



# Accreditation Update Report

## Fall 2015

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### Overview

The response to the recommendations of the ACCJC External Evaluation Report and preparation for the College of Alameda Follow-Up Report began immediately following the conclusion of the site visit in Spring 2015. At the time of the site visit, the Visiting Team identified evidence of the college not meeting the Standards and/or Eligibility Requirements which resulted in 20 findings for the college and eight district findings. The Commission issued a sanction of probation. Post-haste, the College of Alameda Executive Council met and developed the *Blueprint for Excellence*, which was designed to begin the response to the findings, monitor and assess progress toward meeting ACCJC Standards and/or Eligibility Requirements and take advantage of the opportunity to build a college vision, and culture of accountability and institutional effectiveness.

This update outlines the results of these efforts and provides evidence of College of Alameda's progress toward satisfying both the College and District recommendations for review. The approach outlined was vetted through the College of Alameda participatory governance process. College of Alameda developed a response framework which included four areas that were deliberate and focused on building a culture of institutional effectiveness. The areas were: developing an intentional strategy, communication through the consultation process, considerations and building of campus infrastructure, and developing a completion timeline.

Below are highlights from the response framework:

- Developed, monitored and continued completion of *Blueprint for Excellence*
- Completed 13 of 20 recommendations
- Developed ACCJC Follow-Up Report/Completion Timeline
- College President and Accreditation Liaison Officer consulted with ACCJC on analysis of recommendations and approach to follow-up response
- Developed an assessment and gap analysis of campus structures
- Applied and Awarded \$150,000 grant to Participant in Institutional Effectiveness Partnership Initiative (IEPI) which provides an analysis and recommendations to increase institutional effectiveness. The first Partnership Resource Team visit was on October 21, 2015.

- Town Hall meetings have been implemented to ensure the campus community is kept apprised of accreditation progress and other pertinent information related to the governance of the college
- Continuous dialogue with key stakeholders in one-on-one weekly/monthly meetings and participatory governance committees
- Established President's Roundtable as a venue to engage community partners to obtain feedback and involvement in college planning process
- Redesigned governance structures to increase effectiveness
- Launched COA Research Agenda and began search process for Dean of Research and Planning
- Completion of first draft of Enrollment Management Plan
- Developed and implemented employee evaluation tracking system
- Developed and implemented a meeting management system to document reflection, dialogue and repository of evidence of actions taken by committees
- Prepared a crosswalk with College recommendations and District recommendations to begin tracking completion of District recommendations

The following documents provide a snapshot of the progress to date in satisfying the findings reported in the ACCJC External Evaluation Report. These documents include:

- College of Alameda Blueprint for Excellence
- College Recommendation Crosswalk with District Recommendations
- College of Alameda ACCJC Follow-Up Report and Completion Time

## BLUEPRINT FOR EXCELLENCE

### SORTED by Status of Completed or In-Progress

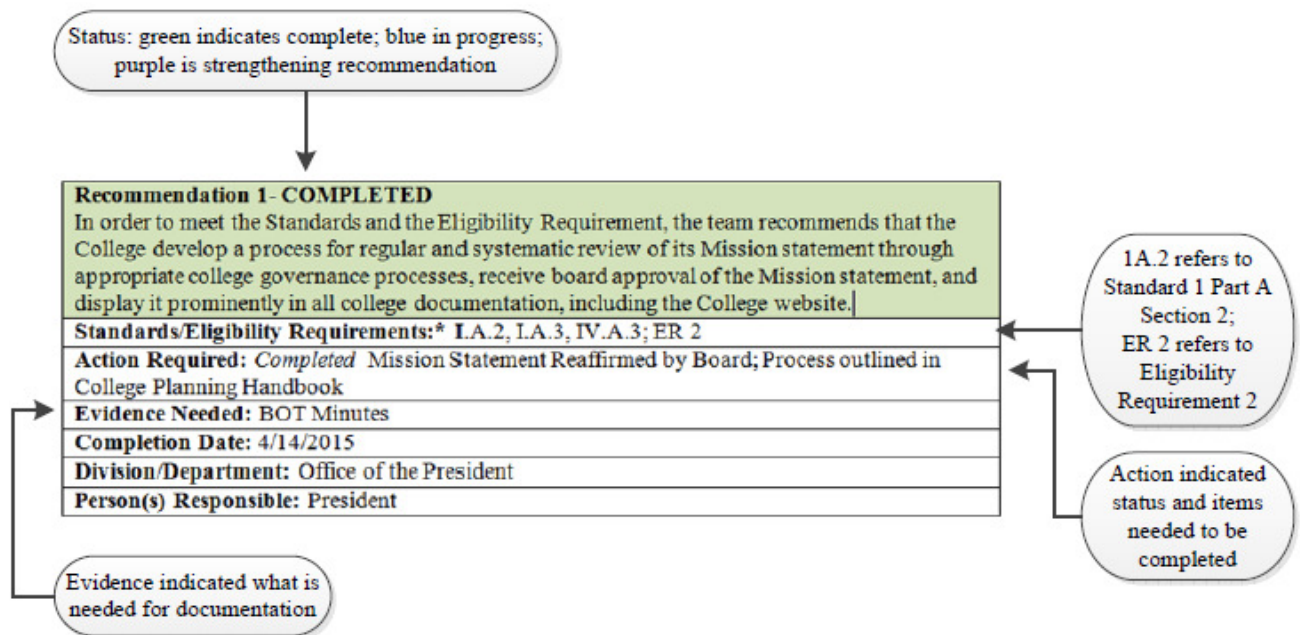
The *Blueprint for Excellence* is the College’s systematic process used to address ACCJC recommendations and provide a mechanism to identify progress, items/documentation required parties responsible and a general timeline.

Types of Recommendations:

**Recommendation of Deficiency:** Recommendations made when an institution is found to not be fully upholding a Standard or Eligibility Requirement. These begin “In order to meet...”

**Recommendation to Strengthen Institution:** Recommendations for an institution that relate directly to improving effectiveness. These recommendations give directions for improvement but do not conclude that the college is not upholding a Standard or Eligibility Requirement. These begin “To improve institutional effectiveness...”

Each recommendation is listed. A legend on how to read the *Blueprint for Excellence* is below:



**Recommendation 1- COMPLETED**

In order to meet the Standards and the Eligibility Requirement, the team recommends that the College develop a process for regular and systematic review of its Mission statement through appropriate college governance processes, receive board approval of the Mission statement, and display it prominently in all college documentation, including the College website.

**Standards/Eligibility Requirements:** I.A.2, I.A.3, IV.A.3; ER 2

**Action Required:** *Completed* Mission Statement Reaffirmed by Board; Process outlined in College Planning Handbook

**Evidence Needed:** BOT Minutes

**Completion Date:** 4/14/2015

**Division/Department:** Office of the President

**Person(s) Responsible:** President

**Process Narrative**

The College has a process for the regular and systematic review of its Mission Statement. The process is defined in the Planning Handbook page 8. The Mission Statement is reviewed every three year. As stated in the Self-Evaluation the most recent year long cycle was complete with College reaffirmation in November 2014. The Mission Statement is displayed on committee agendas, posted throughout campus, and printed in official college publications. Subsequent to the Self-Evaluation, the Mission Statement was re-adopted at the April 14, 2015 Board of Trustees meeting.

**Recommendation 2- COMPLETED**

In order to meet the Standards, the team recommends that the college ensure that the College mission and goals drive the planning and resource prioritization processes

**Standards/Eligibility Requirements:** I.A.4, III.A.1, III.B.1, III.D.1

**Action:** Follow budget calendar and develop a rubric

**Evidence:** Documentation of allocations and justification

**Completion Date:** 10/1/2015

**Division/Department:** Business and Administrative Services

**Person(s) Responsible:** Director of Business and Administrative Services

**Process Narrative**

The College follows an integrated planning and resource allocation model. The model is outlined in the College's Planning Handbook and budget calendar developed by the Office of Business and Administrative Services. Resource allocations are integral to the program review process. All budget requests submitted through program review are tied to institutional goals and learning outcomes. An updated Budget and Planning Calendar and Process schematic have been revised and are going through the consultation process.

**Recommendation 3- COMPLETED**

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

**Standards/Eligibility Requirements:** I.B.1-6, IV.A.3

**Action:** *Completed.* College has website and tracked over multiple years.

**Evidence:** Meeting minutes; website

**Completion Date:** N/A

**Division/Department:** Office of Instruction

**Person(s) Responsible:** VPI

**Process Narrative**

To ensure institutional quality the College adopted Institutional Set Standards and post results on the website annually. The Institutional Set Standards are brought to the college community. As referenced in the self-evaluation, institutional set standards discussion was incorporated in the Flex (opening] day presentation by the Vice-President of Instruction. Dialog surrounding Institutional Set Standards was widespread, including presentation at Academic Senate and College Council. The Planning, Research, and Institutional Effectiveness Committee reviewed the standard metrics and recommended revisions to College Council. The set standards are data-driven and follow methodologies adopted by the State Research and Planning Group. The evaluation of set standards is linked to the College 3 year planning and program review cycle. The Institutional Set Standards were approved by the College Council Spring 2015.

**Recommendation 4- COMPLETED**

In order to meet the Standard, the team recommends that formal processes be put into place to document the discussion of student learning.

**Standard/Eligibility Requirements:** I.B.1

**Action:** In Progress. Deans develop SLO rubric/cycle

**Evidence:** Documentation of IEC process; Taskstream reports

**Completion Date:** 12/1/2015

**Division/Department:** Office of Instruction

**Person(s) Responsible:** VPI

**Process Narrative**

The Discussion of student learning is pervasive at the College. Dialog and discussion of student learning is captured at Division, Department, and Participatory Governance Committee. Student learning outcomes is an agenda item for discussion at each academic division meeting. A report is provided to the College President to monitor progress on completion of assessment and analysis of SLOs.

**Recommendation 5- COMPLETED**

In order to meet the Standards and the Eligibility Requirement, the team recommends that the College assess its planning and program review processes to ensure an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, re-evaluation, and continuous improvement.

**Standards/Eligibility Requirements:** I.B.6, I.B.7, II.A.2.f; ER 19

**Action:** In Progress. As part of planning cycle the Program Review is undergoing revision and updated process launches Fall 2015

**Evidence:** Documentation of integrated program review and planning model

**Completion Date:** 9/30/2015

**Division/Department:** Office of Instruction

**Person(s) Responsible:** VPI

**Process Narrative**

The College is committed to continuous improvement and strives to exceed the Standards. As provided in the Self-Evaluation the College assesses its governance structure and decision making processes. The College updated its planning handbook based on improvement and revisions to processes. The 2014 Planning Handbook was modified to codify changes identified during the review cycle in 2013-14. The College participate is a review and revision of comprehensive Program Review documents and began the ongoing 3 year cycle in 2015-16.

To provide a framework for continuous improvement and transparent communication related to College planning, a series of publications and informational items have been produced and distributed to the campus community related to accreditation and planning. All documents are posted on the College website under accreditation.

**Recommendation 10- COMPLETED**

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

**Standards:** I.B.1, I.B.2, I.B.3, II.A.1.a, II.A.2

**Action/Eligibility Requirements:** *Completed.* Draft Plan. Developed and enrollment management committee

**Evidence:** Enrolment Strategies developed and implemented Fall 2015

**Completion Date:** 8/1/15

**Division/ Department:** Office of Instruction and Student Services

**Person(s) Responsible:** VPI/VPSS

**Process Narrative**

College teams attended two multi-day enrollment management workshops/academy in Summer 2015. An outcome of this work was the creation of a draft Enrollment Management Plan.

**Recommendation 11- COMPLETED**

In order to meet the Standard, the College should develop online tutoring for its distance education students.

**Standards/Eligibility Requirements:** II.B.1, II.C.1.a, II.C.1.c

**Action:** *Completed.* Develop/Contract Online Tutorial Assistance. Vendor Demos. Completed invoice

**Evidence:** Implement Online Tutorial

**Completion Date:** 10/30/2015

**Division/ Department:** Learning Resource Center

**Person(s) Responsible:** VPI

**Process Narrative**

In Summer 2015, the College coordinated presentations from several online tutorial vendors. After a series of presentations to faculty, staff and administrators, UpSwing was recommended. Contracts were completed in October 2015. The service will go “live” to student at the beginning of the Spring 2016 semester.

All students, including DE, have access to online tutorial, research, and skill building resources. All online resources are available 24/7.

**Recommendation 12- COMPLETED**

In order to meet the Standard, the team recommends that all personnel performance evaluations be made current according to the approved cycles.

**Standards/Eligibility Requirements:** III.A.1.b

**Action:** *Completed.* Check HR Records. Tracking spreadsheets for PT, FT, TRC faculty, staff, and administrators

**Evidence:** Completed report from HR

**Completion Date:** 8/30/15

**Division/ Department:** Business and Administrative Services

**Person(s) Responsible:** Director of Business and Administrative Services

**Process Narrative**

The College evaluated all employees based upon contractual obligations. The College has implemented an employee evaluation tracking system and maintains master spreadsheets indicating the evaluation periods for each employee. Reminders are given to supervisors at regular intervals to ensure compliance.



**Recommendation 13- COMPLETED**

In order to improve institutional effectiveness, the team recommends that all faculty evaluations require the integration and analysis of the assessment of student learning outcomes.

**Standards/Eligibility Requirements:** III.A.1.c; ER 13

**Action:** *Completed*

**Evidence:** Current Faculty Collective Bargaining Agreement incorporates SLO's as part of evaluations. Other Colleges in District met this Standard

**Completion Date:** N/A

**Division/ Department:** Human Resources and VPI

**Person(s) Responsible:** VPI

**Process Narrative**

The College (District) requires student learning outcomes assessment as a component of faculty evaluations. Collective bargaining language extracted from the PFT contract documents and address this recommendation.

**Recommendation 15- COMPLETED**

In order to meet the Standard, the team recommends that the College comply with the recommendation in the Department of Education Program Review dated January 5, 2015 in response to audit findings on data submitted to the NSLDS.

**Standards/Eligibility Requirements:** III.D.2.a, III.D.2.b, III.D.3.b, III.D.3.f

**Action:** **Completed**

**Evidence:** All finding from the NSLDS audit were responded to by the District. Other District Colleges met the Standard

**Completion Date:** N/A

**Division/ Department:** Student Services

**Person(s) Responsible:** VPSS

**Process Narrative**

The College specifically had the NSLDS report inconsistency and a follow up program review was conducted by the Department of Education. Also, the College is also not properly recording time spent on grants, not properly tagging federally funded capital assets, and had some residency issues with changing non-residency to residency without documentation. The District audit shows qualified opinions on both federal and state funding. The District developed a matrix to track responsibility and progress on the various findings.

There is sufficient oversight of the finances including grants and externally funded programs and auxiliary services. The default rate for student loans is at 18.7% well below the 30% rate set by the Department of Education. However, Financial Aid received a qualified opinion. The audit did produce a finding on the NSLDS which has been identified as a technical issue not a compliance or internal control deficiency. Financial Aid, Admissions and Records, and IT have formed a resolution team and have determined the causes of the inaccurate data that was sighted in the 2014 audit and in The Department of Education Program Review. [Linked to District Recommendation 2]

**Recommendation 17- COMPLETED**

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

**Standards:** IV.A.4, ER 21

**Action:** Complete Science Annex Report. Complete DE Report to Commission for Review

**Evidence:** Science Annex Report Complete and sent to ACCJC for action at 5/7/15 meeting. Draft DE Report sent for review 5/23/15 for ACCJC action in November.

**Completion Date:** Science Annex- 4/1/15. DE- 5/23/15

**Division/ Department:** VPI

**Person(s) Responsible:** VPI/ALO

**Process Narrative**

In Spring 2015, the College completed a Substantive Change Report for the Science Annex. The report was approved by ACCJC in May 2015. In Summer 2015 the College completed a Substantive Change Report for Distance Education. The report has been sent to ACCJC for action at their November 2015 meeting.

**Recommendation 18- COMPLETED**

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

**Standards:** IV.A.1, IV.A.2, IV.A.3

**Action:** Develop communication flow chart

**Evidence:** Employee/community survey

**Completion Date:** 12/30/15

**Division/ Department:** Office of President

**Person(s) Responsible:** President

**Process Narrative**

In consultation with the senior management team, Academic Senate, Classified Council, Associated Students and Collective Bargaining units it was determined that the communication protocols and reporting of outcomes made through the governance structure and operational processes need to be evaluated. This included, how recommendations are made and the actions of the president in response to those recommendations. A quantitative and qualitative approach was taken of the communication process. The quantitative methodology, using a campus scaled survey was used to measure employee understanding of how processes and procedures are operationalized to improve student learning programs and support services. The qualitative approach included meetings with key stakeholder groups to gather perceptions about processes and procedures. After a thorough assessment of the communication processes and governance structures, the follow gaps were identified: 1) The divisions were not holding regularly scheduled meetings to keep the departments abreast of pertinent campus information related to committee work and outcomes; 2) Committees held meetings with limited agenda items and minutes that did not accurately communicate issues, recommendations and action taken; neither agendas and/or minutes were posted on committee websites to provide open access to decision-making processes, recommendations and actions taken, and there was not a meeting management system in place to serve as a historical repository of recommendations, action taken by the president and operational processes.

The results of the assessment of the communication protocols was shared with the constituent groups through the governance structure and the following recommendations were made to the president and action taken:

- 1) Monthly division meetings will be held by the deans in instruction and student services.
- 2) All meetings will have agendas, minutes and supporting documents that will be housed in a dropbox.
- 3) Agendas and meeting minutes will be posted on the committee website for open access to the campus community.

A bi-monthly newsletter will be disseminated to the campus community to keep them informed of initiatives, activities, decisions and actions taken on campus related to accreditation, budget and governance issues.

**Recommendation 19- COMPLETED**

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

**Standards:** IV.B.2

**Action:** Develop communication flow chart

**Evidence:** Employee/community survey

**Completion Date:** 9/30/15

**Division/ Department:** Office of President

**Person(s) Responsible:** President

**Process Narrative**

In the evaluation of the collegial process used to establish values, goals and priorities, ensure there is a data-informed evaluation process for planning and analysis of external and internal conditions and integrated budget and planning that impact student learning outcomes and resource management. The management team held a retreat to review the processes to determine their effectiveness and strategy to ensure processes are in alignment with values, goals and priorities and effectively allocate and manage resources. The team identified three areas that needed to be streamlined and strategies to integrate budget and planning: 1) Modification of program review cycle; 2) Realign integrated budget and planning calendar; 3) Sync budget and planning calendar with district budget and planning calendar; 5) Maintain spreadsheets of budget priorities identified through the program reviews and annual program reviews, and; 6) Budget request process for one-time funds that are linked to values, goals and priorities.

These processes were discussed with all constituent groups on campus through the governance committees. It was agreed that we revisit the values, goals and institutional priorities through a campus wide retreat; create a process for one-time funds to ensure planning and budget are alignment with institutional values, goals and priorities, and revision of the budget and planning calendar that integrates the district processes.

The College President has established a President's Roundtable whose membership include community partners as a vehicle to solicit feedback and strategy on how the College can better serve the community and its constituents.

**Recommendation 6**

In order to meet the Standards and the Eligibility Requirement, the team recommends that the College document the systematic assessment of course-level, program-level, and institutional learning outcomes and use this assessment to direct college and program improvement.

**Standards/Eligibility Requirements:** I.B.1, II.A.2.b, II.A.2.e, III.A.1.b, III.D.4; ER 10

**Action:** In Progress. Current Cycle for FY14/15 Completed

**Evidence:** Taskstream reports

**Completion Date:** 1/4/2016

**Division/Department:** Office of Instruction

**Person(s) Responsible:** VPI

**Process Narrative**

The College documents its systematic assessment of learning outcomes using TaskStream. This was the year TaskStream was implemented. Course assessments are tied to the program review cycle. Clusters of courses undergo assessment each academic year. The Assessment, discussion of findings and adjustments to SLO are integrated with the program review cycle. Institutional Learning Outcomes (ILO) are reviewed by the Planning, Research, and Institutional Effectiveness Committee every 3 years. Recommendations are forwarded to College Council for adoption.

Program Level Outcomes are posted in TaskStream. The College has 23 programs. The College established cycle is assess program level outcomes within the program review cycle (3 years); hence each year a cadre of program undergo assessment. The College adopted a systematic curriculum review process to identify and deactivate courses that have not been taught in more than 6 semesters. These courses are deactivated and removed from the SLO assessment inventory. This clean-up increased the accuracy of reports generated from Taskstream.

**Recommendation 7**

In order to improve institutional effectiveness, the team recommends that the College document and use the assessment of student support services to engage in thoughtful reflection and improvement.

**Standards/Eligibility Requirements:** I.B.1, II.B.1, II.B.3.a, II.B.3.c, II.B.3.d, II.B.3.e, II.B.4, IV.A.

**Action:** In Progress. Services Areas began updating assessment plans in Spring 2015

**Evidence:** Unit plans

**Completion Date:** 12/30/2015

**Division/ Department:** Student Services

**Person(s) Responsible:** VPSS

**Process Narrative**

As a vital segment of the College all student services and program participate in program review. As part of program review student services reflect on service area outcomes to improve their program. Formal structured meets in Student services have been implemented to ensure continuous dialog and reflection on effectiveness of support service programs.

**Recommendation 8**

In order to meet the Standards, the team recommends that the College incorporate consistent and current data into the planning processes.

**Standards/Eligibility Requirements:** I.B.6, III.A.6

**Action:** In Progress. Completed Hiring Cycle for Research Position

**Evidence:** Job announcement and establish office; position being re-posted

**Completion Date:** 12/30/15

**Division/ Department:** Office of President

**Person(s) Responsible:** President

**Process Narrative**

The College relies on current data to guide the decision making process. Each year data sets are created to inform the program review process. Additional research data and recourses are provided through the Education Advisory Board. The College will be hiring a research position late Fall 2015. [Linked to District Recommendation 5]

In Fall 2015, during campus flex activities the College launch its Research Agenda. This included having a lecture on “Creating New Knowledge” which focused on the why and how to use research to created a research culture on campus. Additionally, the College subscribed to receive research support from the Educational Advisory Board, hired a research consultant to assist with strategies on how to use research and initiated the search for a Dean of Research and Planning.

**Recommendation 9**

In order to meet the Standards, the team recommends that the College develop and implement a process for regular and ongoing evaluation and assessment of its governance and decision making structures and process, and use the results to broaden employee participation and improve institutional effectiveness.

**Standards/Eligibility Requirements:** I.B.1, IV.A.5

**Action:** In Progress. Develop campus climate/employee survey

**Evidence:** Survey results

**Completion Date:** 12/30/15

**Division/ Department:** Office of President

**Person(s) Responsible:** President

**Process Narrative**

The College administered two surveys in Fall 2014 to evaluate campus climate and institutional effectiveness. As part of the cycle the annual Institutional Effectiveness Survey will be administered again in late November 2015 and again in Spring 2016. These surveys will include a Employee Satisfaction Survey and Campus Climate Survey. A crosswalk was developed to articulate the linkage between District accreditation recommendation and College accreditation recommendation to ensure seamless assimilation of actions, data, and interventions.

**Recommendation 14**

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

**Standards/Eligibility Requirements:** III.B.1

**Action:** *In Progress.* This was listed as a College Actionable Improvement Plan. Work began in Spring 2015. ADA Assessment

**Evidence:** Completed report

**Completion Date:** 12/1/15

**Division/ Department:** Business and Administrative Services

**Person(s) Responsible:** Director of Business and Administrative Services

**Process Narrative**

The College as part of its commitment to student learning and safe working conditions for all employees consistently assess facilities and mitigates any identified deficiency. To continue to meet this standard the College identified as an actionable improvement plan to complete a risk management assessment of college facilities. As part of the College's planning framework this process began in spring 2015 in collaboration with District General Services Department. An ADA RFP is being posted for companies to bid on the scope of work. [Linked to District Recommendation 3]

**Recommendation 16**

In order to meet the Standards, the team recommends that the Budget Allocation Model be assessed for effectiveness to provide fair distribution of resources that are adequate to support the effective operations of the College.

**Standards/Eligibility Requirements:** III.D.2.a, IV.B.3.c

**Action:** Examine current model and revise

**Evidence:** Complete revised model

**Completion Date:** 1/15/16

**Division/ Department:** Business and Administrative Services

**Person(s) Responsible:** Director of Business and Administrative Services

**Process Narrative**

The College is reviewing the integrated resource (budget) allocation process and modifying the descriptive graphic. The Annual Integrated Planning Handbook has been revised. Bi-annual Budget Forums by the Vice Chancellor of Fiscal Services and Director of Business and Administrative Services have been instituted to maintain a transparent budget process. [Linked to District Recommendation 8]

**Recommendation 20**

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

**Standards:** IV.B.3

**Action:** *In Progress*

**Evidence:** Functional Map included as evidence in Self-Evaluation Report

**Completion Date:** N/A

**Division/ Department:** Office of the President

**Person(s) Responsible:** President

**Process Narrative**

The College President and campus stakeholders have reviewed the delineation of operational responsibilities and functions of the District and those of the College. The President has assessed and identified areas needing to be redefined as the responsibility of the College and those of the District. This past year the District, a pilot process, has shifted the following responsibilities to the College: 1) campus-based research; 2) individual campus class schedules, and; 3) some facilities maintenance functions. [Linked to District Recommendation 6]



## Accreditation Crosswalk between College and District Recommendations

The table below illustrates the connection between specific College recommendation and corresponding District recommendation. The planning and actions taken to respond to the recommendations need to be linked. The District Office must comply with their recommendations in order for the College to adequately address all accreditation requirements.

| COA Recommendations   | District Recommendations<br>COA Report   | District Recommendations<br>District Report  |
|---|--|--|
|   | <b><u>District Recommendation 1</u></b><br><br>In order to meet the Standard, the team recommends that the District follow the 2014 audit recommendations and develop an action plan to fund its Other Post-Employment Benefits (OPEB) liabilities, including the associated debt service (III.D.1.c, III.D.3.c, III.D.1.c).   | <b><u>District Recommendation 1</u></b><br><br>In order to meet the Standard, the team recommends that the District follow the 2014 audit recommendations and develop an action plan to fund its Other Post-Employment Benefits (OPEB) liabilities, including the associated debt service (III.D.1.c, III.D.3.c, III.D.1.c).   |
| <b><u>College Recommendation 15</u></b><br><br>In order to meet the Standard, the team recommends that the College comply with the recommendation in the Department of Education Program Review dated January 5, 2015 in response to audit findings on data submitted to the NSLDS. (III.D.2.a, III.D.2.b, III.D.3.b, III.D.3.f)  | <b><u>District Recommendation 2</u></b><br><br>In order to meet the Standard, the team recommends that the District resolve comprehensively and in a timely manner the ongoing deficiencies identified in the 2013 and 2014 external audit findings (III.D.2.b, III.D.1.h)   | <b><u>District Recommendation 2</u></b><br><br>In order to meet the Standard, the team recommends that the District resolve comprehensively and in a timely manner the ongoing deficiencies identified in the 2013 and 2014 external audit findings (III.D.2.b, III.D.1.h)   |
| <b><u>College Recommendation 14</u></b><br><br>In order to improve institutional effectiveness, the team recommends the College collaborate with the District General Services Department of Risk Management to conduct a risk management assessment of College facilities and make recommendations to the College Facilities or College Health & Safety Committees that inform the College <b>Maintenance and Repairs Priority Needs List. (III.B.1)</b> | <b><u>District Recommendation 3</u></b><br><br>In order to meet the Standards, the team recommends that District General Services (DGS) work with college personnel to implement a plan to address total cost of ownership for new facilities and equipment, including undertaking critical deferred maintenance and preventive maintenance needs at the college in order to assure safe and sufficient physical resources for | <b><u>District Recommendation 3</u></b><br><br>In order to meet the Standards, the team recommends that District General Services (DGS) work with college personnel to implement a plan to address total cost of ownership for new facilities and equipment, including undertaking critical deferred maintenance and preventive maintenance needs at the college in order to assure safe and sufficient physical resources for students, faculty and staff (III.B.1, |

students, faculty and staff (III.B.1, III.B.1.a, III.B.2.a).  
III.B.1.a, III.B.2.a).

**District Recommendation 4**

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

**District Recommendation 4**

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

**College Recommendation 8**

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

**District Recommendation 5**

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

**District Recommendation 5**

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

**College Recommendation 20**

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

**District Recommendation 6**

In order to meet the Standard, the team recommends that the district clearly delineate and communicate the operational responsibilities and functions of the district from those of the colleges and consistently adheres to this delineation in practice; and regularly assesses and evaluates district role delineation and governance and decision-making structures and processes to assure their integrity

**District Recommendation 6**

In order to meet the Standard, the team recommends that the district clearly delineate and communicate the operational responsibilities and functions of the district from those of the colleges and consistently adheres to this delineation in practice; and regularly assesses and evaluates district role delineation and governance and decision-making structures and processes to assure their integrity and

College in meeting educational goals. (IV.B.3)

and effectiveness in assisting the colleges in meeting educational goals (IV.B.3)

effectiveness in assisting the colleges in meeting educational goals (IV.B.3)

**District Recommendation 7**

In order to meet the Standards, the team recommends the

Governing Board adhere to its appropriate role. The Board must allow the Chancellor to take full responsibility and authority for the areas assigned to district oversight (IV.B.1, IV.B.1a, IV.B.1.e, IV.B.1.j)

**District Recommendation 7**

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

**College Recommendation 16**

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

**District Recommendation 8**

In order to meet the Standards, the team recommends that the District systematically evaluate the equitable distribution of resources and the sufficiency and effectiveness of district-provided services in supporting effective operations of the colleges

(IV.B.3.b, IV.B.3.c, III.D.1.a, III.D.1.b, III.D.1.h).

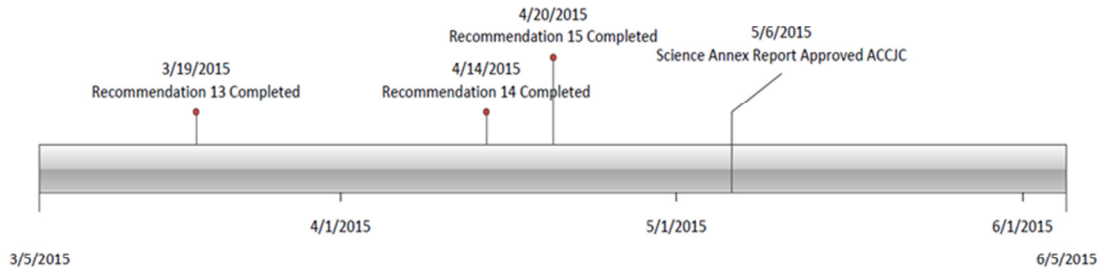
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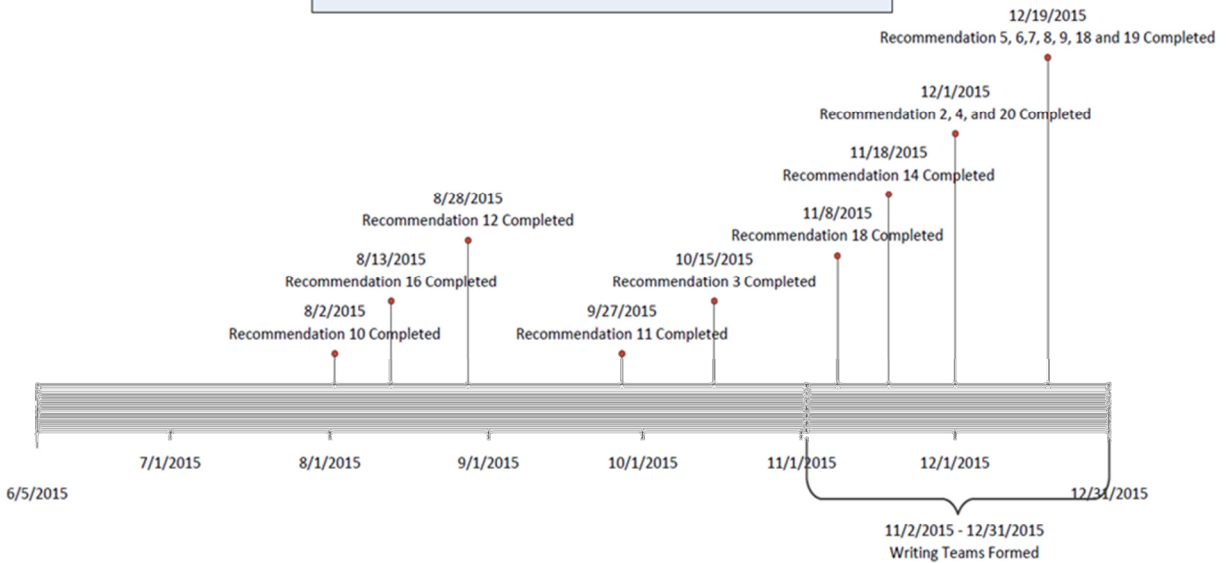
(IV.B.3.b, IV.B.3.c, III.D.1.a, III.D.1.b, III.D.1.h).

## Accreditation Follow-up Report Timeline

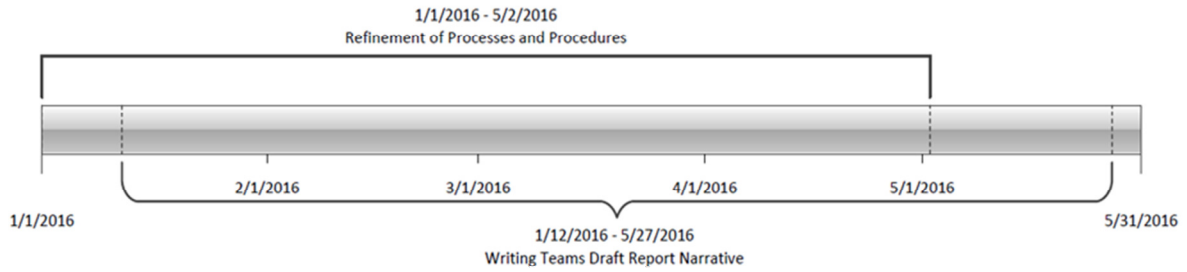
### ACCJC Follow-Up Report Timeline Spring 2015



### ACCJC Follow-Up Report Timeline Summer and Fall 2015



ACCJC Follow-Up Report Timeline  
Spring 2016



ACCJC Follow-Up Report Timeline  
Summer to Fall 2016

