attempts to disburse the funds, no later than 45 days after the funds were returned or rejected.

The District was unable to provide documentation for timely student refunds of Title IV. Review of the entire R2T4 has improved and updated processes as well as automated timelines and checks to meet federal requirements have been implemented. The work continues as FA and the District following up to delineate timely messaging to students. The District is currently developing automated notices sent to students whose refunds are returned from Bank Mobile. A summary report to the Board included details on the FA audit findings [3.21].

- **Cash Management Issues identified by DOE connecting R2T4**

R2T4 is under the umbrella of Cash Management and Reconciliation Processes which continue to need improvement. It is important to define roles and responsibilities between the District and the Colleges. Efforts to revise the District Functional map for Requirement 10 will greatly benefit these issues. The FA leaders began early work on the functional mapping to clarify roles and responsibilities and improve business process and procedures.

The DOE recommended that, as a district, PCCD needed to:

- Define roles and responsibilities in the administration of Title IV Cash Management
- Align Fiscal management policies across all platforms
- Write the processes for documenting Reconciliation and update the Policy and Procedure Manual

On April 14, 2021, FA leaders met to identify follow-up actions as suggested by the DOE Monitoring [3.22]. April 19, 2021, FA leadership created the attached workflow for cash management [3.23]. Additional meetings on April 26, May 3, and August 3 continued work on solutions [3.24].

- **Reorganization moves Financial Aid Directors to the Colleges**

Several of the earlier studies with CBT, FCMAT and Cambridge West indicated a need for re-organization. This was particularly true at the District in FA. It was clear that FA Directors were needed on each college campus to create and maintain better frontline services. Because of the special skill set needed to reorganize, and train the FA unit, the district hired an Interim Executive Director of Fiscal Services who has been working with the Vice Chancellor of Finance & Administration (Interim) and Vice Chancellor of Academic Affairs and Student Success to better understand IT issues and business processes. The DO has hired a dedicated IT employee and plans to hire a Financial Aid Compliance officer or director following a clear analysis of the functions required at the District. The Interim Executive Director Fiscal Services has a vision to build smart, with appropriate supervision, planning, and training and understands the importance of bridging the work and knowledge currently imparted by consultants to the new hires. Consequently, a lot of effort has been invested in documentation of meetings and policies as well as developing tools to help review, analyze and report actions.

Administrative procedure AP5130 on Financial Aid was recently updated May 14, 2021 [3.25] connecting policy and procedure as the fundamental basis of practice that provides controls and consistency. Resolution in FA and Business practices are occurring, but the reorganization, technical problem-solving, focus on training and improved communication will take time.

FA has a well-established Student-Centered Philosophy: “PCCD believes that a consistent and equitable approach to the awarding of financial aid will enable students to attend Peralta Community Colleges who would not otherwise have the financial resources to enroll. It thereby encourages a student population that is culturally, economically, socially, and geographically diverse.” [3.03 page 8]

Requirement 3 on Financial Aid is a complex set of issues involving IT, business practices, staffing and training. While this requirement is not completed resolved, a lot of progress has occurred.

Requirement 4

District Requirement 4: In order to meet the Standard, the team recommends that the Board of Trustees assure the academic quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution. (IV.C.1)

IV.C.1. The institution has a governing board that has authority over and responsibility for policies to assure the academic quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution. (ER 7)

There are six Requirements (4, 5, 6, 7, 8, and 9) in the Peer Review Team Report (March 2021) directly related to the PCCD Board of Trustees (Board) responsibilities. Much of the evidence for all Board-related requirements overlaps with this overarching requirement. Requirement 4 speaks to restoring functional Board governance to assure academic quality, effective programs and services, and fiscal stability. Evidence for progress in this requirement is found in the Board policy, which is being reviewed and updated, Board training, Board evaluations, Board goals addressing responsibility, and to some extent, in the external accountability from the public as evidenced by the Grand Jury of Alameda County.

- **Board Policy BP 2200 guiding the Board responsibilities**

BP 2200 Board Duties and Responsibilities [\[4.01\]](#) clearly represents ER7 and IV.C.1 as evidenced below:

The Board of Trustees governs on behalf of the citizens of the Peralta Community College District in accordance with the authority granted and duties defined in Education Code Section 70902. The Board is committed to fulfilling its responsibilities to:

- Represent the public interest
- Establish policies that define the institutional mission and set prudent, ethical, and legal standards for college operations
- Assure fiscal health and stability
- Monitor institutional performance and educational quality
- Advocate and protect the district
- Delegate power and authority to the Chancellor to effectively lead the district
- Hire the Chancellor, and evaluate the Chancellor at least annually
- Respect the authority of the Chancellor by providing policy, direction, and guidance only to the Chancellor who is responsible for the management of the district and its employees
- Delegate the authority to the Chancellor to issue regulations, and directives to the employees of the district

Like many of the Board Policies (BPs), this BP had not been reviewed or updated since 2011. This is significant because policy review and updating holds people accountable and orients new members of the Board. BP2200 has been prioritized for early review on the new BP/AP Review Matrix discussed in Requirement 8. Shifting culture and behavior is a larger task than revising a policy. While not resolved, the shift is occurring as evidenced below through Board training, evaluation, and goal-setting.

- **Board Training**

Dr. Helen Benjamin has been working with the PCCD Board facilitating evaluations, training, and goals [4.02, 4.03] focusing on the ACCJC Standards, best practices, and attention to ensuring academic quality and fiscal stability. With regard to integrity, the Board has affirmed an ethics statement [4.04] and a cooperation statement read before every meeting and posted on the front page of the Board Website [4.05]. As required by ACCJC Standards (IV.C.10) the Board must have full participation in board training. Board Retreats and Study Sessions occurred July 21, 2020, Dec. 16, 2020, and July 20, 2021. The agendas and documents are publicly posted on PCCD Board Docs. The Board retreats have been substantial in educating the Board about their responsibilities associated with academic quality, student learning and financial stability.

- **Board Self-Evaluations**

The BOT has been working to repair the environment that has put the District at risk. ACCJC Standards (IV.C.10) require the Board to regularly evaluate its practices and performance and use the results to improve board performance, academic quality, and institutional effectiveness. BP 2745 Board Self-Evaluation [4.06], requires the Board to conduct a formal self-evaluation during June or July annually and make the results public, but there was no record of Board evaluations being completed from 2016 through 2020. This has been corrected.

The Board completed two self-evaluations in July 2020 and another in July 2021. Comparison of the self-evaluations suggest an evolution towards meeting Standard IV.C.1. In June 2020, two self-evaluations, one associated with Board effectiveness [4.07] and one associated with accreditation standards [4.08] were completed. The Board reviewed the results in a July 2020 study session and goals were set; these goals are discussed in the next section of this report. In 2021, the Board (with some new members) retook the same self-evaluation [4.09]. Comparison of the two self-evaluations [4.10] displays a large shift towards “meeting the standards”. Evaluation questions related to Standard IV.C.1 are highlighted in the comparison document. Specific responses to all the questions need to improve, but there is a shift occurring, as evidenced in the selected responses below.

Comparison Report Peralta Board of Trustees Self-Evaluation Based on Accreditation Standards August 5, 2021 (excerpts Requirement 4)			
Question	Response options	Spring 2020 Responses N=5	Spring 2021 Responses N=6
Question 1 The institution has a governing board that has authority over and responsibility for policies to assure the academic quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution. (ER 7)	The Board fully meets the standard	20%	66.7%
	The Board partially meets the standard	80%	16.7%
	The Board does not meet the standard	0%	16.7%
Question 11 The evaluation assesses the board’s effectiveness in promoting and sustaining academic quality and institutional effectiveness.	The Board fully meets the standard	20%	66.7%
	The Board partially meets the standard	40%	16.7%
	The Board does not meet the standard	40%	16.7%

- **Board Goals Address**

An important outcome of the Board training and self-evaluations has been the clear focus on Board Goals. These Board goals are most representative of progress to meet Standard IV.C.1. Goals were initially set at the July 2020 Board Retreat [4.11]. The best evidence of the Board’s focus on “assuring the academic quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution” (IV.C.1) is the Board Goals Progress Update from July 2021. [4.12] This is important work and must be sustained to shift the previous culture and correct some of the governance dysfunction in the District.

- **External Accountability for Board Governance Standards -The Alameda County Grand Jury Recommendations**

The Alameda County Grand Jury recently completed an investigation into the PCCD Board because of CCCC state intervention in fiscal issues, ACCJC Probation status and official complaints filed about the Board. The 2021 Grand Jury final report [4.13] indicated that governance is broken. The Grand Jury described poor communication, lack of unified goals, and divisive individual behavior inhibiting the Board’s ability to accomplish responsibilities. The Grand Jury suggested specific actions that could restore confidence in the Board’s ability to represent the public and accomplish its purpose. The table below provides an update on Grand Jury recommendations made to restore effective governance practices and Board Actions that meet all or part of the recommendation.

Grand Jury Recommendation	Action
Recommendation 21-1: The Peralta Board of Trustees must participate in an annual training that examines the relationship between the board and chancellor and governance best practices.	Dr. Helen Benjamin has facilitated bi-annual training, evaluation, and discussions on best governance practices. Ongoing from 2020 until present – July 2020, December 2020, July 2021.
Recommendation 21-2: The Peralta Board of Trustees must amend the portion of Board Policy 7110, which gives the board of trustees the power to approve appointment of management employees to ensure it does not conflict with Board Policy 2430, Delegation of Authority of Chancellor, and the portion of Board Policy 7110 that delegates the authority for human resources to the chancellor.	This policy is on the BP/AP matrix for review and update for the coming year. The Policy was reviewed with the CCLC template and other colleges and districts. This BP will be on the Board agenda for September and the inconsistency with ACCJC Accreditations standards has been pointed out.
Recommendation 21-3: The Peralta Board of Trustees must adopt a staff and executive staff hiring policy consistent with ACCJC best practices and recommendations.	Adoption of a revised BP 7110 (above) will satisfy this.

Grand Jury Recommendation	Action
<p>Recommendation 21-4: Peralta board leadership must commit to intervene, consistent with board policy, in situations where trustees or public speakers are verbally attacking staff or other trustees.</p>	<p>The Board has committed to a cooperation resolution that is posted on their introductory website and read at every meeting. https://go.boarddocs.com/ca/peralta/Board.nsf/vpublic?open</p> <p>The Board has also agreed to and created a policy for communicating with groups</p> <p>https://go.boarddocs.com/ca/peralta/Board.nsf/files/BW7AEM2757E9/\$file/Board%20Communication%20Protocol.pdf</p> <p>The Board has signed an Affirmation agreement</p> <p>Current zoom recordings evidence better meeting decorum. The Board meetings can be viewed Live on Peralta College's YouTube link: https://www.youtube.com/channel/UCTEVyZCQ1p_yqMRafmQFUww</p> <p>And are recorded such as this sample from Peralta Colleges Board of Trustees Meeting: July 27, 2021at https://www.youtube.com/watch?v=qPTO9XlakeU</p>
<p>Recommendation 21-5: The Peralta Board of Trustees must participate in training combatting racial insensitivity and implicit bias (Diversity, Equity, Inclusion and Belonging/DEIB).</p>	<p>The Board reviewed BP 2715 Code of Ethics and Standards of Practice (July 21, 2020) [4.04] and updated BP 3410 Nondiscrimination (5/14/2021) [4.14] and AP 3420 Equal Employment Opportunity [4.15]. In addition, Resolution 20/21-29 Diversity, Equity, and Inclusion [4.16] was unanimously passed on May 25, 2021.</p> <p>Board Goals Board Goal II: Diversity, Equity, Inclusion/ Social Justice The Board is aware of the importance of a safe and welcoming teaching, learning, and working environment for students and employees and will promote equal access to educational achievement through collaborations that value diversity, equity, and inclusion.</p>
<p>Recommendation 21-6: The Peralta Board of Trustees and Peralta Academic Senate must participate in additional training regarding the Brown Act, illegal meetings, and closed session ethics</p>	<p>In the July 21, 2020, Board retreat minutes the Board reviewed BOARD POLICY 2715 CODE OF ETHICS AND STANDARDS OF PRACTICE [& 4.12].</p> <p>Flex Day covered two sessions on the Brown Act [4.17]</p>
<p>Recommendation 21-7: The Peralta Board of Trustees must post proof or acknowledgement of all completed board training on the board web page.</p>	<p>Board Retreats and Study Sessions Occurred July 21,2020, Dec. 16, 2020, and July 20,2021 The agendas and documents are posted on Board Docs</p>

Grand Jury Recommendation	Action
<p>Recommendation 21-8: Individual members of the Peralta Board of Trustees must participate in an annual 360 evaluation, including a behavioral component. This evaluation must include staff input and the results must be discussed during a public meeting.</p>	
<p>Recommendation 21-9: The Peralta Board of Trustees must discuss the findings and recommendations of this report during a public meeting.</p>	<p>PCCD is sending a report to the Grand Jury in response to the report the last week of August. The Grand Jury report will be discussed in an open Board session in September.</p>

Progress towards resolution of Requirement 4 has been made and must be sustained.

District Requirement 5: In order to meet the Standard, the team recommends that once the Board of Trustees reaches a decision, all board members act in support of board decisions. (IV.C.2)

IV.C.2. The governing board acts as a collective entity. Once the board reaches a decision, all board members act in support of the decision.

Evidence of Unity

As noted in the Peer Review Team Report (2021), and in the previous section on Requirement 4, the Board has been collaborating in an improved which has created more unified decisions and actions. The PCCD Board Statement of Cooperation mentioned is read at every meeting [5.01]. The Board has participated in three Board retreats focused on best practices in Board governance in June 2020 [5.02], December 2020 [5.03], and July 2021 [5.04].

As reported in the Peer Review Team Report “The Retreat also resulted in the development of Board Protocols of Communication that informs the processes Board members are to use when communicating with each other, CEO/Staff Members, the public and how to address complaints from the public.” [5.05]

Board Goal VI: Board Effectiveness

Realizing the serious work facing the District and the need for the Board to improve its culture to achieve District and Board goals, the Board has committed to taking bold actions to transform itself into a high functioning unit. The Board Goals Progress Update [5.06] highlights key goals related to complete Board support of Board decisions.

Increased clarity and unity in dealing with Board Policies

By August 2021, the Board and Chancellor had reviewed and updated 33 BP/APs [5.07], within only the first 8 months of the year. This represents more reviews and updates than any previous year from 2015 thru 2020. This work evidences greater value on policy and procedures.

Increased unity in hiring resulting in staffing stabilization

The Grand Jury report [5.08] included a statement that “Ultimately, trustee interference in fair hiring contributed to a glut of unfilled administrative positions over the years, jeopardizing services to students and overall operations of the district.” The inability to act as a unified whole due to outside influences has hurt the functioning of the District and Colleges. However, the attached spreadsheet evidences recent hires from January 2021 to August 2021 [5.09] indicating a lack of interference and important unification to fill much needed staffing positions.

Board Self-Evaluation

The Board self-evaluation shows improvement from July 2020 to results in July 2021 [5.10]. An excerpt from two relevant questions comparing 2020 and 2021 Board Self Evaluations indicates increasing understanding and movement towards meeting the standard. But the Board is not there yet.

Comparison Report Peralta Board of Trustees Self-Evaluation Based on Accreditation Standards August 5, 2021 (excerpts Requirement 5)			
Question	Response options	Spring 2020 Responses	Spring 2021 Responses
		N=5	N=6
Question 2 The governing board acts as a collective entity. Once the board reaches a decision, all board members act in support of the decision.	The Board fully meets the standard	20%	60%
	The Board partially meets the standard	40%	20%
	The Board does not meet the standard	40%	20%
Question 7 The governing board is an independent, policy-making body that reflects the public interest in the institution's educational quality. It advocates for and defends the institution and protects it vfrom undue influence or political pressure. (ER 7)	The Board fully meets the standard	0%	33.3%
	The Board partially meets the standard	80%	50%
	The Board does not meet the standard	20%	16.7%

More unified decision-making evidencing Improved Governance Function

During Covid many important decisions required unified support to immediately resolve situations. The effort to reopen the colleges following Covid and campus closures, demonstrated unity among the Board Members and collaboration with the Chancellor [5.11]. There were numerous technical, contractual, and public health issues that needed consideration and planning. These complex issues, with political implications, were not easy, as suggested in the media reports identifying PCCD as one of a few requiring vaccination [5.12]. Perhaps most impressive is the discussion and voting in the July 27m Board meeting. A scroll through the agenda and voting reveals important issues and reports, with unified responses [x].

Progress towards resolution of Requirement 5 has been made and must be sustained.

District Requirement 6: In order to meet the Standard, the team recommends the Board adhere to their clearly defined policy for evaluating the CEO of the district. (IV.C.3)

(IV.C.3) The governing board adheres to a clearly defined policy for selecting and evaluating the CEO of the college and/or the district/system.

The District has had a lot of administrative turn-over, making the past chancellor's evaluation challenging. Board Policy indicates that the Chancellor evaluation is annual. However, the tenure of the two previous Chancellors, was less than a year (Carla Walter 7/18/20 - 4/15/21 & Regina Stanback-Stroud 10/21/19 -8/15/20), ending in resignations and no evaluations. The current Interim Chancellor was hired April 15, 2021. Shortly after her start on 4/27/21, BP 2435 Evaluation of the Chancellor was reviewed and adopted by the Board [6.01]. The process was put into effect by developing goals and expectations.

Board and Chancellor development of the evaluation tool

A key action for Board Goal VI: Board Effectiveness, includes establishing clear goals and expectations for the chancellor. Foundational to the process, The Board and Chancellor Jackson partnered to establish clear goals on May 11, 2021. [6.02]

Another Board goal includes cultivating a strong, positive CEO/Board relationship that promotes the success of students, the colleges, and the District as a whole. In the July 20,2021 goals progress report [6.03] the Board felt that considerable progress had been made with current Interim Chancellor Jackson. They noted the following evidence of interaction that strengthens the effectiveness of their work:

- Communication/transparency throughout that is vertical and horizontal
- Explanations and detailed analysis that are data driven
- Chancellor listens to all parties, and finds something helpful in each trustee's response
- Board developed Statement of Cooperation by which they are abiding.
- Demeanor is collegial and respectful on all fronts
- Follow-through on questions, issues, concerns
- She is thoughtful, intentional, and attentive to detail, and she is experienced and that shows in her breadth and depth of knowledge

Completion of the Chancellor's Evaluation

BP2435 Evaluation of the Chancellor, indicates that the Chancellor will be evaluated at least once every year. The evaluation process timeline and tool are mutually developed by the Board and Interim Chancellor Jackson and incorporates the District's goals, objectives, and expectations. The criteria for the evaluation are also based upon the Chancellor's job description (also recently revised August 2019) [6.04]. The CEO job description includes implementation of board policy, and performance in attaining goals, objectives, and expectations developed in accordance with BP 2430 [6.05].

Interim Chancellor Jackson completed a self-evaluation with the Board June 7, 2021 [6.06]. Consistent with the policy the Chancellor will be evaluated again prior to July 15, 2022.

Requirement 6 has been resolved with policies and procedures update to assure future compliance.

District Requirement 7: In order to meet the Standard, the team recommends the governing board is an independent, policy-making body that reflects the public interest in the institution's educational quality. (IV.C.4)

IV.C.4. The governing board is an independent, policy-making body that reflects the public interest in the institution's educational quality. It advocates for and defends the institution and protects it from undue influence or political pressure. (ER 7)

The Peer Review Team Report (2021, page 56) indicated evidence, reflected in interviews and the high turnover of administration, that was illustrative of Board members advancing the interest of certain groups over the interests of the entire District. The high administrative turnover of executive level personnel has made it very difficult to maintain progress in areas and to integrate ongoing. However, over the last six months, administrator and management positions have been hired and people have been retained [7.02].

External Accountability -The Alameda County Grand Jury Recommendations

Peer Review Team interviews and observations concerning Board members acting on mixed allegiance were confirmed in Grand Jury report findings 21-1, 21-2, 21-3, 21-4, 21-5, 21-7,21-8, 21-9 [7.01]. Pages 35 & 36 of the report indicate Brown Act violations, closed session discussions, and recordings of Board meetings displayed disruptive behavior provided. The Grand Jury documented solid evidence that members of the Board that were not operating independently in the interest of the public and the institution's educational quality. Evidence that improvement is occurring in some areas can be tracked through Board actions that address the Grand Jury Recommendations [7.03].

Board Goals, resolutions and formal statements exemplify unity

The Board has signed an Affirmation Statement of Cooperation [7.04]. It is read at every meeting and is posted on the BOT web page [7.05]. It reminds the Board members that they went "through a process of reflection" and "conducted a critical review" of their work over the last several years with a goal to improve the Board's effectiveness. The Governing Board has also developed Communication Protocols [7.06]. These documents provide guidelines for Board responsibility.

The Board Goals Update July 2021 [7.07] provides evidence of good work in meeting goals relevant to the public's interest in institutional quality. Collaboration is a key part of many goals; however, behavior needs to genuinely align with these goals.

Board Self Evaluation

The Board Self-Evaluation, an action in Board Goal III, specifically addresses components of this Standard (IV.C.4). A comparison of results between July 2020 and July 2021 [7.08] provides evidence of this shift in the Board's self-perception regarding meeting the standard. The Board still evidences conflict in the question 4, with only a small number, 2 Trustees, feeling the Board meets the standard to be an independent, policy-making body. However, this is an improvement from the Board Self-Evaluation in July 2020. Significantly, other questions related to factors that are foundational to independent policy-making, exhibit much more improvement (questions 14, 15, and 19).

Comparison Report Peralta Board of Trustees Self-Evaluation Based on Accreditation Standards August 5, 2021 (excerpts Requirement 7)

Question	Response options	Spring 2020 Responses N=5	Spring 2021 Responses N=6
Question 4 The governing board is an independent, policy-making body that reflects the public interest in the institution’s educational quality. It advocates for and defends the institution and protects it from undue influence or political pressure. (ER 7)	The Board fully meets the standard	0%	33.3%
	The Board partially meets the standard	80%	50%
	The Board does not meet the standard	20%	16.7%
Question 14 The governing board upholds a code of ethics and conflict of interest policy, and individual board members adhere to the code.	The Board fully meets the standard	20%	83.3%
	The Board partially meets the standard	60%	0
	The Board does not meet the standard	20%	16.7%
Question 15 The board has a clearly defined policy for dealing with behavior that violates its code and implements it when necessary	The Board fully meets the standard	20%	66.7%
	The Board partially meets the standard	40%	16.7%
	The Board does not meet the standard	40%	16.7%
Question 19 The governing board is informed about the Eligibility Requirements, the Accreditation Standards, Commission policies, accreditation processes, and the college’s accredited status, and supports through policy the college’s efforts to improve and excel. The board participates in evaluation of governing board roles and functions in the accreditation process.	The Board fully meets the standard	20%	83.3%
	The Board partially meets the standard	80%	0
	The Board does not meet the standard	0%	16.7%

Requirement 7 has had good improvement and solid documentation of behavior by a policy-making body that reflects the public interest in the institution’s educational quality. (IV.C.4).

Requirement 8

District Requirement 8: In order to meet the Standard, the team recommends that the Board establish a formal process for regularly assessing its policies for effectiveness in fulfilling the district's mission and revise them as necessary. (IV.C.7)

(IV.C.7) The governing board acts in a manner consistent with its policies and bylaws. The board regularly assesses its policies and bylaws for their effectiveness in fulfilling the college/district/system mission and revises them as necessary.

The Policy (BP2410) and Procedure (AP 2410) needed updating

BP 2410 Board Policy and Administrative Procedure [8.01] and AP 2410 Administrative Procedure Policy Development Process [8.02] identify the District's process for development and review of Board policies and procedures. However, neither the BP or AP had been reviewed or updated since 2015. AP 2410 did not represent the current policy development process used in the District. In addition, a detailed evaluation of all PCCD BPs and APs revealed that unless issues arose generating new revisions, there was not a regular review cycle for assessment and revision of policies and procedures. To appropriately address Requirement 8, the Chancellor established a BP/AP Taskforce which included the Chancellor, a Board of Trustee member, the Board Clerk, and the Chancellor designee for Board policy-a faculty facilitator¹.

Implementing a cycle of review was supported by the Board goals

PCCD Board Goal VI: Board Effectiveness states that, "Realizing the serious work facing the District and the need for the Board to improve its culture to achieve District and Board goals, the Board will take bold actions to transform itself into a high functioning unit." Key Action D, under Goal VI, specifically states that the Board will "Ensure development and implementation of a cycle for regular review and revision of all Board policies so that each policy is reviewed a minimum of once every five years, except when required by rules or regulations [8.03]. Although the Board goals included a 5-year timeline, the BP/AP task force, realizing certain high priority reviews that needed to take place immediately in addition to managing the regular biannual update from CCLC, proposed a 7-year cycle for BP/AP review. This proposal will go to the Board in the September meetings.

Regular updates through the California Community College League (CCLC) subscription service have always occurred

The District relies on CCLC's Board Policy and Administrative Procedure Template Subscription Service² to ensure compliance with legally mandated policy changes through bi-annual updates. The CCLC updates are sent to the Chancellor's designee (the faculty facilitator), every Fall and Spring where they enter the process for review, participatory governance input and final adoption by the Chancellor and Board. The current CCLC update going to the Board includes 12 BPs and 14APs some of which are included in the Taskforces priority updates [8.04]

¹ Dr. Joseph Bielanski has been the Chancellor appointed faculty facilitator for many years. He is familiar with the process, served as an ACCJC commissioner and Statewide Academic Senate member which adds value, longevity, and history to the process.

² **CCLC** Board Policy and Administrative Procedure Templates
<https://ccleague.org/district-services/policy-procedure-services>

In addition to CCLC updates, AP 2410 indicated that, “New or revised draft Policies can be submitted to the Chancellor from any recognized PCCD group or individuals with area expertise.” As a result of updates and those submitted to address key issues, forty-five BP/APs were updated in 2020 and 2021, such as AP 4100 Graduation Requirements for Degrees and Certificates, AP4235 Credit for Prior Learning, AP 4260 Prerequisites, Co-requisites, and Advisories, AP 5130 Financial Aid, BP 6330 Purchasing. This process has worked for many years but did not guarantee a complete review cycle of all BPs and APs revealing a gap.

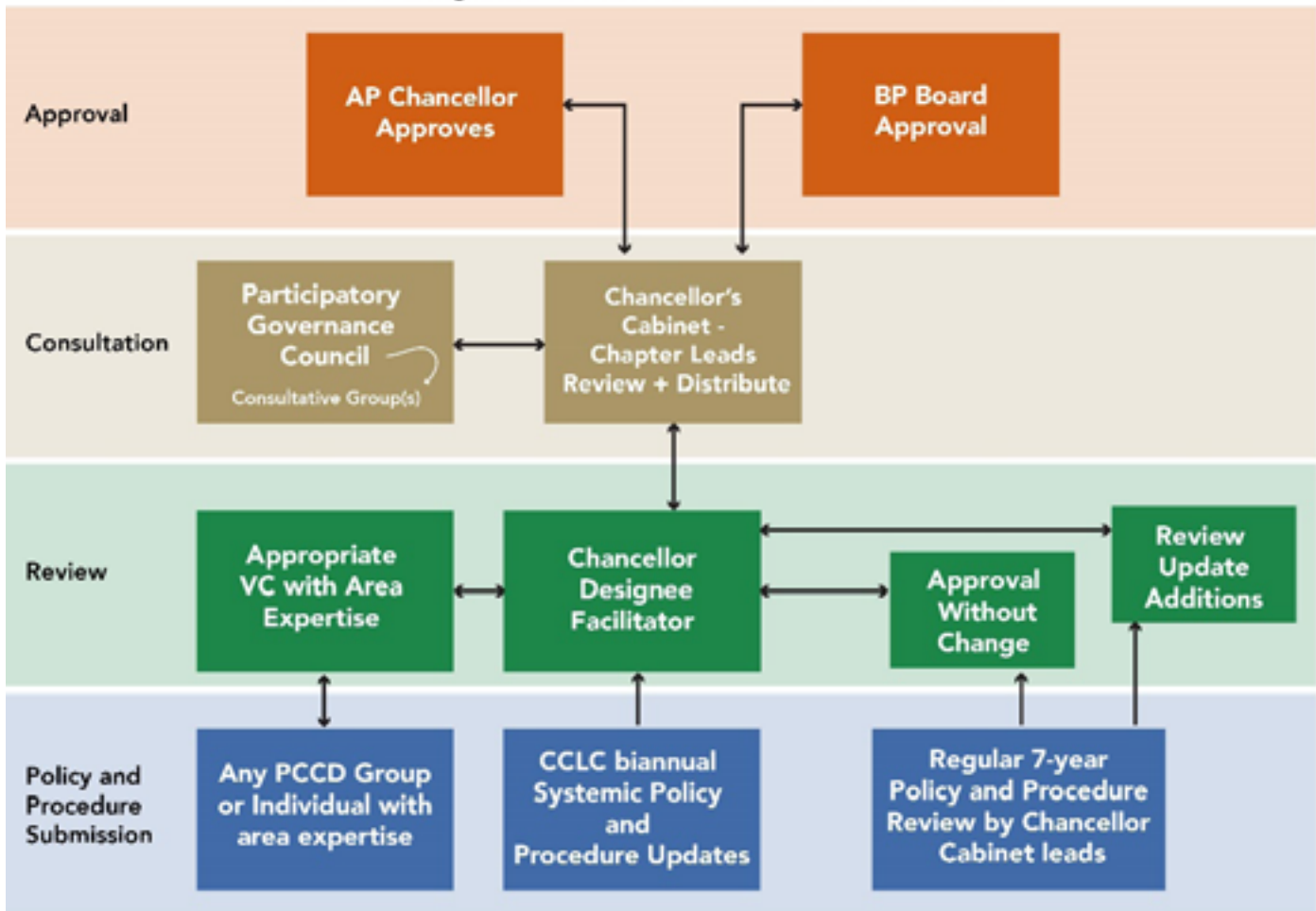
Comprehensive review of the PCCD BPs and APs

In August 2021, the BP/AP Taskforce completed a thorough evaluation of PCCD BPs and APs, comparing existing District BP/APs to all the CCLC templates, as well as examples from other colleges. This analysis revealed issues with policies that were legally required but missing, some policies that needed renumbering, and some BP/APs that were advisable or represented good practice, that needed to be considered [8.05]. In addition, many of the BP/APs that had not been reviewed for a long time did not accurately represent current practices. Several of the unreviewed BP/APs represented institutional work where accountability and process were key and were specifically mentioned in the Peer Review Team Report (2021). Many of the BPs and APs relevant to the fiscal concerns and peer review team reports were already in the process of being updated to address gaps and meet requirements.

The BP/AP analysis recorded dates of each update for the last seven years. Annually only 4-10% of the BP/APs were historically reviewed leaving 166 (51.5%) BP/APs that had not been reviewed for more than seven years. These data were shared with the expanded Chancellor’s cabinet [8.06]. The Task force concluded their work on the flowchart, the BP/AP matrix and updated AP 2410 [8.07]. A revised AP 2410 Administrative Procedure [8.08] Policy Development Process that:

- Included a review of priority policies/procedures this year
- initiated a 7-year cycle of reviews by chapter
- continued CCLC biannual updates
- retained those submitted to the Chancellor from any recognized PCCD group or individuals with area expertise

**Peralta Community College District
Board Policy / Administrative Procedure Flowchart**



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This new process was reviewed by Chancellor’s Cabinet, codified in AP 2410, approved, and updated. A flow chart visualizing the process clarifies the workflow [8.09]

The BP/AP spreadsheet analysis was used to prioritize reviews based upon: 1) addressing those required by legislation/law, 2) then taking the ones “most” in need based on external reviews, 3) those most out of date and potentially not needing change or just needing reviewed, and finally 4) those most out of date. The spreadsheet was used to create a schedule and calendar for AP/BP review. It also documents responsible parties, Chapter Leads from Chancellor’s Cabinet, assigned to appropriate BPs and APs by the policy chapters [8.10] The spreadsheet, which is posted to the web for access [8.11] will be updated by the Board Clerk and the Chancellor designee (faculty facilitator) will continue to guide the BP/APs through the appropriate process. Priority 1 and 2 reviews should be completed by January 2022.

Requirement 8 has been fully addressed and the College has met the Standard. (IV.C.7)



District Requirement 9: In order to meet the Standard, the team recommends the Board delegate full responsibility and authority to the Chancellor to implement and administer board policies without Board interference. (IV.C.12)

IV.C.12. The governing board delegates full responsibility and authority to the CEO to implement and administer board policies without board interference and holds the CEO accountable for the operation of the district/system or college, respectively.

The Peer Review Team Report (2021) indicated that although BP 2430 [9.01] delegates authority to the Chancellor, BP7110 [9.02] conflicts with that BP2430 because it states, “The Board of Trustees will approve the appointment of management employees. The Board will approve the appointment of non-academic temporary substitute and short-term employees who are paid for less than 75 percent of the fiscal year (except for professional experts, apprentices, and student workers).” The Peer Review Team Report goes on to state, “Although these policies exist, the interpretation on what they mean differs among board members and they should be discussed, reviewed and revised as appropriate.”

Updating of policy validated by Grand Jury findings

The Grand Jury Report indicated [9.03] on page 20 indicated that in a “May 2020 email from the state chancellor to Peralta trustees, the state chancellor cited individual board members’ efforts to control the chancellor’s executive hiring decisions as the primary example of inappropriate interference in the Peralta chancellor’s authority.” This contributed to heavy staff turnover and vacancies. The record of hiring from HR for January thru August 2021 [9.04] and a Board Agenda item showing a unanimous management hire in July 2021 indicate a shift in the BOT [9.05].

The Board understands and supports the delegation of responsibility in the self-evaluation and the Board goals

A comparison of the BOT self-evaluation [9.06] from July 2020 and July 2021 indicates improvement in the BOT’s understanding of the ACCJC accreditation standard (IV.C.12).

Comparison Report Peralta Board of Trustees Self-Evaluation Based on Accreditation Standards August 5, 2021 (excerpts Requirement 9)			
Question	Response options	Spring 2020 Responses	Spring 2021 Responses
		N=5	N=6
18.The governing board delegates full responsibility and authority to the CEO to implement and administer board policies without board interference and holds the CEO accountable for the operation of the district/ system or college, respectively	The Board fully meets the standard	20%	66.7%
	The Board partially meets the standard	60%	16.7%
	The Board does not meet the standard	20%	16.7%

The Board Goal VI. Action C states that “In accordance with BP2430: Delegation of Authority to the Chancellor, respect the authority that has been delegated to the Chancellor and hold the Chancellor accountable for execution of job duties as stated in the policy [9.07]. Evidence of hiring and decision making confirms the Board has been following through on this goal.

Further evidence lies in the Chancellor’s ability to implement “Return to Campus” where full authority to implement and administer policy, in a very difficult and complex time, has been delegated to the Chancellor and her team [\[9.08\]](#).

BP 2430 and BP 7110 were last reviewed and updated in 2011 and 2012. The BP/AP Taskforce has placed them as a high priority on the BP/AP tracking matrix for early review and updating. The Board already began reviewing these policies. A packet with the CCLC template language and examples from several other schools and colleges will be submitted with the requested change [\[9.09\]](#).

Requirement 9 is resolved, following Board updating of BP 7110 Standard (IV.C.12) will be met.

Requirement 10

District Recommendation 10: In order to meet the standard, the team recommends the District clearly delineate, document, and communicate the operational responsibilities and functions of the District from those of the Colleges and consistently adhere to this delineation in practice. (IV.D.2)

IV.D.2. The district/system CEO clearly delineates, documents, and communicates the operational responsibilities and functions of the district/system from those of the colleges and consistently adheres to this delineation in practice. The district/system CEO ensures that the colleges receive effective and adequate district/system provided services to support the colleges in achieving their missions. Where a district/system has responsibility for resources, allocation of resources, and planning, it is evaluated against the Standards, and its performance is reflected in the accredited status of the institution.

Correction of College Functional Maps in ISERS

The peer reports described that “Functional maps provided as evidence in Institutional Self Evaluation Reports (ISERS) were different between three colleges and one college. (IV.D.2)” Following an evaluation of all four college maps [10.01], it was found that the COA functional map linked to the wrong file, an old one from the previous standards. This has been corrected and the correct functional map is now posted [10.02]. There were small differences in the original functional maps based on distinctions among the four college positions (Vice President of Administrative Services or not) which effected delineation of duties in some cases.

Making the Functional Maps Truly Functional

The current PCCD functional map now aligns with the updated college functional map, however upon discussion with ALOs and in Chancellor’s Cabinet meetings, a consensus was reached that the current maps do not adequately identify and delineate functions. The Peer Team Report (2021) suggested that, “Once the District establishes a clear and consistent delineation of functions in Standard IV.D.2, the team suggests that the participatory governance process, workflow and communication be documented to better support integrated planning and evaluation. (IV.D.5).”

Currently the functional maps are based upon accreditation standards, but this is not the way institution functions. The district and colleges have determined that functional delineation has potentially been at the core of many problems. The District and colleges, in response to the Team reports, decided that it was vital to collaboratively develop new functional maps. The ALOs reviewed several models and decided that categories should be driven by shared functions and not by standards. Sample functional maps from West Hills Community College District, Rancho Santiago Community College District and Riverside Community College District were reviewed. A PCCD draft functional map was presented to the expanded Chancellor’s Cabinet [10.03].

Using Microsoft Teams, the expanded Chancellor’s Cabinet worked on a draft to distribute to the Participatory Governance Council and relevant College groups [10.04]. Financial Aid leaders had already identified this important process solution because the FA reorganization left many tasks and functions unclear as to whether the District or the Colleges were responsible. Some of these unclear FA responsibilities resulted in audit findings. The goal of this new PCCD model is to clearly and realistically delineate functions based upon the newly updated organizational charts and necessities of the district and colleges.

PCCD Functional Map Iterative Development and Deadlines

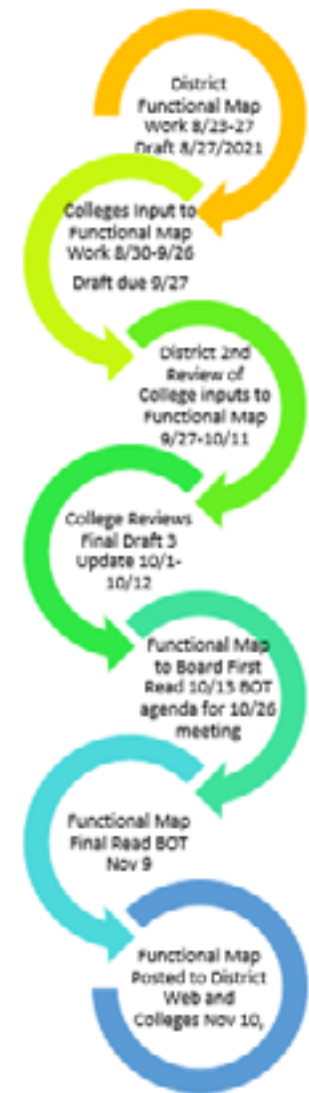
Under Standard IV.D.2 the Peer Review Team Reports for Merritt, COA and BCC stated that, “The District needs to establish a clear delineation of functions and responsibilities that are consistently applied across all colleges. The District and colleges can then work together to document the workflow and communication processes that ensure the district, and the colleges adhere to the delineation in practice.” This good advice was validated across Management and the draft is being actively and collaboratively built and is currently in a rough draft form [10.05]. A schedule [10.06] for completing the project has been constructed and is depicted in the visual

Throughout the process the District and the Colleges have had rich discussions. The schedule for completion of this 2021 PCCD Functional Map is slated for December 2020 based upon a desire to use the process to validate assumptions and clearly communicate functions and responsibilities. This is an important process considering the recent staffing and reorganization in the district.

Updated Organizational Maps Across the District

Concurrently the District and Colleges updated all their organizational maps. Staffing turnover, combined with newly organized positions, mandated that the first step to reviewing functions and delineating responsibilities was an updating of all organizational charts. Organizational Charts for all District Offices and the four colleges are posted and available on the district website. [10.07]

Requirement 10 has been resolved but with the new function mapping the standard (IV.D.2) will be authentic and useful in addressing many other standards (Requirement 1 (III.D.5, III.D.6, III.D.8), Requirement 2 (III.D.7) Requirement 3 (III.D.10)



FISCAL ISSUES

The ACCJC Action Letter (2021) required the Peralta Community College District (PCCD) and College of Alameda (CoA) to report on the deficiencies identified in the ACCJC Action Letter dated January 27, 2020. Although the College made progress on addressing the identified deficiencies through fiscal monitoring, the Commission determined that these deficiencies were not fully resolved.

The Commission required the College to address the following deficiencies in the Follow-Up Report:

- Fiscal Issue 1 (FI_1): Establishing FTES Targets and Enrollment Management Plans
- Fiscal Issue 2 (FI_2): Establishing a Student Success Infrastructure Plan to comply with the Student-Centered Funding Formula (SCFF) as announced by the California Community College Chancellor's Office (CCCCO)
- Fiscal Issue 3 (FI_3): Establishing guidelines to reduce operational overspending and eliminate the structural deficit
- Fiscal Issue 4 (FI_4): Adopting a Board policy to adopt sustainable fund balances and reserves
- Fiscal Issue 5 (FI_5): Adopting a restructuring plan to improve efficiencies and accountability at the District Office and the Colleges
- Fiscal Issue 6 (FI_6): Addressing all audit findings – (Response included under Requirement 2 of the 2021 Follow-up Report to ACCJC)
- Fiscal Issue 7 (FI_7): Establishing strategies to improve the management of the OPEB debt
- Fiscal Issue 8 (FI_8): Providing an executive-level staff turnover analysis and recommendations to retain these staff at the district

FI_1 Establishing FTES Targets and Enrollment Management Plans

On Fiscal Issue 1, the Special Visit Team Report (2020) stated that, “The College has addressed this concern and is seeing results from their implementation of their enrollment strategies as noted specifically above. The Peralta Community College District (District) is addressing this concern through engaging deep foundational work with Cambridge West Ltd. that will also benefit all the colleges” (page 3). Below is an update on the College and District work implementing the FTES Targets and Enrollment Management Plans.

College of Alameda’s 2019-2021 Strategic Enrollment Management Plan (SEM) [\[FI_1.01\]](#) was created by the Institutional Effectiveness Committee (IEC) with broad based participation by faculty, classified professionals, and managers. It establishes guiding principles for enrollment management at the College and sets goals for increasing enrollment and retention, as well as degree and certificate completion.

In spring 2020, College of Alameda administrators, faculty, and classified professionals collaborated to develop the Full Time Equivalent Faculty (FTEF) allocation matrix and discipline-specific enrollment model, using the following core components: data to assess trends in enrollment over the past three years; productivity data; demand of course offerings utilizing student education plans; course success rates; and the number of degrees and certificates awarded. This approach fostered critical dialogue to impact course scheduling and offerings with the intent of addressing student scheduling and student curriculum needs at the discipline, college, and district levels. In addition to analyzing outcomes related to the Student-Centered Funding Formula (SCFF) such as conferral of degrees and certificates, the enrollment model now includes FTES data for Pell Grant and California College Promise students by discipline.

The College Institutional Effectiveness Committee continued assessment of the SEM Plan throughout 2020-2021.

The College made data-informed improvements based on the Plan, including the creation of and adherence to block scheduling, as well as uniform late-start and short-term courses to increase both accessibility to courses and ultimately award completion. Program maps for students provide valuable information in educational planning. Improvements in academic excellence are being made by investing in professional development activities and training, improvement in technology, student services and targeted marketing efforts. In addition, College of Alameda invested in professional development training activities focused on improving the quality of online teaching and learning, strategic enrollment management (2021 Enrollment Management Academy) and increased resources for distance education coordinators, instructional design coaches, and online embedded tutors.

Full-time equivalent students (FTES) was 3,233.03 in 2019-2020 compared to 2,685.99 in 2020-2021, indicating a 17 percent decline. This decline reflects statewide and nationwide challenges due to COVID -19, which necessitated all instruction to be provided remotely. Presently, College of Alameda is working to reverse these trends by offering a variety of course modalities such as in person classes, hybrid, synchronous and asynchronous online courses, and by providing wrap-around services to provide both academic and needed support services to students.

College of Alameda's enrollment management strategies are aligned with the integrated strategic enrollment planning that the District has in place. The College of Alameda Strategic Enrollment Management Plan aligns with the PCCD Strategic Enrollment Management Plan [\[FI_1.02\]](#). The College and the District are monitoring targets and adjusting actuals, as needed. The District report shows five years of enrollment targets and enrollment actuals, from 2015-16 to 2020-21, exhibiting how this monitoring has improved planning for targets and productivity since 2018-19 [\[FI_1.03\]](#). College of Alameda provides regular enrollment management updates to the Board and implemented a SCFF centered matrix to allocate FTEF [\[FI_1.04\]](#).

Going forward, the Board unanimously approved a contract with SEMWORKS (Strategic Enrollment Management) on March 23, 2021, to evaluate the current status of district wide enrollment management strategies [\[FI_1.05\]](#). The SEMWORKS findings provided an in-depth report on community perspectives and the effectiveness of enrollment strategies [\[FI_1.06\]](#). The Board Goals Update [\[FI_1.07\]](#) describes important Board goals and actions to monitor FTES and enrollments. As an example of real-time monitoring, the Board had a study session on February 23, 2021 on the impact of Covid-19 on enrollment and success, which included an analysis of enrollment trends in terms of FTES, major special programs, enrollment shifts by top code, as well as demographic disproportionate impact analysis, which collectively culminated in preliminary recommendations to inform how the District continues to navigate enrollment management decision-making in the pandemic environment [\[FI_1.08\]](#).

FI_2 Establishing a Student Success Infrastructure Plan to comply with the Student-Centered Funding Formula (SCFF) as announced by the CCCC

As required by the ACCJC, the District and College have complied by creating a Student Success Infrastructure Plan based upon the SCFF called the 2019 Five Year Integrated Financial Plan [FI_2.01]. The Special Visit Team Report (2020) concluded good progress on the infrastructure plan aligning PCCD budgeting to the SCFF, with positive trends including increases in the following areas: English and math course success; financial aid outreach; award completions; and dual enrollment.

The Student Success Infrastructure is an integrated component of Board responsibilities and is part of the Board Goals. The Board held a study session on the SCFF on January 19, 2021 [FI_2.0] and on March 23, 2021, the District presented a SCFF calculation update to the Board [FI_2.03]. The District [FI_2.04] clearly incorporates elements of the SCFF in budgeting and planning as described in the BOT presentation on PCCD’s 2022 Tentative Budget presented on June 22, 2021 [FI_2.05].

College of Alameda’s Student Success Infrastructure Plan entails the continued implementation of the 2019-2021 Strategic Enrollment Management Plan [FI_1.01], which is student-centered, grounded in equity, and committed to student success and completion. The College has integrated SCFF metrics into its planning by including the percentage of Financial Aid FTES in each discipline into its FTEF matrix [FI_2.06]. Also included is Student Education Plan data in order to increase award conferrals and SCFF metrics, as shown in the sample table below.

Subject Area	Weighted Average	25%	10%	25%	10%	10%	10%	10%	100%	Adjusted 2021-22 Proposed FTEF Allocation	Variance
	# of FT Faculty	2Y FTEF AVG	FTEF by FA	Productivity	Demand	Awards Conferred	Success Rate	Retention Rate	Weighted 2021-22 Proposed FTEF Allocation		
ENGL	6.0	15.2	13.1	11.5	19.7	5.7	13.6	9.1	12.8	14.1	-2.1
ESOL	1.0	10.6	9.4	7.1	5.4	0.0	12.9	12.2	8.4	9.2	-2.1
GEOG	1.0	3.1	3.5	3.5	3.6	1.4	3.1	2.9	3.1	3.1	-0.5
GEOL	0.0	0.3	0.3	0.3	0.5	0.1	0.3	0.4	0.3	0.2	0.1
HIST	2.0	4.9	6.9	6.8	4.0	3.9	4.5	5.7	5.4	5.4	-0.1
HLTED	0.0	0.1	0.1	0.1	0.8	0.0	0.1	0.1	0.2	0.2	0.1
HLTOC	0.0	1.4	1.6	1.9	0.1	0.3	1.3	1.3	1.3	1.3	0.1
HUMAN	1.0	1.7	1.7	1.6	1.5	1.3	1.2	1.4	1.5	1.5	-0.5
KIN	0.0	2.4	1.5	1.6	0.6	0.9	2.6	2.5	1.8	1.8	-1.0
LIS	0.0	0.4	0.5	0.4	0.3	1.2	0.5	0.3	0.5	0.3	0.0
LRNRE	0.0	3.4	1.4	2.1	0.0	0.3	3.9	3.7	2.3	1.0	-1.8
MATH	4.0	18.8	17.5	19.2	29.4	13.9	16.0	20.3	19.2	19.0	-1.0
MUSIC	1.0	2.2	1.9	2.2	2.7	1.1	2.8	3.0	2.3	2.3	0.0
PHIL	0.0	0.7	0.8	0.7	1.2	0.4	0.5	0.3	0.7	0.7	-0.4
PHYS	1.0	2.2	1.5	1.8	3.3	0.3	2.5	1.8	1.9	2.0	-0.3
POSCI	1.0	3.4	2.9	3.1	5.6	9.5	2.2	2.1	3.9	3.9	0.1
PSYCH	3.0	6.6	7.3	7.6	7.0	18.1	4.8	6.1	7.9	7.6	0.0
SOC	1.0	3.6	7.1	6.2	5.2	15.6	4.1	4.4	6.1	6.0	1.6
SPAN	0.0	1.7	0.7	1.1	1.7	0.3	1.2	1.0	1.2	1.0	0.0
VLET	0.0	0.8	0.6	0.5	0.1	0.1	0.7	0.6	0.5	0.5	-0.5
TOTAL	49.0	171.6	171.6	170.1	171.6	171.6	171.3	170.6	171.1	171.4	-13.3

Figure 1: College of Alameda’s Adjusted 2021-22 Proposed FTEF Allocations by Subject Area

FI_3 Establishing guidelines to reduce operational overspending and eliminate the structural deficit.

Guidelines to reduce overspending and eliminate debt have been established district wide through BP 6250 [FI_3.01] updated in 2019 and AP6250 [FI_3.02]. In addition, Board Goal IV: Fiscal Affairs, Action D calls for the Board to “Monitor the District budget to ensure spending is within budget and meets the needs of the District.” The Board has been closely monitoring overspending as described in the Board Goals Update [FI_3.03]. The Board feels it is imperative that the District has a secure and sustainable economic future and has created Goal IV to ensure financial accountability, responsibility, and stability.

PCCD has aligned budgeting and planning with the 5-Year integrated Financial Plan [FI_3.04] which has guided the District’s Tentative Budget [FI_2.04]. A comparison of the last five years of CCCC MIS reporting [FI_3.05] provides evidence that fiscal stability through sustainable fund balances and reserves have been implemented. The Board has reinstated regular Board Finance and Budget Committee meetings [FI_3.06, FI_3.07]. The Board receives regular finance updates as reported in Requirement 1. The PCCD Colleges have been working to align program review and annual updates with allocations. The College has continued

to analyze processes to find cost savings as reported in the Special Visit Team report (2020). The College has continued to analyze processes to find cost savings as reported in the Special Visit Team report (2020). The College of Alameda has reduced operational spending by adhering to FTEF allocations using the FTEF matrix [FI_1.04] and ensuring resource allocation processes through program review and annual updates.

FI_4 Adopting a Board policy to adopt sustainable fund balances and reserves

The Special Visit Team Report (2020) reported BOT adoption of BP6250 [FI_3.01, FI-4.01] which requires a 10 percent reserve exceeding the typical 5 percent reserve in other multi-college districts. As reported above, the CCCCCO MIS reporting shows sustainable fund balances and reserves [FI_3.05]. The Board receives regular finance updates (as reported in the Requirement 1 section above), and continues to monitor fund balances and reserves through regular Board Finance and Budget Committee meetings [FI_3.06, FI_3.07].

FI_5 Adopting a restructuring plan to improve efficiencies and accountability at the District office and the Colleges

The District engaged many consultants to help identify issues. The California Brain Trust (CBT) [FI_5.01] report suggested specific recommendations to restructure and improve efficiencies and accountability through reorganization.

Consider reorganizing the District office, streamlining the vice chancellor structure, and analyzing all positions as first tier (core-critical), second tier, or third tier; use analyses to ensure positions that are mission-critical and/or support core administrative functions are a priority; adhere to fiscal and legal staffing requirements; ensure internal controls are intact; avoid reliance solely on vacancies for personnel budget savings.

While the District followed through on some of these recommendations, the COVID-19 pandemic made hiring and restructuring very difficult. As noted in ACCJC's Special Site Visit Report 2020, the District has stabilized its leadership through several key hirings including the new President, December 4, 2020. The District has also hired numerous positions and is experiencing stability over the last six months. Recruitment and hiring records through August 2021 are included as evidence [FI_5.02]. These mission-critical hires have been key in improving organizational efficiencies.

Other District and College actions have contributed to the goals of restructuring. Upgrades and restructuring in IT to the new PeopleSoft 9.2 platform has, and continues to, improve efficiencies and accountability through technology, impacting restructuring plans. The Vice Chancellor of Finance and Administration and the Interim Executive Director of Fiscal Services have evaluated and improved business practices through detailed technical analysis and correction. In addition, some staffing positions were not filled during the COVID-19 campus closures for cost savings, which will provide opportunities for forward-looking restructuring that better account for evolving models of course offerings and student service deliveries. However, other key "mission-critical" staffing positions were filled such as the Interim Executive Director of Fiscal Services, Director of Academic Affairs - District Office, Presidents at two colleges and the Vice President of Administrative Services and College Directors of Financial Aid were created and are being filled.

The College and District began an overall restructuring plan under Chancellor Walter, but that momentum was lost in the District Chancellor's position turnover and broad challenges brought on by the COVID-19 pandemic and prioritizing emergency operations to maintain institutional continuity. The current Chancellor is actively working to ensure key executive staff are hired. The District is undergoing an important evaluation in response to Requirement 10 related to clearly delineating District and College functions. For this requirement, functions shared by the District and the PCCD Colleges are being clearly delineated and cross-checked with job descriptions and Board policy and procedure. A draft of the mapping and completion calendar are included as evidence that this process is well underway [FI_5.03, FI_5.04]. This work is slated to be completed in December 2021 as described under Requirement 10. Following clear delineations of functions, restructuring will occur based upon systematic planning and the assigned functions.

FI_6 Addressing all audit findings

Please refer to response to this issue in Requirement 2 above.

FI_7 Establishing strategies to improve the management of the OPEB debt

The Special Visit Team Report (2020) concluded that the District provided a financial plan for the OPEB Bond Program in the Adopted Final Budget. These strategies have continued in the 2021-2022 Tentative Budget and the outcomes have been beneficial.

The OPEB Bond Payment Plan has used the following two sources of funds to pay for the OPEB Bond Program:

- District’s General Fund
 - General Fund “OPEB Charge” or “Dedicated OPEB Appropriation”
 - Unrestricted General Fund or “Supplemental Appropriation”
 - OPEB Special Reserve Fund/Fund 69
- Trust I/Fund 94

Annual OPEB Bond Obligation

FYE	Dedicated & Supplemental Appropriation	Special Reserve Fund Draw	Trust I Draw	Total
2016	\$8,182,483	\$0	\$0	\$8,182,483
2017	5,852,760	0	6,875,000	12,727,760
2018	6,402,959	7,325,000	0	13,727,959
2019	6,171,012	0	8,125,000	14,296,012
2020	6,107,987	0	8,750,000	14,857,987
2021E	8,600,000	2,800,000	5,300,000	16,700,000
2022E	8,600,000	0	6,900,000	15,500,000

Source: District. In FY2017 and FY2018, the District deposited \$3.25 million from the general fund annually to Trust I. FY2021 numbers are from Final Adopted Budget, FY2022 numbers estimated.

The Board of Trustees unanimously approved a process to appropriate and establish procedures for determining whether Trust 1 has a surplus for making disbursements from Trust 1 for the purpose of making OPEB Bond payments in accordance with the Indenture, and for providing notice of such disbursements to the Retirement Board. The Board codified this process in Resolution 19-20/44 on April 7, 2020 [FI_7.01].

A recent update indicates the District is adhering to the Board’s OPEB Bond Payment Plan [FI_7.02] and indicates that the OPEB Plan is performing well [FI_7.03]. The latest OPEB update report to the Board is included as evidence of close monitoring [FI_7.04].

FI_8 Providing an executive-level staff turnover analysis and recommendations to retain these staff at the district

The Special Site Visit Report (2020) observed on page 7, “The College has stabilized the leadership at the college through finalizing the hiring of a College President in December 2020. The vice presidents are permanent positions with seasoned professionals that have been filling in during the recruitment of a new president,” and concluded on page seven that “Overall, the College of Alameda and District have stabilized executive leadership. The College hired a permanent president in December, each college has a permanent president as of December 4, 2020. The executive leadership at the District and colleges are demonstrating their commitment to understanding the turnover issues better and implementing strategies for retaining employees”

While many positions have been hired, many positions are currently still *interim*. The District and PCCD Colleges are demonstrating their commitment to understanding the turnover issues better and implementing strategies for retaining employees. Some turnover issues identified were attributed to health considerations, retirement, and managerial styles. The Grand Jury attributed staffing turnover to Board dysfunction [FI 8.01], stating on page 20 of the 2020-2021 Alameda County Grand Jury Final Report that: “Peralta has suffered from a revolving door of leadership in key administrative positions for years and its reliance on temporary/interim appointments only helped fuel district-wide instability.” Board training, self-evaluation and Board goals have improved this situation as evidenced by stability in the turnover.

The Acting Vice Chancellor of Human Resources & Employee Relations conducted a turnover analysis [FI 8.02] comparing turnover rates district wide with national averages and CEO turnover rates in California Community Colleges; see the following excerpted text from the analysis conducted:

Analysis:

Although overall turnover at PCCD is well within national and regional norms, the key area of concern regarding administrative turnover is related to the rapid turnover of the chancellor position. PCCD has had five (5) chancellors in the last five (5) years. The average tenure at the chancellor position for the most recent five (5) chancellors is 1.8 years, which includes the four (4) years served by one of the most recent five (5) chancellors. The average tenure for California Community College CEOs is 3.5 years, which is itself a concern for the state. This means that over the past five (5) years PCCD chancellors have served for only 51.1 percent of the time as the average California Community College CEO.

RECOMMENDATIONS:

1. All future permanent chancellors be given initial 4-year contracts with standard 4-year contract renewals for those chancellors performing to the satisfaction of the Board of Trustees.
2. All current acting and interim administrator positions be filled with permanent personnel by beginning of FY 22 – 23.
3. All permanent administrators be given initial 3-year employment contracts to help stabilize administrator staffing.
4. All satisfactorily performing administrators be given 4-year renewal contracts to maintain staffing stability.
5. All new interim administrator contracts be for 1 year with an automatic 1-year renewal provision to foster staffing stability.

The current Chancellor, who has made team-building a key strategy to address turnover, holds weekly Chancellor’s Cabinet meetings which have been beneficial to District morale and collective problem-solving [FI-8.03]. The College and District are making efforts to address turnover by focusing on staff development on diversity, equity, and inclusion. The Chancellor and the Board President attended DEI (Diversity, Equity, and Inclusion) training through the CCCC and have plans to incorporate DEI training district wide. As the College and District work toward a more positive and accountable organizational culture, they hope to attract and effectively retain leadership to reflect the excellence of the students and local communities that the District serves.

The current team has worked well together navigating complex issues surrounding return-to-campus planning and have met every evening during the first week of school at 5 p.m. to discuss three good issues and three difficult issues [FI 8.04]. The renewed emphasize on team-building has helped create a positive environment and sense of mutual support during difficult and uncertain times, which supports increased leadership retention and success.

Appendix A – Evidence Files

Evidence for Report Preparation (RP):

[RP1_COA_Action Letter_6_21](#)

[RP2_COASpecRpActLet_1_20](#)

[RP3_Requirement_FI Matrix](#)

[RP4_PCCDCalendarRep_7_26_21](#)

[RP5_Meetings_partic_topics](#)

[RP6_Expanded Chancellor's Cabinet](#)

Evidence for Requirement 1:

[1.01_CBT_Fiscal_Plan Phase2](#)

[1.02_PCCD_FCMAT_final_rpt](#)

[1.03_5yr_Integ_Plan12_2_19](#)

[1.04_Data Integ final 4_21](#)

[1.05_People_Soft_Upgrade](#)

[1.06_EdgeRock_SOW](#)

[1.07_EdgeRock_BOT 5_2021](#)

[1.08_EdgeRockWorklist 8_21](#)

[1.09_Data Integ to BOT 4_21](#)

[1.10_HuronSOW_8_21](#)

[1.11_BOT Goals Update_4_21](#)

[1.12_PBC Minutes](#)

[1.13_BAM Minutes](#)

[1.14_BAM TaskForce 5.21](#)

[1.15_Finan&Budget 06.22.21](#)

[1.16_InternAuditor Job Des](#)

[1.17_Pre-Audit_CLA_BOT 4.21](#)

[1.18_1.18 ChancellorRpt BOG12.20](#)

[1.19_Audit update 5.31.21](#)

[1.20_BOG FiscalCrises2.18.21](#)

[1.21_DistAdminProgRev 1.7.2](#)

[1.22_CCCCO MIS reporting](#)

[1.23_PCCD TentBudget 21-22](#)

Evidence for Requirement 2 and Fiscal Issue 6:

[2.01_PCCD Audit FY2020_3_21](#)

[2.02 BOG FiscalCrises2_18_21](#)

[2.03_Fiscal rpt BOG12_30_20](#)

[2.04 AP5130 FinAid Update5_21](#)

[2.05_2020 Audit Matrix UPDATE](#)

[2.06_PCCDFinanceOrgChart5_21](#)

[2.07_PeopleSoft Task Completion](#)

[2.08_EdgeRock SOW 5_21](#)

[2.09_PeopleSoft Phase IIAssets](#)

[2.10_Huron_SOW_8_21](#)

[2.11_EAPP_FA reapprovDOE_7_21](#)

[2.12_FA Training_GovernProcedure](#)

[2.13_Dist_FA MeetingMay-Aug 2021](#)

[2.14_FA Process Meetings May 2021](#)

[2.15_FA Process Meetings June 2021](#)

[2.16_FA Process Meetings July 2021](#)

[2.17_FA Process Meetings Aug_2021](#)

[2.18 AP5040_StudentRecords&Privacy5_21](#)

[2.19_PeopleSoftTask Comp_Record](#)

[2.20 AP-5130-Financial-Aid-3-2](#)

[2.21 PeopleSoftTraining_R2T4](#)

[2.22 FA Policy&Proced Manual_6_20](#)

Evidence for Requirement 3:

[3.01 DOE_FA_Approv7_22_2021](#)

[3.02 FA Training_Change_Govern](#)

[3.03 FA Policy&Proc Manual_6_20](#)

[3.04 EdgeRockSOW_BOTAgend5_21](#)

[3.05 FA Process Meetings May 2021](#)

[3.06 FA Process Meetings June 2021](#)

[3.07 FA Process Meetings July 2021](#)

[3.08 FA Process Meetings Aug 2021](#)

[3.09 EdgeRockWorklist_8_21](#)

[3.10 DistrictwideFA_Mtg4_20](#)

[3.11 PeopleSoft TrainDoc_R2T4](#)

[3.12 Merritt DOE_Site Visit_20](#)

[3.13 MerrittDOE_ExitLetter_20](#)

[3.14 DOE FA_visit Report_9_20](#)

[3.15 DOE_TechtReport_Final](#)

[3.16 R2T4_ExitCounselLetter](#)

[3.17 FA_ppt_BOT 2_21_20](#)

[3.18 PCCD_FinancOrgChart_2_21](#)

[3.19 EW Training](#)

[3.20_R2T4 Merritt Web Post](#)

[3.21 FA ppt_to BOT_3_21](#)

[3.22 DOE Followup_4_15_21](#)

[3.23_Cash_mgt_flow_4_19_21](#)

[3.24_Cash Management_8_21](#)

[3.25 AP5130-FA](#)

Evidence for Requirement 4

[44.01_BP2200_BOTResp&Duties](#)

[4.02_PCCD Board Goals](#)

[4.03_BOT DecRetreat Agenda](#)

[4.04_BOTRetreat Ethics](#)

[4.05_BOT Coop_Statement](#)

[4.06_BP2745_BOT-Self-Eval](#)

[4.07_BOT_Effect_Eval_20](#)

[4.08_BOT Self-Eval ACCJC_20](#)

[4.09_BOT Self-Eval ACCJC – 21](#)

[4.10_BOT SelfEval_Comp20&21](#)

[4.11_BOT Goals 2020](#)

[4.12 BP-2715-Code-of-Ethics-and-Standards-of-Practice](#)

[4.13_Grand Jury Rpt 2020-21](#)

[4.14 AP-3410-Nondiscrimination](#)

[4.15 AP3420-Equal_Emp_Opp](#)

[4.16_DivEquity & Incl_Resol](#)

[4.17 PCCD Flex_8_19_21](#)

Evidence for Requirement 5

[5.01_BOT_Coop_Statement](#)

[5.02_BOT_Retreat July 2020](#)

[5.03_BOT_Retreat Dec 2020](#)

[5.04_BOT_Retreat July 2021](#)

[5.05_BOT_Communication](#)

[5.06_BOT_Goals Update7_20_21](#)

[5.07 BP_AP Revi_thru 8.19.2021](#)

[5.08_Grand Jury Rpt 2020-21](#)

[5.09_Recruit Update_8_2021](#)

[5.10_BOT_Comp_Self-Eval](#)

[5.11_Return_to_Campus](#)

[5.12_Media Report PCCD](#)

[5.13_BOT_Agenda_july27](#)

Evidence for Requirement 6

- [6.01 BP2435 Chanc Eval](#)
- [6.02 BOT Goals Update 4.21](#)
- [6.03 BOT GoalsProg 7.19.21](#)
- [6.04 Chanc Job Desc](#)
- [6.05 BP-2430-Delegation](#)
- [6.06 Chanc Self-Eval 6.7.21](#)

Evidence for Requirement 7

- [7.01 GrandJuryRpt 2021](#)
- [7.02 BOTRetreat Agenda 7 21](#)
- [7.03 Recruitment Update 8 2021](#)
- [7.04 BOT Affirmation stmt](#)
- [7.05 BOT Webpage affirmation](#)
- [7.06 BOT Comm Protocol](#)
- [7.07 Board GoalsUpdate 7 21](#)
- [7.08 ACCJC Self-eval comp 2021](#)

Evidence for Requirement 8:

- [8.01 B2410 BOTPolicy&AdmProc](#)
- [8.02 AP 2410 \(2015\)](#)
- [8.03 BOTGoalsUpdate 2020-21](#)
- [8.04 CCLC BP AP Update38 8 21](#)
- [8.05 BP AP Analysis 8.2021](#)
- [8.06 Exp ChancCab_min_all](#)
- [8.07 BP AP Tskforce8.11.21](#)
- [8.08 Updated AP 2410](#)
- [8.09 AP2410 Workflow 8.20 21](#)
- [8.10 P&PMatrix 8.20.21](#)
- [8.11 P&P Matrix on web](#)

Evidence for Requirement 9

- [9.01 BP2430_DelegatAuthority](#)
- [9.02_BP7110DelegaAuthority_HR](#)
- [9.03_GrandJury_Hiring_Prob](#)
- [9.04_RecruitmentUpdate_Jan-Aug21](#)
- [9.05_Unan BOT mgt hiring7 21](#)
- [9.06_BOTSelf Eval 2020vs2021](#)
- [9.07_BOTGoalsUpdate 21](#)
- [9.08_CampusStatusUpdate8 5 21](#)
- [9.09_BP 7110 Update info](#)

Evidence for Requirement 10

- [10.01_Func_map_Comp 8 9 21](#)
- [10.02_COA Func Map 2020](#)
- [10.03_Expanded Cabinet 8 13 21](#)
- [10.04_ExpandedCabinet 8 16 21](#)
- [10.05_2021 PCCD Func Mapv2](#)
- [10.06_Func_Map Calendar](#)
- [10.07_PCCD_Link_Org_Chart](#)

Evidence for Fiscal Issue 1

- [FI_1.01_COA-EnrolMgtPlan2019](#)
- [FI_1.02 PCCD-SEM-Plan](#)
- [FI_1.03 PCCD_Enroll_Data](#)
- [FI_1.04 COA AllocMat21-22](#)
- [FI_1.05 SEMWORKS_rev](#)
- [FI_1.06 SEM PCCDRep 6 21](#)
- [FI_1.07 BOT GoalsUpdateEnrol](#)
- [FI_1.08 COVID BOT 2 21](#)

Evidence for Fiscal Issue 2

[FI_2.01_5yr_Integ_Finan_Plan](#)

[FI_2.02 SCFFStudyBOT 1_21](#)

[FI_2.03 SCFFupdate3_23_21](#)

[FI_2.04Tent_Budget_6_16_21](#)

[FI_2.05TentBudgetBOT 6_21](#)

Evidence for Fiscal Issue 3

[FI_3.01_BP6250_Budget_Mgmt](#)

[FI_3.02 AP6250_BudgetMgmt](#)

[FI_3.03 BOTGoalsUpdateDeficit](#)

[FI_3.04 IntegFinanPlan](#)

[FI_3.05 CCCCCO Fiscal Reports](#)

[FI_3.06 BOT Budget cmte](#)

[FI_3.07 BOT Budget_agenda](#)

Evidence for Fiscal Issue 4

[FI_4.01 BP6250 Budget Mgt](#)

Evidence for Fiscal Issue 5

[FI_5.01 CBT Phase 1](#)

[FI_5.02 RecruitUpdate8_21](#)

[FI_5.03_2021 FunctMapDraft](#)

[FI_5.04_Func_Map Calendar](#)

Fiscal Issue 6 see Requirement 2 report.

Evidence for Fiscal Issue 7

[FI_7.01 BOT OPEB resol_4_20](#)

[FI_7.02 OPEB Update 4.13.21](#)

[FI 7.03 OPEB rptBOT 6.8.21](#)

[FI_7.04 BOT_OPEB ppt6_8_21](#)

Evidence for Fiscal Issue 8

[FI_8.01 GrandJuryRpt_2021](#)

[FI_8.02 TrnoverAnalysis_8_21](#)

[FI_8.03 MemoChancCab](#)

[FI_8.04 Ret2Campus](#)

Appendix B – Abbreviations

(Add in After All College Reviews)