Merced Community College District

Accreditation Project:
Gap Analysis, Report, and
Recommendations

September 21, 2011

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PPL, Inc.

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Background: Accreditation Sanctions

At its June 2011 meeting, the Accrediting Commission for Community and Junior Colleges placed Merced College on Warning. The Commission made its decision largely because of certain issues that the College has failed to address adequately since the last accreditation visit.

As noted in the Commission's *Accreditation Reference Handbook*, the Warning sanction is the first step along the road to losing accreditation. It indicates that the institution "has pursued a course deviating from the Commission's Eligibility Requirements, Accreditation Standards, or Commission policies to an extent that gives concern to the Commission." The next step, in the absence of adequate, timely corrective action, is Probation, which indicates that the institution actually "deviates significantly from the Commission's Eligibility Requirements, Accreditation Standards, or Commission policies, but not to such an extent as to warrant a Show Cause order or the termination of accreditation." The third step is a Commission order to the institution to "show cause why its accreditation should be continued." An institution under Show Cause has the burden of proof "to demonstrate why its accreditation should be continued." A college under any of these first three sanctions does retain its accreditation.

The final sanction, again in the absence of sufficient corrective action, is termination of accreditation.

> The U.S. Department of Education requires recognized accrediting bodies to terminate accreditation when an institution found out of compliance with Accreditation Standards fails to come into compliance within a two-year period. Consequently, the Commission will take action to terminate accreditation if deficiencies are not resolved within this period. Under extraordinary circumstances, the institution may be granted additional time when the Commission determines good cause for extension exists.

Termination of accreditation, of course, would be a tragedy for any community college, because it would lose access to all federal financial aid, and any credits a student earned after the college's loss of accreditation would not be transferable to other schools. An institution in such straits might have to close its doors, although alternatives to outright closure do exist; for example, the college could contract with another district, until it corrected its deficiencies enough to reapply for accreditation. That step was taken by Compton College, the only California community college to lose its accreditation in many years.

I want to be very clear about all these Commission sanctions, not to frighten anyone, but to highlight the severe consequences of inadequate action, to call attention to the fact that

the clock is ticking, and to convey a sense of urgency to the College community. As the reader will see below, Merced has made progress since the team's visit, but much more work is needed in numerous areas before the College is back in the Commission's good graces.

Review and Analysis Process

The College President asked me to carry out the following task and report on my conclusions.

- Evaluate the College's progress to date and make concrete recommendations on the direction of work needed to resolve each of the five urgent Evaluation Team Recommendations that the Commission cited in its Action Letter of June 30, 2011.

This report is based on my review and analysis of over 300 documents, including the following:

- The Accreditation Self-Study, Evaluation Report, and Commission Action Letter
- Existing District foundational statements (Vision, Mission, and Core Values)
- The Strategic Plan, which includes the revised foundational statements that are pending approval
- Selected minutes and other documentation produced by the Educational Master Planning Committee and the Instructional, Student Services, Administrative Services, Technology and Research, and Facilities Master Planning Committees, and other committees
- The Educational and Facilities Master Plan
- The Master Planning Handbook
- A sample of course, program, and institutional student learning outcomes (SLOs); associated assessments and results; and planned improvements
- A sample of comprehensive program reviews, annual updates, and other documents related to planning and program review from Instruction, Student Services, Administrative Services, and Technology and Institutional Research
- Documentation of the College's resource allocation process, with selected resource allocation requests, and actual allocations for 2011-12
- Documentation of dissemination and discussion of planning, data analysis, assessment results, resource allocation priorities, institutional effectiveness, and related information
- Documentation of student and employee survey findings and other research
- Documentation of human resources operations and plans
- Documentation of College governance structures and processes
- Documentation of Board development activities and plans, Board members' relationship to participatory governance structures, Board evaluation practices, and the Board Code of Ethics.
- Policies, procedures, structures, and processes associated with all the items listed above

In addition, with the expert logistical help of Stacey Hicks, I conducted structured interviews, some in multiple sessions, with the following people:

Ben Duran	Anne Newins	Marianne Tortorici
Mazie Brewington	Marie Bruley	Cherie Davis
Doug Kain	Richard Marashlian	Myshel Pimentel

I also met on campus with members of the planning, program review, and SLO teams, and on campus and via telephone and Skype with the College President and members of the Cabinet.

The findings in this report thus rest on a substantial amount of evidence, and I am confident that they accurately reflect that evidence. However, I have not read every possible document, nor have I interviewed every employee. To the extent that the information I have analyzed is not sufficiently comprehensive, or not entirely representative of the College's structures, processes, and issues, it is possible that my findings in some particulars might be subject to revision. Of course, it is up to the President and the College to decide what weight to give them, and how best to respond to my recommendations.

College Responses to Team Recommendations

Overall Observations

1. Warning is a serious Commission sanction that requires immediate and sustained corrective action involving the entire campus community.
2. All five of the Action Letter Recommendations involve the establishment and effective execution of formal processes related to assessment, planning, resource allocation and other decision-making, implementation, governance, and institutional improvement. In recent years, Merced College has invested significant energy and resources in the establishment of such processes, including Program Review, SLO identification and assessment, the deliberations of the Master Planning Committees, and the systemization of class scheduling and operational budgets. However, the College has had difficulty making meaningful progress in executing these processes, for several reasons.
   a. Like many small or young organizations—especially those that are relatively unconstrained by external pressures—Merced College, for its first several decades, evidently based its planning and decision-making to a large degree (though not exclusively) on personal relationships and informal, seat-of-the-pants, often hidden processes. That approach can work very well for a long time. But community colleges are increasingly constrained by external forces, from funding limitations to tightening regulations to accreditation standards. More importantly, in this day and time, first-rate colleges do not have the luxury of working by the seat of the pants any more: They must systematically adopt transparent best practices in institutional effectiveness in order to serve their students well and remain viable in the future. When they seek to do so, as Merced has done over the last few years, the change can be wrenching, and progress is often halting.
   b. In addition, the face of the College has changed significantly over the past few years. Half the current faculty reportedly arrived within the last seven years. Many longtime employees, including senior management, have departed, taking part of the institutional memory with them. New senior managers have introduced new styles, methods, and procedures to move the College toward more systematic operations that adhere more closely to standard practices in the field. New faculty association leadership has altered labor-management relations. All these changes (and more) in a relatively short time, added to the pressure of adapting to the pressing organizational necessities described above, make for an environment that is not very conducive to unity in moving the College forward.
   c. The College also appears to have encountered specific pockets of sometimes fierce resistance to the implementation of some assessment and improvement processes. Part of that resistance is no doubt due to the changes I have just noted. Some is reportedly due to inadequate knowledge of how to go about those processes. And some is reportedly related to the desire for additional compensation for the work involved.
   d. Reportedly, individuals within departments work well together, but in recent years the feeling of being part of a College-wide team has declined. Each department focuses on its own needs and issues, as one would expect, but reportedly pays

little attention to the needs and issues of other departments. This "silo effect" is not uncommon at community colleges, but it inevitably undermines collective efforts to improve institution-wide performance and address institution-wide concerns—such as an accreditation sanction. Unless the problem is faced squarely and overcome, it can eventually lead to cross-departmental antagonisms that are poisonous to employees, students, and the long-term health of the institution.

3. In my interactions with the College and my review of recent documents, I have detected less sense of urgency than I expected, particularly given the two-year drop-dead deadline for resolving the Recommendations. It is as though many people do not take the Commission's sanction seriously, or believe that others will do whatever is necessary to make everything all right.

4. The Commission's first three Recommendations relate to processes that are cyclical, and the Commission is seeking essentially the same end result in every context: Actual, documented implementation of institutional improvements based on the results of formal evaluation processes. (See *Sound Practice in Completion and Integration of Planning Cycles* below.) In the same vein, the Commission's action letters have moved toward stronger language in recent years than in the past, particularly when placing a college on Warning or Probation. Rather than writing, for example, "The progress report should demonstrate the institution's substantial progress on the recommendations," the Commission President is more likely to write, as she did for Merced, "The Follow-Up Report of March 15, 2012 should demonstrate that the institution has addressed the recommendations…, resolved the deficiencies, and now meets Accreditation Standards." In other words, the Commission wants to see not just intentions or merely progress, but demonstrable implementation of improvements and completion of cycles. Fully resolving the Commission's five urgent recommendations in this fashion in six months or less is a tall order for Merced College.

5. Some active and productive participants in the College's planning, assessment, and related processes, and in efforts to respond to the Recommendations, are reportedly beginning to resent bearing the lion's share of the load in these efforts. Gaining full reaffirmation of accreditation is the business of everyone at the College, not just the relatively small subset of people who, as at every community college, typically perform most committee service. All employees need to recognize the gravity of this situation, and a greater proportion need to step up and offer constructive engagement and active assistance in moving the College forward.

6. The Accreditation Committee at Merced reportedly comes into existence every six years for production of the Self-Study, and then fades away after that document is submitted, since it has no other defined responsibilities. In contrast, accreditation ought to be an ongoing process integrated with other collegial processes.

7. The President, two of the Vice Presidents, and some faculty members have served on one or more accreditation evaluation teams within the last three to five years. The extent to which other administrators, faculty, and staff have done so is unclear. Service on an accreditation team is an excellent way to gain perspective on one's own programs, services, and operations, and to gather ideas on best practices. It also provides invaluable insight on the evaluation process itself. I have no hard data to

support the assertion, but in my view, colleges with a significant number of people who have served on teams in the recent past are almost inevitably more effective in their own accreditation self-studies and more successful in demonstrating to visiting teams their adherence to the Standards than colleges that lack such experience.

8. Every college has negative aspects, since every college consists primarily of human beings. It is important to use the accreditation Self-Study , Follow-up Report, and other reporting processes to uncover those negatives and engage them straightforwardly, so that the College can improve. In my judgment, and based on the evidence I have analyzed, the Merced College Self-Study contained an unusually small number of negative observations about College practices and operations. It is, of course, misleading and unproductive to overemphasize the negatives, but it is also misleading and short-sighted, and can be hazardous, to underplay them. Sometimes a college can get away with it, but if evaluation team members sense a whitewash, they are more likely to recommend a sanction than if problems had been addressed head-on. Moreover, the college that ignores or downplays significant operational issues, even if the team fails to notice the lapse, loses an opportunity to confront, discuss, and solve the problems.

9. Although the issue did not rise to the level of a recommendation, the team pointed out that the College's written code of ethics does not include classified and management staff.

10. There is no College Council at Merced College to provide coordination, facilitation, and communication for shared-governance and other major College issues. From an organizational standpoint, the Educational Master Planning Committee is the closest thing the College has to such a council, but it focuses heavily on resource allocation issues.

11. The team encouraged the college "to consider examining the newly established (three years) participatory governance procedures to determine how effectively [they are] working for the campus as a whole," and suggested that the college "examine committee structures to determine if they support continuous improvement processes and are not overly burdensome to the individuals involved, and work to ensure that the voice of the classified staff is more evident college wide," although it did not include these specific ideas in any of its formal Recommendations. Evaluating all governance structures and processes on a regular basis, and making modifications as needed to make them more efficient and less burdensome, represent good practice and also meet ACCJC Standard IV.A.5.

12. The College did take a significant positive step this year in communication, participation, and transparency by inviting all classified staff to the Convocation, and making arrangements in the various offices to permit them to do so. The Convocation is now, and plans call for it to remain, a truly collegewide gathering of all employees.

13. Merced makes less use of institutional research than I would have expected for a college with its needs and resources.
    a. For example:
       (1) The Office of Grants and Institutional Research (OGIR) appears to offer limited support to the program review process, beyond the annually updated

instructional program review (IPR) datasets, and to the outcomes assessment process.

  (2) OGIR reportedly provides no support in the evaluation of the processes Merced uses for program review, SLO identification and assessment, planning, governance, and so on.

  (3) OGIR was not involved in supporting development of the Strategic Plan.

  (4) There is no established institutional process or rubric for setting research priorities. At present, the Vice Presidents are setting priorities for OGIR services.

 b. The reasons for this underutilization appear to relate at least in part to staffing.

  (1) The Vice President for Technology and Institutional Research was substantially involved in production research projects, such as the Institutional Effectiveness Metrics webpage. He departed in July 2011, removing significant capacity from the department; indeed, even the department's ability to maintain the projects on which he worked is now unclear.

  (2) The current OGIR manager specializes in grants and environmental scans, not in other production research.

  (3) Of the two research analysts, one ws on leave for a significant amount of time until recently.

  (4) Existing staff reportedly do not have much expertise in evaluation methodologies per se.

 c. The demand for institutional research resources, which inevitably outstrips the supply, is certain to rise over the next few years, in my judgment.

14. A recurring theme in the interviews was the lack of sufficient expert information technology staff to support the wide array of increasing campus needs, and a continuing failure to meet those needs. The evaluation team said that the Technology and Research Master Planning Committee was developing a "cross-campus assessment tool for end users of technology resources," which, if properly designed, could prove useful in addressing this issue. However, I was unable to find any evidence that such a tool is in fact under development.

Consultant Recommendations

1. It is crucial for the President, the Vice Presidents, and constituency leadership to overcome or set aside any differences they might have, unify their efforts, employ their skills to help all members of the campus community recognize the urgency of the problems the Commission has identified, and inspire and lead them to contribute actively to the solutions. Every group and every individual at the College must take responsibility for making meaningful contributions toward the common cause, or share responsibility for the College's failure to improve its effectiveness and gain full reaffirmation.

2. Merced is about to enter its sixth decade. It is no longer young, and, after the growth of recent years, no longer small. To remain viable in the future, the College must adopt well-defined, formal, documented structures and processes designed to improve and maintain institutional effectiveness, including assessment, planning, resource allocation, and communication—and then follow through with proper execution in all

areas. That does not mean that the personal relationships that make Merced a fun place to work should be forsaken, only that those relationships cannot be allowed to drive planning, resource allocation, and decision-making processes.

3. The College should consider establishment of a College Council as the top-level shared-governance body on campus, chaired by the President, with the Vice Presidents and the presidents of all constituency groups as members. To facilitate beginning this discussion, I have made some concrete suggestions about the purposes, roles, and functions of this Council, which are contained in the Model College Council section at the end of this report. Such a Council, properly constituted, can serve as a clearinghouse and forum for dealing transparently with crucial College issues, and help weave together the disparate interests that inevitably exist on campus.

4. As one of its first tasks, the College Council should coordinate an evaluation of the governance structures and processes on campus (including all shared-governance committees), analyze participation rates and practices in all constituencies, and make recommendations to break down silos; broaden meaningful participation; improve efficiency, perhaps through consolidation of functions into a smaller number of bodies; and thus both reduce and spread the burden that now falls on a relatively small proportion of people. It should also establish a schedule for periodic reevaluation going forward.

5. The College, through the appropriate governance process, should establish a permanent, standing Accreditation Committee. A formal procedure should specify member eligibility and the selection process. I suggest that the College consider the following model for Committee functions:

   a. The Committee and its members will become the expert campus resources on accreditation processes and requirements.
      (1) All Committee members will receive appropriate training on their duties, Commission standards, and Commission expectations for reports. (Note that Commission training can be useful, but by itself is not sufficient.)
   b. The Committee will guide and monitor the accreditation process for the entire college, including:
      (1) Develop timelines and recommend policies and procedures for accreditation, consistent with the guidelines provided by ACCJC.
      (2) Coordinate training for faculty, staff, and management with regard to accreditation requirements and related College policies and procedures.
      (3) Monitor progress on preparing reports, resolving recommendations, and other accreditation-related processes, and initiate corrective action where appropriate.
      (4) Provide assistance for or, if necessary according to established criteria, replace Committee or subcommittee chairs or members, if work is found inadequate at specified milestones.
   c. The Committee will provide a forum for ongoing campus dialogue on accreditation issues and practices.
   d. In consultation with the appropriate governance structures and processes, the Committee will recommend faculty and staff to the President for subcommittees as needed.
   e. Members will serve as co-chairs on subcommittees.

f. The Committee will recommend a pool of candidates to the President for editing the self-study under the supervision of the Accreditation Liaison Officer (ALO).

g. The Committee will review and provide input on midterm, follow-up, and other special reports to the Commission. If requested by the ALO, it will help draft such reports.

h. The Committee will report to the College Council.

i. Members and conveners will fulfill their responsibilities as described in an appropriately constructed Committee Responsibilities document.

j. Members will be willing to serve on accreditation teams.

6. The College should include realistic, accurate appraisals of its progress on the Recommendations and Standards in the Follow-Up Report, the midterm report, and the next self-study.

7. The College should update its written code of ethics to include classified and management staff.

8. The College should encourage all managers, supervisors, faculty members, and classified staff members, for the good of the institution and their own professional development, to volunteer for service on a Commission accreditation team, and to participate in formal accreditation training, at least once per six-year cycle.

9. The College should carefully evaluate its institutional research resources in light of its ongoing and anticipated needs in that area, and consider augmenting its research capacity through such measures as the following:

a. Convene a shared-governance advisory committee to establish research priorities and develop a rubric for applying those priorities to all research requests. OGIR can then apply the rubric, and the committee need meet only annually to evaluate the process and make any necessary revisions.

b. Establish, maintain, and disseminate a research calendar, to facilitate clarity and communication about research priorities and activities.

c. Disseminate information about available research services more effectively to the campus community.

d. Provide training as needed for OGIR staff in research methods and tools to improve their productivity.

e. Reconfigure existing staff duties to optimize service and efficiency.

f. Confirm the validity of the Institutional Effectiveness Metrics webpage, maintain the underlying data, and build on that tool to increase the distribution of research capacity across campus.

g. Hire additional staff with skill-sets suited to the College's anticipated needs.

10. On a regular basis, the College should systematically evaluate its information technology resources, its method of establishing priorities for allocating them to projects and tasks, and its process for monitoring the effective implementation of those priorities. The evaluation, consistent with Strategic Plan Goal Three, should produce an updated plan for concrete improvements. An appropriate first step would be a properly designed survey of users about their needs—particularly any pressing unmet needs.

11. The College should make this report available to all College personnel, and the President should urge them not to view the number and scope of its recommendations as discouraging. It is the nature of an analysis such as this to focus more on the work

that needs to be done than on what is in good shape. Merced College has many strengths, chief among them a corps of talented, energetic, and thoughtful people who are dedicated to the College and its students. The College should build on those strengths, and keep moving forward.

Team Recommendation 1: Program Review

In order to meet the standard and ensure that progress continues toward achieving the Sustainable Continuous Quality Improvement level of the Accrediting Commission for Community and Junior Colleges' rubric for program review, the team recommends that the college continue to apply the recommendations of the 1999 and 2005 comprehensive evaluation teams, fully implement its new program review process, and ensure that the process is ongoing, systematic and used to assess and improve student learning and achievement and that the results of program review are used to continually refine and improve program practices. (I.B.2, I.B.3, I.B.5, IIA, II.A.5, II.C.2, III.D.3)

- I.B.2: The institution sets goals to improve its effectiveness consistent with its stated purposes. The institution articulates its goals and states the objectives derived from them in measurable terms so that the degree to which they are achieved can be determined and widely discussed. The institutional members understand these goals and work collaboratively toward their achievement.
- I.B.3: The institution assesses progress toward achieving its stated goals and makes decisions regarding the improvement of institutional effectiveness in an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, and reevaluation. Evaluation is based on analyses of both quantitative and qualitative data.
- I.B.5: The institution uses documented assessment results to communicate matters of quality assurance to appropriate constituencies.
- IIA: The institution offers high-quality instructional programs in recognized and emerging fields of study that culminate in identified student outcomes leading to degrees, certificates, employment, or transfer to other higher education institutions or programs consistent with its mission. Instructional programs are systematically assessed in order to assure currency, improve teaching and learning strategies, and achieve stated student learning outcomes. The provisions of this standard are broadly applicable to all instructional activities offered in the name of the institution.
- II.A.5: Students completing vocational and occupational certificates and degrees demonstrate technical and professional competencies that meet employment and other applicable standards and are prepared for external licensure and certification.
- II.C.2: The institution evaluates library and other learning support services to assure their adequacy in meeting identified student needs. Evaluation of these services provides evidence that they contribute to the achievement of student learning outcomes. The institution uses the results of these evaluations as the basis for improvement.
- III.D.3: The institution systematically assesses the effective use of financial resources and uses the results of the evaluation as the basis for improvement.

Observations

1. Most of the essential elements of a sound program review process are in place at Merced, and a great deal of work by dedicated faculty, staff, and managers has gone into making that process happen. Many departments accomplished an impressive amount of thoughtful and productive work in the first round of program reviews some five years ago. Both Instruction and Student Services now have dedicated program review coordinators, who serve as resources to the programs, facilitate progress, and spearhead improvements. Resource requests based on program review flow into a resource allocation process that has become markedly more transparent in the last two years. In many departments and meetings, lively discussions of program review results and their implications for student learning evidently do take place. In these respects and others, Merced is in better shape than many of its sister community colleges have been.

2. Instruction's move to online program review using Curricunet was an important advance in principle, but the conversion was reportedly rushed, producing problems for users that increased their frustration and might have produced more resistance to participation than would have existed otherwise. In addition, the 2010-11 forms appear to have left behind some explicit linkages that the previously used templates contained, such as those among program SLO assessment results, planned improvements, and resource requests.
3. Quality control of program reviews is inconsistent.
   a. The peer review system in Instruction never got off the ground in 2010-11, reportedly because peer reviewers did not materialize as expected.
   b. According to the July 2011 Student Services Program Review Handbook, a quality control system is in place for submitted documents in that area (though it is unclear to me whether this process has been fully implemented yet). The Student Services program review coordinator provides formative feedback on drafts of each report. In addition, an Oversight Committee evaluates each submitted program review or update on six yes/no dimensions that focus mainly on document completeness and clarity. It then makes comments and recommendations, on the basis of which the program review team makes revisions before submitting the final report to the Student Services Master Planning Committee.
   c. Feedback on program reviews in the Technology and Institutional Research area was provided in meetings of the Technology and Research Master Planning Committee, but did not appear to be based on any formal criteria.
   d. I found no evidence one way or the other of quality control in Administrative Services program reviews.
   e. Evaluation and improvement of program review processes have been taking place at least since 2009 (see the Fall 2009 Accreditation Survey results). The 2011-12 forms in both Instruction and Student Services include a form for gathering feedback from participants to be used in process evaluations, but of course neither the evaluations nor the improvements have yet occurred.
4. The system for tracking and reporting overall institutional progress in program review was not clear to me. There is a report of instructional programs that have completed reviews, for instance, but it lists only 43 programs as of Spring 2010, a number that is inconsistent with the contention by some interviewees that the vast majority of programs have completed reviews. I found no consolidated report on program reviews completed in the other areas of the College, though all or nearly all programs in those areas have in fact done at least one program review.
5. Despite the improvements in program review over the past several years, the team found that Merced is only "working toward the proficiency level" in the Commission's *Rubric for Evaluating Institutional Effectiveness* for Program Review, when it is supposed to have achieved the Sustainable Continuous Quality Improvement (SCQI) level back in 2008. (The end of Recommendation 1 comprises a quote from that rubric at the SCQI level.) In my judgment, that finding was due primarily to two main problems, which clearly interact with each other:

a. Widespread inconsistent understanding and confusion among participants regarding the components and principles of program review. This issue can be addressed through systematic campuswide training.

b. Deficient integration among the pieces of program review that are in place, which is due in part to the structure of the forms used in the process. A well-designed program review form should lead the user straightforwardly through each step of the assessment-analysis-improvement goals-resource request process.

6. To resolve the Recommendation, improvements are needed in full and consistent implementation across the College, clear and consistent integration with institutional planning and resource allocation (see also Recommendation 3), campuswide dialogue, using results for continuous institutional improvement, and review and refinement of program review processes.

7. The meaning, scope, and application of planning components vary from program to program, and reflect a certain amount of confusion about the nature of these components. Such inconsistency undermines the effectiveness of the program review process, and the comparability of its products.

a. For example, "goal" is used in Merced program reviews in numerous ways, including the following:

(1) As an alternative way of stating the program mission or a primary program function

(2) As a comprehensive strategic initiative

(3) As a more narrowly focused aim for improvement

(4) As a measurable objective

(5) As identification of a needed resource

(6) As a learning outcome

b. Sometimes an objective functions as something else entirely, such as a resource request or a rationale for the existence of a goal.

c. The line of integration linking program assessments to analyses, improvement goals, and resource requests is often vague, broken, or nonexistent.

d. The distinction between describing the methods of measuring effectiveness on the one hand, and reporting and interpreting the results of those measurements on the other, is not clear to many participants, which results in redundant entries in their program reviews.

e. Actual implementation of improvements based on program review findings is reportedly rarely cited, and thus rarely evaluated.

f. Specific examples of such inconsistencies and confusion come from across the College.

(1) In a sample of 2011-12 Instruction program reviews on Curricunet, I found the following in early September 2011:

a) The connection between SLOs and the program's goals was often unclear. Most often, the program SLOs were merely listed.

b) The reported means of assessment sometimes applied to the Goal, and sometimes to the SLOs. Sometimes the Goal statement actually was an SLO; sometimes it was a resource. The evident confusion might have been due to the structure of the form: The title of the section is "Program

SLO Assessment," rather than just "Program Assessment," and appears just above the heading, "Program Goal Statement #1."

    c) Requests, when listed in the body of the program reviews, each showed a goal, but the nature of the link between the requested resource and the goal was often unclear. The resource request table does have a place to describe the relation to the goal "or SLO" selected, but the goal is not identified on each line.

(2) The annual update forms used in 2010-11 and the process and forms set forth in the July 2011 Student Services Program Review Handbook are more structured than the Curricunet forms used in Instruction, and in terms of clarity and simplicity, represent substantial improvements over the process and forms that Student Services formerly used.

    a) Each action plan is tied to a planning goal, and includes responsibilities, expected outcomes, costs, and a timeline. Each goal is related to the Strategic Plan, other master plans, and/or SLOs if applicable, and has measurable outcomes. Program SLOs are tied to Institutional SLOs, and each includes an assessment method, results of the assessment, analysis of the results, and improvements needed based on that analysis.

    b) However, some problems remain in terms of integration, based on the sample documents I reviewed.

        (1) The analyses of SLOs and of other measures do not comprise an integrated program assessment, and do not connect with Deficiencies; Deficiencies do not appear to connect with the Action Plans.

        (2) Personnel, Facilities, and Equipment/Supplies/Tech deficiencies are based on support or needs of the service area, without any reference to SLOs or analysis of other measures of effectiveness. Only Financial Deficiencies are to be explicitly tied to SLOs, "when possible."

        (3) Unmet Professional Development needs also are not tied to SLOs or analysis of other measures of effectiveness.

        (4) In some 2010-11 updates, listed goals were really just resource requests, and in one 2010-11 update, the action plans and expected outcomes in the Proposed Action Plan section simply restated the goal descriptions and projected measurable outcomes in the Planning Goals section, respectively.

(3) The last Administrative Services program reviews were done in 2008 and 2009. Plans reportedly call for at least annual updates in all offices during 2011-12.

    a) The structure of the program reviews called for goals and measurable objectives, measures of service effectiveness (typically in the form of a client satisfaction survey), a plan for improvement based on assessment of strengths and weaknesses, and resource requests with justifications.

    b) However, as in other areas, problems of integration were evident.

        (1) The intended conceptual distinction between program goals and objectives and the goals in the plan for improvement, which were supposed to be related to the program goals and objectives, was unclear.

(2) Some respondents appeared uncertain about the nature of a goal or objective, or the distinction between a goal and an objective. In one program, three stated objectives were actually a goal rationale, a resource need, and a goal statement. In another, the listed program goals were actually just function descriptions.

(3) Identified strengths and needs for improvement were often not clearly tied to the service effectiveness findings.

8. The former and present Instructional Program Review and SLO coordinators have been addressing some of these issues in a revision of the forms they are preparing for Curricunet. At the former coordinator's request, I provided a few additional suggestions to improve the clarity of the forms and to highlight the integration thread that should run from program assessments (including both SLOs and other student data) through analysis of the assessment results, identification of needed improvements, formulation of program goals, requests for resources to support achievement of those goals, and completing the cycle by considering progress on improvement goals made in the prior year.

9. In addition, the Academic Senate is considering a resolution to create a consolidated Instructional Program Review and Student Learning Outcomes Assessment Committee (IPRSLOAC) under the Curriculum Committee to take on several tasks, including quality control of instructional program reviews, monitoring completions, and training participants.

10. Interview respondents reported that many faculty members distrust the data they are given in the Instructional Program Review (IPR) datasets, to such an extent that they substitute their own performance reports. Such reported problems might be due in part to inconsistent definitions of a "program."

    a. A comparison of a sample of 10 Curricunet Programs of Study with the corresponding program definitions in the IPR datasets raised questions about possible discrepancies in three programs, and suggested the need for regular monitoring.

       (1) The Program of Study for the Accounting AA lists ACTG 53 as an option, but the dataset did not include that course.

       (2) The Chemistry AS dataset includes a large number of both Core and Elective courses that do not appear in the Program of Study.

       (3) The Mathematics AA dataset includes a large number of Elective courses that do not appear in the Program of Study.

11. My understanding is that Student Services, and possibly all other programs, will be moving to the Curricunet system for program reviews.

12. The apparent requirement for all programs to focus exclusively on student learning outcomes per se, as opposed to service outcomes for example, resulted in forced and not very meaningful outcome statements in some programs. I understand that in the next set of program review, programs will be permitted to define and assess service outcomes, which should reduce that problem.

13. Program reviews do not include any explicit evaluation of the program's overall effectiveness or viability, but rather focus on the outcomes and constituent elements of the program and how they could improve.

14. Processes for program review and for institutional planning and budget development are among the Title 5 academic and professional matters for collegial consultation, and at Merced are subject to mutual agreement between the Academic Senate and the Board.

Consultant Recommendations

See also *Consultant Recommendations* under Recommendation 3 below.

12. The College should provide systematic and rigorous training as soon as possible for all program review respondents on the components and principles of proper program review as applied at Merced College. (See also Recommendation 3.) The new IPRSLOAC, if it is approved, should play a prominent role in this training for Instruction programs, but training is also required in the other areas of the College. The results of training should include a common understanding of the distinct meanings of and relationships among at least the following concepts as used in a Merced College program review:
    a. Assessment (as applied to outcomes, to other performance measures, and to the program as a whole)
    b. Assessment measures
       (1) Outcomes
       (2) Other performance measures
    c. Goals
    d. Objectives
    e. Outcomes
       (1) Student learning outcomes
       (2) Service or administrative outcomes
    f. Action Plan/Plan for Improvement
    g. Deficiency
    h. Resource
13. Given this common understanding, and the need for Merced to implement (and demonstrate to the Commission) full integration of program review, planning, and resource allocation, the College should bring the structure of program review more into alignment across all programs with respect to the elements listed in *Effective Integrated Program Review, Annual Planning, and Resource Allocation with Outcomes* on page 43. That does not mean that all the program review forms necessarily should look the same, although they could (particularly given the move of most programs to Curricunet). Some program review considerations in noninstructional programs differ from those in instructional programs, for example. But it does mean that the College should move as quickly as it can to the point where every program review includes the following elements at minimum:
    a. Assessment of program effectiveness using appropriate measures (including applicable outcomes) and methods
    b. Assessment of the effects of any previously implemented improvements, and progress on any previously established goals and objectives
    c. Analysis of the results of the assessments

d. Analysis of the implications of and for higher-level plans and outcomes at other levels

e. Specific goals clearly based on analysis results, to maintain or increase effectiveness and/or to facilitate achievement of outcomes

f. Measurable objectives for each goal, including timelines and identification of those responsible for ensuring progress

g. Resources demonstrably required to achieve each objective or make significant progress toward each goal

14. In conjunction with the training mentioned above, the College should establish a schedule of recurring opportunities for campuswide dialogue on program review results, outcomes assessment, and resource allocations in relation to the improvement of student learning and institutional effectiveness. Such forums, workshops, and/or other experiences should be designed to help break down departmental and constituency boundaries, and to enrich, enliven, broaden, and make permanent the productive conversation about student learning and institutional effectiveness that makes a community college a great place to be, for both educators and students.

15. The College should systematize quality control of program review across the institution, to ensure that all programs participate regularly in the process, and that they take it seriously as a means to improve student learning and institutional effectiveness. I suggest that an ad hoc task force composed of representative members of the new IPRSLOAC (if it is approved), the Student Services Oversight Committees, TRMPC, and ASMPC coordinate these efforts and make appropriate recommendations to the Educational Master Planning Committee.

16. The College should formalize and document a system for the periodic evaluation and improvement of all structures and processes associated with integrated planning, evaluation, resource allocation, and decision-making, including program review.

17. The College should follow through on opening up program assessment to include, where appropriate, not just SLO achievement, but also service outcomes and other measures relevant to program effectiveness.

18. The College should establish a file or database that tracks and reports progress on program review completions across the institution, and update it at least annually. All Master Planning Committees, constituency leadership, and senior management should receive a copy of the completions report after every update, so that the entire College remains well-informed about the status of program review. If all program reviews eventually reside on the Curricunet system, then that system should provide the requisite tracking and reporting mechanisms.

19. The College should establish a process to ensure consistency among the set of courses that defines each instructional program in the IPR datasets, the corresponding set of courses listed in the Program of Study in Curricunet, and the corresponding set of courses that comprise the program for which program SLOs have been defined. For example, before beginning each comprehensive program review or annual update, instructional program faculty could check for consistency among these course sets. If they uncover discrepancies, they should initiate immediate corrective action, and the responsible data custodian should make corrections in timely fashion, before the faculty begins work in earnest on the review or update.

20. The College should consider adding to program review an overall evaluation of program effectiveness, health, or viability.

Team Recommendation 2: Student Learning Outcomes

To meet the standard and ensure that the proficiency level of the Accrediting Commission for Community and Junior Colleges' (ACCJC) rubric for student learning outcomes is reached by the fall 2012 deadline established by the ACCJC, the team recommends that the college continue its efforts to fully implement the recommendation of the previous team and ensure that student learning outcomes and assessment are ongoing, systematic and used for continuous quality improvement regardless of location or means of delivery; dialogue about student learning is ongoing, pervasive and robust; evaluation and fine tuning of organizational structures to support student learning is ongoing; student learning improvement is a visible priority in all practices and structures across the college; a timeline indicating how the college will meet the Commission's fall 2012 requirement of proficiency is created and published; and learning outcomes are specifically linked to program reviews. (II.A.1, II.A.1.a, c, II.A.2.a, h, II.C.2, III.A.1.c)

- II.A.1: The institution demonstrates that all instructional programs, regardless of location or means of delivery, address and meet the mission of the institution and uphold its integrity.
- II.A.1.a: The institution identifies and seeks to meet the varied educational needs of its students through programs consistent with their educational preparation and the diversity, demographics, and economy of its communities. The institution relies upon research and analysis to identify student learning needs and to assess progress toward achieving stated learning outcomes.
- II.A.1.c: The institution identifies student learning outcomes for courses, programs, certificates, and degrees; assesses student achievement of those outcomes; and uses assessment results to make improvements.
- II.A.2.a: The institution uses established procedures to design, identify learning outcomes for, approve, administer, deliver, and evaluate courses and programs. The institution recognizes the central role of its faculty for establishing quality and improving instructional courses and programs.
- II.A.2.h: The institution awards credit based on student achievement of the course's stated learning outcomes. Units of credit awarded are consistent with institutional policies that reflect generally accepted norms or equivalencies in higher education.
- II.C.2: The institution evaluates library and other learning support services to assure their adequacy in meeting identified student needs. Evaluation of these services provides evidence that they contribute to the achievement of student learning outcomes. The institution uses the results of these evaluations as the basis for improvement.
- III.A.1.c: Faculty and others directly responsible for student progress toward achieving stated student learning outcomes have, as a component of their evaluation, effectiveness in producing those learning outcomes.

Observations

1. General
   a. The team found that Merced is at the Development level of implementation of SLOs overall, based on the Commission's *Rubric for Evaluating Institutional Effectiveness*. The Commission requires it to be at the next level, Proficiency, by Fall 2012.
   b. Assertions in the Self-Study concerning the extent of SLO identification and assessment at all levels were not accurate. For example, the following language appears on page 73: "The College has developed, implemented, and is in the process of assessing SLOs for 100 percent of its programs, courses, and all student services programs. Institutional SLOs also have been created and are assessed as part of course and program assessments. Ongoing assessment occurs

for all programs and student services, with approximately 35 percent of college courses being assessed regularly." In fact, nowhere near all program SLOs have been assessed, and assessment of ILOs has not even begun. Such inaccurate assertions, even assuming they are inadvertent, are inappropriate, misleading, and hazardous to the accreditation health of any college that makes them, and represent a poor model of institutional behavior.

   c. Documentation of SLO assessment, analysis, and implementation of planned improvements to complete the cycle at each level—course, program, and degree/institution—is scattered in multiple places across the College. I have found no systematic evaluation of overall progress toward the Proficiency level. Consequently it is unclear whether the College's progress on learning outcomes will be sufficient by Fall 2012 to pass muster at the Proficiency level.

   d. Fall 2009 Accreditation Survey Results
      (1) All employees who expressed an opinion recognized that SLOs are emphasized in the curriculum, but fewer thought that they are used meaningfully to improve student learning.
      (2) The majority of employees in all categories agreed that the "College community engages in dialogue about continuous improvement of student learning." My discussions with College employees, however, indicates that this dialogue occurs in pockets, not widely across the institution.

   e. Recommendation 2 actually calls for the College to go beyond Proficiency and achieve Sustainable Continuous Quality Improvement (SCQI) regarding student learning outcomes, presumably by Fall 2012. The College could appeal the language of this recommendation, and ask the Commission President in effect to replace the SCQI phrasing with Proficiency phrasing. Alternatively, it could simply note in the Follow-Up Report that the Recommendation as written would require progress on SLOs beyond the timeline the Commission established three years ago, and that the College has focused on achieving the characteristics of Proficiency, while working hard toward SCQI. In the latter case, it would probably be a good idea for the College President to notify the Commission President of the issue, and of how the College plans to deal with it.

2. Course SLOs
   a. According to the Spring 2011 report to the ACCJC, 43 percent of all college courses have ongoing assessment of learning outcomes. This figure is based on a course assessment index maintained by the former instructional program review and SLO coordinator. Although the ACCJC SLO rubric does not actually specify that SLOs and authentic assessment be in place for *all* courses in order for an institution to reach Proficiency, the implication is there. So to be safe, the proportion of active courses with ongoing assessment of SLOs should be approaching 100 percent by Fall 2012.

   b. The documentary evidence indicates that initial training in the development and assessment of course SLOs was strong and consistent with sound practice in the field.

   c. It also demonstrates that many faculty and departments have been actively engaged and deeply interested in course SLO assessment and the improvement of

learning, despite indications from other sources that some faculty are not so involved.

d. The course SLO assessment forms are impressive. They are simple and straightforward, and yet elicit almost all the most important information pertaining to SLO attainment in a mere two pages. They identify participants, link the course SLOs to program and institutional learning outcomes, and report any improvements needed in both the program and the SLOs themselves. The samples I consulted by and large showed serious consideration of the issues and findings, and reasonable conclusions regarding necessary improvements. The only piece missing is the answer to the following question: To what extent did the improvements undertaken as a result of the last course SLO assessment cycle enhance student learning?

e. As a stopgap, indirect measure, grade distributions have been used to gauge course SLO attainment in many cases. In my judgment, while a sound analysis of grade distributions is an important component of evaluating student performance and institutional effectiveness, it offers very little insight on the achievement of SLOs per se. Years ago, the call for defining learning outcomes arose in part because grades were regarded as a poor gauge of student learning. Each A-F grade would have to be tied explicitly and rigorously to a certain level of achievement of course SLOs for that situation to have changed significantly.

f. Surveys of students regarding their own perceptions of SLO attainment have also been also commonly used, in part because they are relatively easy to administer and analyze. The statistical reports on those student surveys present results three ways in graphical form, and with proper training are easy to understand. However, the person who provided support for creation and analysis of those surveys reportedly is no longer available, so the survey method might not be available for 2011-12. The method(s) to which faculty will turn for course SLO assessment is unclear.

g. More direct measures of course SLO attainment, such as common exam questions or rubrics for gauging performance, are used but are still relatively rare, judging from the samples I have seen. The unavailability of the survey method might encourage more faculty to design and use direct measures.

h. All programs in Instruction have reportedly created SLO Grids to show the relationship among course SLOs, program SLOs, and institutional learning outcomes.

3. Program SLOs

a. According to the Spring 2011 report to the ACCJC, 68 percent of all College programs have ongoing assessment of learning outcomes. The source and reliability of this figure are unclear to me.

b. Instructional

(1) Program SLOs have been established for all active programs, appear in all instructional program reviews, and are published in the College Catalog.

(2) The nature and extent of program SLO assessment in Instruction are not at all clear, despite the report to ACCJC. I have been unable to find any credible documentation that would support the 68 percent figure or any other. According to one knowledgeable interviewee, assessment of program SLOs

reportedly has been largely indirect, relying on a trickle-up effect from assessment of course SLOs, but I have not seen any direct evidence even of that approach. Assessment of program SLOs based on achievement of course SLOs can work, but the mapping between the two sets of SLOs must be clear and rigorous, and the assessment methodology must be designed and executed properly.

   c. Noninstructional

     (1) Program SLOs, assessment methods, assessment results, and analysis are to be listed in all Student Services program reviews, according to the July 2011 Student Service Program Review Handbook. In the two 2010-11 annual updates I consulted, assessment results were reported and analyzed in one but not in the other. Each program is supposed to use the analysis to identify needed improvements, either in the SLOs or in the services provided, though that linkage is inconsistent (see Recommendation 1 above). A survey now in draft form will ask students to rate their satisfaction with each service, so presumably each program will be establishing service outcomes and criteria related to student satisfaction for 2011-12. Student Services reportedly has established a single common SLO for all programs related to use of technology, and the survey will also provide some information related to that SLO.

     (2) Technology and Institutional Research reported program SLOs for each of its units, with ILO links and measurement methods, in the Technology and Institutional Research Program and Budget Planning Processes manual, April 2009; the Office of Grants and Institutional Research assessed its outcomes in its 2009 program review.

     (3) Administrative Services program SLOs have not been established, though the program reviews in that area do include some objectives that would qualify as performance indicators. They also include satisfaction survey results, but have not established service outcomes related to client satisfaction.

4. Institutional Learning Outcomes (ILOs)

   a. Five ILOs were established several years ago, and mapped to GE Breadth requirements. The connections between program SLOs and ILOs are documented in the SLO Grids submitted in program reviews in Instruction, and in program review reports in all Student Services and some Technology and Institutional Research departments.

   b. Assessment of ILOs has not yet begun in earnest.

5. The Board relies primarily on the Academic Senate in the academic and professional matters of curriculum, degree and certificate requirements, grading policies, and standards or policies regarding student preparation and success, all of which intersect with SLOs. Pursuant to that reliance, for example, the Board adopted a November 2004 Academic Senate resolution on principles of assessment of student learning outcomes, which sets forth the purposes of assessment, how it is to be used, and the fact that "faculty, in consultation with the entire college community, will shape and design institutional assessment activities and will identify the core knowledge and skills that our students need to master." Most faculty reportedly understand and accept the responsibilities described in this Board-approved resolution, but some do

not, and in fact refuse to participate in the outcomes assessment process without additional compensation.

6. See *Observations* under Recommendation 3 below regarding training.

Consultant Recommendations

See also *Consultant Recommendations* under Recommendation 3 below.

21. The College, under the leadership of the Academic Senate, should immediately make it a top campuswide priority for 2011-12 and Fall 2012 to fulfill all requirements of the Proficiency level on the Commission's SLO rubric.
22. By the end of October 2011, the College should create and publish a timeline for all the activities intended to support the achievement of Proficiency.
23. The College should add a section to the course SLO assessment form in which faculty report the extent to which any improvements undertaken as a result of the last course SLO assessment cycle enhanced student learning.
24. The College should require explicit documentation of the entire SLO cycle at the program and institutional levels, perhaps using the Course SLO Assessment form as a model. Documentation should include identification and implementation of planned improvements, and subsequent evaluation of the results of those improvements in terms of student learning. I suggest integrating the program-level cycle into the program review process in all areas.
25. The College should immediately establish and maintain a database that reliably tracks and accurately reports the status of every course SLO, program SLO, and ILO, and sets forth a firm schedule for ongoing, systematic SLO assessment and institutional improvement. The database should be updated at least annually, before each ACCJC Annual Report is due, and a consolidated report of SLO status at all levels, along with the schedule for the next year, should be disseminated to the campus community.
26. The Academic Senate should take the leadership in broadening the dialogue about assessing and improving student learning to the campuswide level. For instance, it should make use of the excellent models of assessment and improvement that faculty in particular departments have provided by asking them to share them in campuswide Learning Improvement Forums. (See also *Consultant Recommendations* under Recommendation 1 above.)
27. The College should expand the assessment toolbox to encourage more direct measurement of the achievement of course SLOs, rather than relying heavily on final grades and student surveys.
28. If Student Services intends to assess service outcomes for 2011-12, it should identify them prior to administration of the student satisfaction survey (if it has not already done so), to ensure that the survey adequately addresses those outcomes.
29. Administrative Services programs should identify at least one measurable service outcome each, and assess those outcomes appropriately as part of the 2011-12 program review update process.
30. Offices that intend to collect data using student or client surveys as part of their program assessment process should consult available resources before administering the surveys to ensure that the surveys are designed properly to elicit the most useful

information. In addition, when using survey data for this or any other purpose, offices should follow sound research practices in reporting, analyzing, and interpreting survey results. For example, the response rate should always be included in reporting survey results.

31. The Office of Instruction, in consultation with appropriate groups and offices, should immediately confirm appropriate assessment methods for, and coordinate assessment of, the ILOs, and establish a schedule for completing the ILOs cycle, to include the following steps, no later than Fall 2012:

    a. Make any necessary preparations to apply the assessment methods already chosen for the ILOs.

    b. Establish a criterion for each ILO, achievement of which demonstrates the desired degree of institutional effectiveness (if that has not already been done).

    c. By the end of Fall 2011, assess achievement of each ILO; analyze the results to establish a baseline; and identify and plan for needed course, program, or service improvements or ILO modifications, if any.

    d. Implement identified course, program, or service improvements, and/or modified ILOs, beginning in Spring 2012.

    e. By the end of Fall 2012, reassess achievement of each ILO; analyze the results; identify and schedule needed course, program, or service improvements or ILO modifications, if any; and continue the cycle.

32. The College should complete a systematic evaluation of SLO structures and processes at all levels by Fall 2012, perhaps in conjunction with the Learning Improvement Forums mentioned above (or similar campuswide dialogue opportunities). Based on the evaluation results, it should identify needed improvements in the structures and processes, and implement them in Spring 2013 if possible, but no later than the beginning of Fall 2013.

Team Recommendation 3: Integrated Planning, Evaluation, Resource Allocation, and Decision-Making Process

In order to meet the standard and to ensure that the college progresses toward the Sustainable Continuous Quality Improvement level of the Accrediting Commission for Community and Junior Colleges' rubric for planning, the team recommends that the college continue to apply the recommendations of the 1999 and 2005 comprehensive evaluation teams and ensure that its established planning processes include ongoing and systematic evaluation and planning with clearly established timelines to refine its key processes and improve student learning. The team recommends that the college conduct dialogue about institutional effectiveness that is ongoing, robust and pervasive, continue collecting data, and ensure that analyses of the data are widely distributed and used throughout the institution; that there is ongoing review and adaptation of evaluation and planning processes; that there is a consistent and continuous commitment to improving student learning; and that educational effectiveness is a demonstrable priority in all planning structures and processes. (I.A.4, I.B.2, I.B.3, 4, II.A.2, III.A.2, III.A.6, III.B.2.b, III.C.2, III.D.l.a)

- I.A.4: The institution's mission is central to institutional planning and decision making.
- I.B.2: The institution sets goals to improve its effectiveness consistent with its stated purposes. The institution articulates its goals and states the objectives derived from them in measurable terms so that the degree to which they are achieved can be determined and widely discussed. The institutional members understand these goals and work collaboratively toward their achievement.
- I.B.3: The institution assesses progress toward achieving its stated goals and makes decisions regarding the improvement of institutional effectiveness in an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, and reevaluation. Evaluation is based on analyses of both quantitative and qualitative data.
- I.B.4: The institution provides evidence that the planning process is broad-based, offers opportunities for input by appropriate constituencies, allocates necessary resources, and leads to improvement of institutional effectiveness.
- II.A.2: The institution assures the quality and improvement of all instructional courses and programs offered in the name of the institution, including collegiate, developmental, and pre-collegiate courses and programs, continuing and community education, study abroad, short-term training courses and programs, programs for international students, and contract or other special programs, regardless of type of credit awarded, delivery mode, or location.
- III.A.2: The institution maintains a sufficient number of qualified faculty with full-time responsibility to the institution. The institution has a sufficient number of staff and administrators with appropriate preparation and experience to provide the administrative services necessary to support the institution's mission and purposes.
- III.A.6: Human resource planning is integrated with institutional planning. The institution systematically assesses the effective use of human resources and uses the results of the evaluation as the basis for improvement.
- III.B.2.b: Physical resource planning is integrated with institutional planning. The institution systematically assesses the effective use of physical resources and uses the results of the evaluation as the basis for improvement.
- III.C.2: Technology planning is integrated with institutional planning. The institution systematically assesses the effective use of technology resources and uses the results of evaluation as the basis for improvement.
- III.D.l.a: Financial planning is integrated with and supports all institutional planning.

Observations

1. See also the Observations under Recommendation 1 above.
2. The Commission expected all colleges to have reached the Sustainable Continuous Quality Improvement (SCQI) level in the Commission's *Rubric for Evaluating Institutional Effectiveness* for Planning way back in 2008. Much of Recommendation 3 comprises a quote from that rubric at the SCQI level. The team found that Merced is "working toward the proficiency level" instead.
3. Completion and integration of the whole planning cycle is sound practice and will help the College become more effective at everything it does. That outcome is at least as important as complying with Commission recommendations.
4. Planning is *never* finished. The cycle of planning, resource allocation, implementation, and evaluation should be part and parcel of the College's culture, embedded in its operations and institutional conversations.
5. Merced's established planning processes include three primary components: Program review, the resource allocation process (together with the staffing prioritization processes), and the Strategic Plan. There are other plans, such as the Educational and Facilities Master Plan, the Faculty and Staff Diversity Plan, and the Matriculation Plan, but these three components represent the main line of planning at the College, so my focus here will be on them.
    a. Program review does typically include some evaluation of program performance and planning for improvements, though (as noted under Recommendation 1 above) it is not as systematic or integrated as it should be, and documentation of improvements actually implemented and then reassessed is hard to find.
    b. Resource Allocation
        (1) Virtually everyone to whom I spoke acknowledged that resource allocations have become markedly more transparent in the last two years.
        (2) Funds for many resource requests that used to come through the program review process have now been built into the normal departmental budgets, leaving the program review process to focus on one-time items and new initiatives.
        (3) It is unclear whether prioritization of resource allocations at each level is based on a common rubric or other formal method, or on informal discussion.
        (4) Moreover, for the first time, in 2012-13 the College will be enforcing the rule that most resource requests, to be considered in the allocation priorities process, must be justified in a program review document. The main exceptions are human resources requests and certain strategic needs.
            a) A faculty-needs prioritization process recommends priorities annually for new and replacement faculty hiring requests filed by Instruction and Student Services programs. Each request includes a standard set of student performance and productivity data related to the requesting program. The priorities are submitted to the President, and do not go through the standard resource allocation process.
            b) All classified and management hiring requests come through the area Vice Presidents and are discussed and prioritized in Cabinet. A Staffing Priorities Committee used to have the responsibility of making priority

recommendations to the Cabinet for classified and management hiring, but it was dissolved some years ago, essentially because such staffing needs remained perennially unfunded. (See *Consultant Recommendations* under Recommendation 8 below.)

    c) The Planned Expenditures Committee, made up of the President and the Vice Presidents, recommends specific funding allocations for strategic purposes. For 2011-12, for example, those purposes included life-cycle funding for technology and preparation for the College's fiftieth anniversary. Recommendations of this group merge with those from the Educational Master Planning Committee (whose recommendations derive from the program review process and the other Master Planning Committees) toward the end of the standard resource allocation process.

  c. Work on the Strategic Plan began in May 2010 in preliminary discussions with a consultant. Development continued until Fall 2010, when the consultant gathered input from stakeholder groups in a series of charrettes, from an online survey, and through a Facebook page. A 14-member task force then drafted new Vision, Mission, and Core Values statements and a set of strategic goals and objectives in November 2010. Some refinements of the draft evidently followed, but the final version was not approved until September 6, 2011. The Plan contains five Goals in the form of strategic directions, each with a set of broad objectives. It does not contain activities/strategies, timelines, responsibilities, resource requirements, or any provision for evaluation and revision.

6. The Master Planning Handbook originally published in December 2009 describes the mission, membership, and accountability practices of each Master Planning Committee and the Budget Committee, along with the subcommittees and organizational units that pertain to each. The Handbook goes into much more detail for Student Services than for the other areas of the College. It is intended to document Merced's level of integration of planning and resource allocation (see also Recommendation 1 above), describes program review as a mechanism for internal accountability, and in some areas discusses evaluation of effectiveness. However, its primary focus is clearly more on resource allocation than on master planning and the improvement of student learning and institutional effectiveness.

7. Information about the resource allocation results of the planning process appears to be available to the campus community primarily through the Master Planning Committees.

8. Interviewees report that the lag time of more than one year between completion of a program review and fulfillment of approved resource requests has caused no problems so far.

9. Dialogue about the improvement of institutional effectiveness and student learning, as noted under Recommendations 1 and 2 above, does occur, but tends to do so in particular departments and groups, rather than in campuswide forums; reportedly it cannot yet be described as "ongoing, robust, and pervasive." One major problem almost universally cited by interviewees was the fact that too many committee members do not report back regularly to their constituents, and do not bring their constituents' concerns back to the committees on which they serve.

10. Systematic data collection and reporting for instructional program review is provided by the Office of Grants and Institutional Research (OGIR), but that office does not appear to provide a great deal of assistance in data interpretation, evaluation methods for program performance or planning processes, or assessment of learning or other outcomes. The latter task evidently falls to the program review and SLO coordinators in Instruction and Student Services, when other demands on their time permit.
11. Targeted individual training and assistance in program and SLO assessment by the program review and SLO coordinators (e.g., afternoon work sessions for all comers) reportedly has not produced a knowledge-and-comfort level among faculty and staff sufficient to promote universal participation in these processes, nor ongoing, robust, and pervasive dialogue about improving institutional effectiveness and student learning. Two well-informed interviewees suggested that more training of cohort leaders and focused campuswide forums would help achieve both ends.
12. The instructional program review and SLO co-coordinators have scheduled a series of assessment workshops through the Fall 2011 semester, and are working on a comprehensive handbook on the integrated program review and SLO assessment process.
13. Beyond the assistance provided by the program review and SLO coordinators, responsibilities for the coordination and monitoring of all these processes are diffuse, and there is reportedly a history of disagreement between faculty and administration regarding who is responsible for what. Consequently, the effectiveness of coordination and monitoring reportedly varies by department. In Instruction, the establishment of the IPRSLOAC (if it is approved) should help with these important functions.
14. Evaluation and improvement of program review, resource allocation, and SLO processes are covered under Recommendations 1 and 2 above. As yet there is no system for evaluation and improvement of the full, integrated planning, evaluation, resource allocation, and decision-making process at Merced, nor of the extent to which "there is a consistent and continuous commitment to improving student learning," nor of the extent to which "educational effectiveness is a demonstrable priority in all planning structures and processes."
15. Instruction has been working on an Instructional Operational and Master Planning Process manual for well over a year. It is intended to document and explain shared-governance structures and processes, administrative structures and processes, and the relationships among them. It is still very much in rough-draft form.
16. Fall 2009 Accreditation Survey Results
    a. Faculty and classified staff who expressed an opinion disagreed that there is broad participation in planning processes at Merced, according to the Fall 2009 Accreditation Survey, while managers and especially administrators thought there was broad participation. In general, managers and especially administrators have a much higher opinion of governance and planning processes than the other employee categories, according to the survey results.
    b. Participation in shared governance committees varies among employee groups, with administrators and full-time faculty most involved. The adjunct faculty was the only group in which most were not involved at all.

17. The College has considered bringing in a consultant from the Statewide Academic Senate to present a workshop on faculty roles in these integrated processes, in the hopes of encouraging wider participation.
18. See *Effective Integrated Program Review, Annual Planning, and Resource Allocation with Outcomes* at the end of this report for an outline of an integrated process.

Consultant Recommendations

See also *Consultant Recommendations* under Recommendation 1 above.

33. At the earliest opportunity, the College should add activities/strategies, timelines, responsibilities, and resource requirements to the Strategic Plan, and require that program review and resource allocation processes consider it, in order for it to function as a meaningful guide to planning and decision-making on campus. The College should also establish formally a regular schedule for review and update of the Strategic Plan, including the mission, vision, and core values.
34. The College should provide regular, engaging opportunities for all employees to learn about and discuss the nature, concepts, and applications of integrated planning, program review, resource allocation, and implementation, and their roles in those processes. Bringing in outside experts such as the Statewide Academic Senate consultant would be an excellent start.
35. The President or Vice President for Administrative Services should notify the campus when final results of the resource allocation process have been posted on the College website, and include a link to the results in the notice.
36. The College should promote the assessment workshops scheduled by the instructional program review and SLO co-coordinators, and do whatever is necessary to encourage attendance by as many faculty, faculty leads, and deans (and especially Master Planning Committee members) as possible. These workshops appear to be the College's best immediate opportunity to move everyone, at least in Instruction, onto the same page regarding integrated program review and SLO assessment and their relationship to broader institutional planning processes and structures. Participants can then serve as information resources for their colleagues who were unable to attend.
37. The College should give middle managers and program leaders well-defined responsibilities in the coordination and monitoring of program review, SLO assessment, resource allocation, and related collaborative processes, and delineate the relationship between their responsibilities and those of the IPRSLOAC (if it is approved) and other bodies on campus that are involved in these processes. The College should provide intensive training in these areas for new managers and program leaders, and annual refreshers for experienced managers and program leaders. The managers and program leaders should share their expertise regularly with other departmental faculty and staff regarding all these processes, and thus help ensure a common understanding of them at all levels of the institution. (See also Recommendations 1 and 2 above.)
38. The College should provide initial training and annual refreshers to all shared-governance committee members and conveners on their respective responsibilities,

including regular two-way communication with their constituents. An outline of those responsibilities should be made available to all prospective committee members at the time of their appointment. Training should also include how to participate effectively on committees.

39. The College should revise the Master Planning Handbook and the functions of the Master Planning Committees to include more integration of planning for improvement per se, rather than focusing so intently on resource allocations, and to streamline and clarify how all the deliberative planning and resource allocation pieces fit together. A properly revised, comprehensive version of the Master Planning Handbook might also serve as a governance handbook in the short term, but a separate governance handbook would be more appropriate. A streamlined version of the Instructional Operational and Master Planning Process manual might serve as a starting point for development.

40. The College should monitor the program review and resource allocation process to ensure that the lag time between resource request and resource allocation continues to cause no difficulty.

41. As noted under Recommendation 1, the College should formalize and document a system for the periodic evaluation and improvement of all structures and processes associated with integrated planning, evaluation, resource allocation, and decision-making.

Team Recommendation 4: Communication

In order to meet this standard, the team recommends that the College improve communication by engaging in dialogue that is inclusive, respectful, intentional, informed, and documented and about institutional quality and improvement. The dialogue should purposefully guide institutional change. This dialogue must include the use of the participatory governance process to develop and implement a plan for effective communication links so that information and recommendations are disseminated to all constituent groups. (I.A.4, I.B.1, I.B.2, I.B.3, I.B.4, I.B.5, I.B.6, I.B.7, III.A.4.c)

- I.A.4: The institution's mission is central to institutional planning and decision making.
- I.B.1: The institution maintains an ongoing, collegial, self-reflective dialogue about the continuous improvement of student learning and institutional processes.
- I.B.2: The institution sets goals to improve its effectiveness consistent with its stated purposes. The institution articulates its goals and states the objectives derived from them in measurable terms so that the degree to which they are achieved can be determined and widely discussed. The institutional members understand these goals and work collaboratively toward their achievement.
- I.B.3: The institution assesses progress toward achieving its stated goals and makes decisions regarding the improvement of institutional effectiveness in an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, and reevaluation. Evaluation is based on analyses of both quantitative and qualitative data.
- I.B.4: The institution provides evidence that the planning process is broad-based, offers opportunities for input by appropriate constituencies, allocates necessary resources, and leads to improvement of institutional effectiveness.
- I.B.5: The institution uses documented assessment results to communicate matters of quality assurance to appropriate constituencies.
- I.B.6: The institution assures the effectiveness of its ongoing planning and resource allocation processes by systematically reviewing and modifying, as appropriate, all parts of the cycle, including institutional and other research efforts.
- I.B.7: The institution assesses its evaluation mechanisms through a systematic review of their effectiveness in improving instructional programs, student support services, and library and other learning support services.
- III.A.4.c: The institution subscribes to, advocates, and demonstrates integrity in the treatment of its administration, faculty, staff and students.

Observations

1. Recommendation 4 did not appear in the Commission's Action Letter, so the College is not required to write a response to it until the midterm report. However, communication problems appear to underlie many of the issues with which the College has been wrestling in recent years, and good communication across the campus can only facilitate productive responses to all the Recommendations. Many of my recommendations in the other sections are intended to improve communication, among other things.

2. A great deal of institutional information flows electronically to every computer on campus every day. Newsletters from Instruction (including some divisional newsletters), Administrative Services, and Technology and Institutional Research help keep the campus informed of issues, deadlines, procedures, and upcoming events. Emails sent to the entire campus by the President and the Vice President for Student Services perform the same function. Responses to this flow of information reportedly range from appreciation to automatic deletion. There is evidently no

systematic way for the sender or the recipient to distinguish among interesting fluff, important information, and something that might be crucial.

3. The MC4ME Sharepoint portal, the MC-NET portal from which data are still being transferred, and to a lesser extent the College's public website provide a wealth of information to the campus community. However, it can be difficult to find information on all these sites if one does not already know the right URL. Moreover, posting a document does not constitute informing one's target audience if audience members do not know to look for the document there.

4. Cohort meetings are now required at least three times per term across the College. If that rule is followed and the meetings are properly organized, meaningful communication should improve campuswide.

5. Many of the misunderstandings that arise between and among individuals and groups on campus would be prevented with more effective, timely communication.

Consultant Recommendations

See also *Consultant Recommendations* under the other Recommendations.

42. The College should establish a shared-governance task force charged with developing and coordinating implementation of effective communication structures and processes on campus, consistent with Strategic Plan Goal Two. The task force, which should report to the new College Council and complete its work by June 2012, should consider at least the following aspects of communication in its deliberations and designs:
   a. The need for a variety of modes, from meetings and forums to email and voicemail
   b. The need for a balanced approach that considers the amount, quality, and urgency of information distributed in light of the time such information demands of the recipients
   c. The need to distinguish among urgent, important, and routine information, with criteria, indicators, and delivery options for each type
   d. The need for direct communication between the President and the campus community to maintain transparency. Examples of methods used successfully at other colleges include the following:
      (1) A monthly electronic bulletin or column sharing issues, observations, and news
      (2) A "Chat with the President" forum, luncheon, or table in the quad once or twice a year
   e. The need for training in effective communication and collaboration among managers, faculty, staff, and student leadership.

Team Recommendation 5: Governing Board

In order to meet the standard, the team recommends that the Board model to the college its commitment to continuous improvement, develop and implement a written comprehensive Board development plan that includes, but does not rely primarily on travel and attendance at conferences, and specifically includes delegation of authority to the CEO (policy) without interference in the operation of the college, an examination of the participatory governance processes and the extent to which the Board's behavior supports those governance structures, accreditation standards for Board performance; and analysis of the governing board's 2010 self-evaluation and a plan for improvement. (IV.A.2.a, b; IV.A.3, IV.A.4, IV.A.5, IV.B.l.f, IV.B.l.g, IV.B.l.i, IV.B.l.j)

- IV.A.2.a: Faculty and administrators have a substantive and clearly defined role in institutional governance and exercise a substantial voice in institutional policies, planning, and budget that relate to their areas of responsibility and expertise. Students and staff also have established mechanisms or organizations for providing input into institutional decisions.
- IV.A.2.b: The institution relies on faculty, its academic senate or other appropriate faculty structures, the curriculum committee, and academic administrators for recommendations about student learning programs and services.
- IV.A.3: Through established governance structures, processes, and practices, the governing board, administrators, faculty, staff, and students work together for the good of the institution. These processes facilitate discussion of ideas and effective communication among the institution's constituencies.
- IV.A.4: The institution advocates and demonstrates honesty and integrity in its relationships with external agencies. It agrees to comply with Accrediting Commission standards, policies, and guidelines, and Commission requirements for public disclosure, self study and other reports, team visits, and prior approval of substantive changes. The institution moves expeditiously to respond to recommendations made by the Commission.
- IV.A.5: The role of leadership and the institution's governance and decision-making structures and processes are regularly evaluated to assure their integrity and effectiveness. The institution widely communicates the results of these evaluations and uses them as the basis for improvement.
- IV.B.l.f: The governing board has a program for board development and new member orientation. It has a mechanism for providing for continuity of board membership and staggered terms of office.
- IV.B.l.g: The governing board's self-evaluation processes for assessing board performance are clearly defined, implemented, and published in its policies or bylaws.
- IV.B.l.i: The governing board is informed about and involved in the accreditation process.
- IV.B.l.j: The governing board has the responsibility for selecting and evaluating the district/system chief administrator (most often known as the chancellor) in a multi-college district/system or the college chief administrator (most often known as the president) in the case of a single college. The governing board delegates full responsibility and authority to him/her to implement and administer board policies without board interference and holds him/her accountable for the operation of the district/system or college, respectively.

Observations

1. The College has provided workshops on Board responsibilities in the past, with facilitators including Kevin Ramirez and Cindra Smith, and the President has encouraged Board members to attend the Community College League of California and other conferences, with limited success. However, there is no written, comprehensive Board development plan that includes the elements listed in the Recommendation.

2. The College employed consultant Cindra Smith to provide a half-day workshop for the Board on April 9, 2011, after the exit interview but before receipt of the evaluation team's report. Judging from the minutes of the session, the subject matter included Board duties and responsibilities, delegation of authority to the College President, Board education, and Board self-evaluation, but not modeling a commitment to continuous improvement, examining and supporting participatory governance processes, or accreditation standards for Board performance. The session did not produce a Board development plan, an analysis of the 2010 self-evaluation, nor a plan for improvement.
3. A follow-up workshop is scheduled for November 2011 that will include an analysis of the 2010 Board self-evaluation and a plan for improvement, if the results warrant it, along with integration of Board development and education.
4. Reportedly, the incidence of Board "interference in the operation of the College," or micromanagement, has declined, but the problem still exists.

Consultant Recommendations

43. The College should ensure that the November 2011 workshop includes, as planned, an analysis of the 2010 self-evaluation and a plan for improvement, if the results warrant it, along with integration of Board development and education.
44. The College should broaden the November 2011 workshop, or schedule a third workshop, specifically to create a written, comprehensive Board development plan that does not rely primarily on travel and conferences, and includes coverage of at least the following issues:
    a. Delegation of authority to the President
    b. Noninterference in the operation of the College
    c. College participatory governance structures and processes and the Board's relation to and support of them
    d. Accreditation standards related to Board performance
    e. The Board self-evaluation and improvement process
    f. Consideration of models for Board practices (documentation on which I will forward to the President), such as the following:
        (1) The Association of Governing Boards' specifications for board responsibilities
        (2) The Carver method of non-profit board management
45. The Board of Trustees and the Superintendent/President should develop a policy that defines the Board's role in support of accreditation. Such a policy should clearly specify Board review processes and information sources, and facilitate the Board's knowledge of accreditation issues and of the College's accreditation status.

Team Recommendation 8: Human Resources
In order to meet the standard, the team recommends that the college develop and implement an organizational structure that includes a fully functional human resources division and develop, implement, and evaluate a Faculty and Staff Diversity Plan in order to adequately assess its record in employment equity and diversity consistent with its mission. The team recommends that processes for hiring classified and management staff be integrated with Institutional Planning. The College also needs to systematically assess the effective use of human resources and uses the results of the evaluation as the basis for improvement. (III.A.1.b, III.A.3, III.A.4.a-c, III.A.6)

- III.A.1.b: The institution assures the effectiveness of its human resources by evaluating all personnel systematically and at stated intervals. The institution establishes written criteria for evaluating all personnel, including performance of assigned duties and participation in institutional responsibilities and other activities appropriate to their expertise. Evaluation processes seek to assess effectiveness of personnel and encourage improvement. Actions taken following evaluations are formal, timely, and documented.
- III.A.3: The institution systematically develops personnel policies and procedures that are available for information and review. Such policies and procedures are equitably and consistently administered.
- III.A.4.a: The institution creates and maintains appropriate programs, practices, and services that support its diverse personnel.
- III.A.4.b: The institution regularly assesses its record in employment equity and diversity consistent with its mission.
- III.A.4.c: The institution subscribes to, advocates, and demonstrates integrity in the treatment of its administration, faculty, staff and students.
- III.A.6: Human resource planning is integrated with institutional planning. The institution systematically assesses the effective use of human resources and uses the results of the evaluation as the basis for improvement.

Observations

1. For a community college of Merced's size and age to lack "a fully functional human resources division" is an extremely serious deficiency.
2. The College has no permanent full-time manager of the Human Resources (HR) Department. The current structure calls for an HR Supervisor to manage an office that consists of two HR Analysts. One HR Analyst is now functioning in an interim capacity as HR Supervisor, but a majority of the managerial load has fallen upon the Vice President for Administrative Services (VPAS) since the departure of the last permanent HR Supervisor in December 2010.
3. The classified position responsible for coordinating the hiring of adjunct faculty resides within the Office of Instruction, rather than HR.
4. As at any community college, Merced's HR Department performs a wide variety of tasks, many of which involve compliance with law and regulation, as well as District policies. At existing staff levels and without a permanent manager, the Department has reportedly fallen behind in a number of areas, including the following:
   a. Update and implementation of the Faculty and Staff Diversity Plan, with all the processes related thereto
   b. Performance evaluations of classified staff and management (although the backlog has been reduced in recent months)

    c. Automation and streamlining of HR functions, such as classified timesheet processing, and completion of associated tasks, such as data entry and HR table updates. (Automation necessarily relies upon information technology support, of course.)

    d. Review and maintenance of HR-related policies and procedures

    e. Systematic job description/classification review and update

    f. Evaluation and improvement of HR operations through program review. The last program review took place over three years ago.

5. A specific proposal for augmenting the HR Department has been under discussion at the College since March 2010.

6. In its conclusions regarding Standard III.A, the team recommended that "the college evaluate the blended administrative structure in the Office of Instruction adopted in 2008 to determine its effectiveness," even though it did not include this provision in its formal Recommendation 8. Curiously, in April 2009 the College had already established a Restructure Task Force with broad representation to do just that. The group met three times in Spring 2009, four times in Fall 2009, then apparently not again till October12, 2010, and finally on February 28, 2011. The group's work concluded with a summary of evaluation survey findings that it forwarded to the President. The reasons for the long hiatus, and the ultimate outcome of the evaluation, are unknown to me.

7. The Faculty and Staff Diversity Plan has not been updated since 1994.

8. ACCJC Standard III.A.1.c requires that "Faculty and others directly responsible for student progress toward achieving stated student learning outcomes have, as a component of their evaluation, effectiveness in producing those learning outcomes." The team "found no evidence to show that the effectiveness of producing the student learning outcomes and student progress toward the stated outcomes is included as part of the evaluation." Although the team did not cite this issue in a Recommendation, the College should be aware that ACCJC evaluation teams have done so at many other colleges.

Consultant Recommendations

46. The College should devote the resources necessary to resolve this Recommendation as soon as possible. At a minimum, that requires the following, in my judgment:

    a. Hire a full-time, permanent manager of the HR Department at a compensation and organizational level that will attract experienced and competent candidates. The position should be at the director level or higher. Without appropriate, expert, full-time HR leadership at the proper level, this Recommendation cannot be resolved.

    b. Evaluate the existing organizational structure for adjunct hiring. If the results warrant any modifications (e.g., incorporation of that function into HR), make those modifications, and evaluate the structure again in a year's time.

    c. Revise the existing proposal for augmenting the HR Department in light of Recommendation 8, based on an updated operational needs analysis and on current function and staffing data from comparable colleges in the Central Valley. If the analysis indicates that Merced's HR staffing level (one full-time, permanent

manager and two HR Analysts, with the possible addition of an adjunct hiring coordinator) is still inadequate to carry out all the functions of the Department, then the Planned Expenditures Committee should include in the next staff planning and prioritization cycle the request for additional staff sufficient to render HR "fully functional," to borrow the language of the Recommendation.

    d. Provide the technical support needed to automate as many currently manual tasks as existing systems will permit, such as classified staff absence reporting.

    e. Rigorously train the manager and staff in all essential functions to optimize efficient operation of the Department and ensure compliance with all applicable law, regulation, and policy. Such training should include, for example, gaining familiarity with the contents and interpretation of the collective bargaining agreements, and using Datatel HR functions to their fullest capacity to minimize time-consuming manual processing of paperwork.

47. The College should thoroughly update the Faculty and Staff Diversity Plan by March 1, 2012.

48. To address the portion of the Recommendation concerning hiring classified and management staff, the College should, at a minimum, merge the final classified and management staffing priorities into the final resource allocation priority list, just as the Planned Expenditures Committee items are merged into that list. The College should also consider two more fully integrated alternatives, as follows:

    a. Requiring that classified and management hiring requests be justified through the program review and/or Master Planning Committee processes, and enter the resource allocation process that way

    b. Establishing a separate process analogous to the faculty hiring prioritization process for management positions, classified positions, or both

49. The Human Resources Department, in consultation with the appropriate groups, should develop and coordinate a periodic, systematic evaluation of the use of human resources collegewide, and make recommendations for improvement as needed.

50. The College should evaluate the organizational placement of contract management functions, including negotiations with units, contract compliance, and grievances; make any modifications needed; and ensure that those functions are appropriately coordinated with the responsibilities of the Human Resources Department.

Accrediting Commission Action Probabilities

Making predictions about Commission actions is a dangerous enterprise at best, because of uncertainties inherent in its processes. If all the campus leadership, committee members, and others at the College recognize the urgency of action, unite their efforts, contribute mightily over the next few months, demonstrably resolve all the Recommendations, and convey their accomplishments accurately and persuasively in the March 2012 Follow-Up Report, it is possible that the Commission will grant full reaffirmation in June 2012. However, based on my analysis, the amount of work that remains to be done is such that the probability of that happening is small. Indeed, if the College's progress over the next few months is insufficient, the Commission could even see fit to move it to Probation. In my opinion, if the College works very productively between now and February 2012 along the lines set forth in my recommendations and

writes a strong Follow-Up Report, the most probable outcome of the June 2012 Commission meeting is continuation on Warning, with a requirement for another Follow-Up Report by October 2012 or March 2013. If my reasoning is sound, then Merced's most effective approach will be to exert its best efforts through the remainder of this academic year and into the next to complete work on all applicable Recommendations, and aim for full reaffirmation in either January or June 2013, based on an October 2012 or March 2013 Follow-Up Report.

Sound Practice in Completion and Integration of Planning Cycles

Every sound planning process is cyclical, and includes three primary elements: Planning itself, Implementation of the plan, and Evaluation of the results, or PIE for short. If the results of the evaluation indicate that changes are needed, the next step is planning for those changes, and the cycle begins again. Integration of resource allocation means inserting that step between Planning and Implementation. These general steps apply equally well to program review, annual planning, and application of SLOs and other outcomes. See the examples below:

Effective Program Review

- Document every step.
- Identify the appropriate measures of program effectiveness.
- At the appropriate time, assess program effectiveness by applying the measures.
- Analyze results of the assessment.
- Plan specific changes to maintain or increase effectiveness (if the results warrant them).
- Implement the planned changes.
- Begin the cycle again.

Effective Annual Planning and Resource Allocation

- Document every step.
- At the appropriate time, assess the effects of any previously implemented improvements and progress on any previously established goals and objectives.
- Analyze results of the assessment.
- Analyze implications of and for higher-level plans (e.g., Strategic Plan, Educational Master Plan).
- Plan Stage 1: Set specific goals (preferably a small number, in priority order) clearly based on analysis results, to maintain or increase effectiveness.
- Plan Stage 2: Formulate measurable objectives that will mark progress toward each goal (along with activities needed to achieve each objective if appropriate); establish a timeline or target date for completion of each objective; and identify the people responsible for ensuring progress toward each objective.
- Plan Stage 3: Identify any resources demonstrably required over the next three years to achieve each objective or make significant progress toward each goal.
- Allocate resources in priority order to the limit of available funds.
- Implement the Plan, using resources as needed.
- Begin the cycle again.

Effective Application of SLOs and Analogous Outcomes

- Document every step.
- Develop sound outcomes mapped to outcomes at other levels.

- Identify appropriate assessment methods and criterion levels for each of them.
- If appropriate, implement program or service improvements to facilitate achievement of specified outcomes.
- At the appropriate time, assess the degree of achievement of outcomes.
- Analyze results of the assessment.
- Analyze implications of and for outcomes at other levels.
- Identify and plan for specific improvements needed to facilitate achievement of outcomes, and/or modify outcomes, as the analysis suggests.
- Implement planned improvements and/or modified outcomes.
- Begin the cycle again.

Because all three processes above share certain fundamental elements, integrating them is conceptually straightforward, as the reader can see in the example below:

Effective Integrated Program Review, Annual Planning, and Resource Allocation with Outcomes

- Document every step.
- Identify the appropriate measures of program effectiveness, which include but are not limited to achievement of SLOs and/or other outcomes, with appropriate methods and criterion levels for each of them.
- Implement program or service improvements to facilitate achievement of specified outcomes, if those improvements are not already underway.
- At the appropriate time:
  o Assess program effectiveness by applying the measures, including the degree of achievement of outcomes.
  o Assess the effects of any previously implemented improvements, and progress on any previously established goals and objectives.
- Analyze results of the assessments.
- Analyze implications of and for higher-level plans (e.g., Strategic Plan, Educational Master Plan) and outcomes at other levels.
- Modify outcomes if analysis results warrant it.
- Plan Stage 1: Set specific goals (preferably a small number, in priority order) clearly based on analysis results, to maintain or increase effectiveness; goals include program or service improvements to facilitate achievement of outcomes if analysis results warrant such changes.
- Plan Stage 2: Formulate measurable objectives that will mark progress toward each goal (along with activities needed to achieve each objective if appropriate); establish a timeline or target date for completion of each objective; and identify the people responsible for ensuring progress toward each objective.
- Plan Stage 3: Identify any resources demonstrably required over the next three years to achieve each objective or make significant progress toward each goal.
- Allocate resources in priority order to the limit of available funds.
- Implement the Plan, using resources as needed; implement outcome modifications, if any.

- Begin the cycle again.

If plans or warranted changes are not implemented, or if they are implemented but not re-evaluated, then the cycle has broken down. Moreover, the institution must clearly document every step of each cycle to demonstrate its effectiveness, both to itself and to the Commission.

These characteristics of effective planning processes are consistent with the Standards of the Accrediting Commission for Community and Junior Colleges. But the most important reason for sound integrated planning, resource allocation, implementation, and evaluation processes and structures is that doing these things right will help the institution carry out all its essential functions better with every passing year, which will in turn benefit its students enormously.

Model College Council
Purposes, Roles, Functions, and Membership

I.   Purposes, Roles, and Functions of the College Council

    A. The fundamental purpose of the College Council should be providing information, facilitating communication, and solving problems related to shared governance.

    B. The Council should function as a clearinghouse for potential or actual shared-governance issues.

        1. Refer issues to appropriate organizational structures if they already exist.

        2. If they do not exist, recommend establishment of new committees, to include the following elements:

            a. Specific committee charges

            b. Number of members

            c. Selection/representation criteria

            d. Terms of service

            e. Reporting

        3. Engage in regular two-way communication with constituent groups and the campus community about issues.

    C. The Council should provide information to and model best practices for shared-governance committees. For example:

        1. Develop and distribute a description of the member and convener responsibilities that the College expects to be fulfilled on its committees.

        2. Adhere to best practices in committee representation. For example, representatives should participate in discussions and decision-making fully empowered to act on behalf of their constituents; only rarely should they have to check with their constituents before acting, and then only if they feel inadequately informed regarding their constituents' interests related to the issue at hand.

        3. Describe alternative practices for committee decision models and quorums.

        4. Provide information on open-meeting practices.

        5. Provide information on interpretation and application of Title 5 governance requirements.

        6. Inform all committees that minutes or summaries are required.

    D. The Council should serve as a forum for discussion of the progress of identified shared-governance committees that report to it.

        1. X Committee

        2. Y Committee

        3. Z Committee

        4. The Council may recommend addition of any other committees that should report to it.

    E. The Council should assume oversight and maintenance of the Organizational Handbook.

    F. The Council should monitor Policies and Procedures related to shared governance, and recommend modifications thereof, or new Policies or Procedures, as needed.

G. The Council should coordinate the systematic evaluation of governance and administrative structures, processes, and services. For example:
   1. Request and participate in the design of surveys.
   2. Monitor committee participation by constituencies and College areas.
H. The Council should coordinate campus training in shared governance principles and practice.
I. The Council should promote integration of plans by monitoring alignment among them, and recommending corrective action when necessary.
J. The Council may take on additional responsibilities appropriate for the top-level shared-governance body at the College.
K. All action items approved by the Council constitute recommendations to the College President.
L. The Council should make its recommendations on the basis of consensus.

II. Membership of the College Council (designees are discouraged)
A. College President
B. Vice President, Instruction
C. Vice President, Student Services
D. Vice President, Administrative Services
E. Academic Senate President
F. Classified Senate President
G. Associated Students President
H. Management Team Chair
I. Faculty Association President
J. CSEA President
K. Resource persons as needed

Accrediting Commission Recommendations for Merced College

Action Required:
March 15, 2012 Follow-Up Report, with Resolution of All Deficiencies by March 2013

Recommendation 1: Program Review

In order to meet the standard and ensure that progress continues toward achieving the Sustainable Continuous Quality Improvement level of the Accrediting Commission for Community and Junior Colleges' rubric for program review, the team recommends that the college continue to apply the recommendations of the 1999 and 2005 comprehensive evaluation teams, fully implement its new program review process, and ensure that the process is ongoing, systematic and used to assess and improve student learning and achievement and that the results of program review are used to continually refine and improve program practices. (I.B.2, I.B.3, I.B.5, IIA, II.A.5, II.C.2, III.D.3)

Recommendation 2: Student Learning Outcomes

To meet the standard and ensure that the proficiency level of the Accrediting Commission for Community and Junior Colleges' (ACCJC) rubric for student learning outcomes is reached by the fall 2012 deadline established by the ACCJC, the team recommends that the college continue its efforts to fully implement the recommendation of the previous team and ensure that student learning outcomes and assessment are ongoing, systematic and used for continuous quality improvement regardless of location or means of delivery; dialogue about student learning is ongoing, pervasive and robust; evaluation and fine tuning of organizational structures to support student learning is ongoing; student learning improvement is a visible priority in all practices and structures across the college; a timeline indicating how the college will meet the Commission's fall 2012 requirement of proficiency is created and published; and learning outcomes are specifically linked to program reviews. (II.A.1, II.A.1.a, c, II.A.2.a, h, II.C.2, III.A.1.c)

Recommendation 3: Integrated Planning, Evaluation, and Resource Allocation, and Decision-Making Process

In order to meet the standard and to ensure that the college progresses toward the Sustainable Continuous Quality Improvement level of the Accrediting Commission for Community and Junior Colleges' rubric for planning, the team recommends that the college continue to apply the recommendations of the 1999 and 2005 comprehensive evaluation teams and ensure that its established planning processes include ongoing and systematic evaluation and planning with clearly established timelines to refine its key processes and improve student learning. The team recommends that the college conduct dialogue about institutional effectiveness that is ongoing, robust and pervasive, continue collecting data, and ensure that analyses of the data are widely distributed and used throughout the institution; that there is ongoing review and adaptation of evaluation and planning processes; that there is a consistent and continuous commitment to improving student learning; and that educational effectiveness is a demonstrable priority in all planning structures and processes. (I.A.4, I.B.2, I.B.3, 4, II.A.2, III.A.2, III.A.6, III.B.2.b, III.C.2, III.D.l.a)

Recommendation 5: Governing Board
In order to meet the standard, the team recommends that the Board model to the college its commitment to continuous improvement, develop and implement a written comprehensive Board development plan that includes, but does not rely primarily on travel and attendance at conferences, and specifically includes delegation of authority to the CEO (policy) without interference in the operation of the college, an examination of the participatory governance processes and the extent to which the Board's behavior supports those governance structures, accreditation standards for Board performance; and analysis of the governing board's 2010 self-evaluation and a plan for improvement. (IV.A.2.a, b; IV.A.3, IV.A.4, IV.A.5, IV.B.l.f, IV.B.l.g, IV.B.l.i, IV.B.l.j)

Recommendation 8: Human Resources
In order to meet the standard, the team recommends that the college develop and implement an organizational structure that includes a fully functional human resources division and develop, implement, and evaluate a Faculty and Staff Diversity Plan in order to adequately assess its record in employment equity and diversity consistent with its mission. The team recommends that processes for hiring classified and management staff be integrated with Institutional Planning. The College also needs to systematically assess the effective use of human resources and uses the results of the evaluation as the basis for improvement. (III.A.1.b, III.A.3, III.A.4.a-c, III.A.6)

Resolution by 2014 Midterm Report

Recommendation 4: Communication
In order to meet this standard, the team recommends that the College improve communication by engaging in dialogue that is inclusive, respectful, intentional informed, and documented and about institutional quality and improvement. The dialogue should purposefully guide institutional change. This dialogue must include the use of the participatory governance process to develop and implement a plan for effective communication links so that information and recommendations are disseminated to all constituent groups. (I.A.4, I.B.1, I.B.2, I.B.3, I.B.4, I.B.5, I.B.6, I.B.7, III.A.4.c)

Recommendation 6: Board Code of Ethics
In order to meet the standard, the team recommends that the governing board develop, adopt, and implement a sanction or progressive discipline process for dealing with Board behavior that violates their code of ethics and that trustees sign a statement acknowledging that violation of closed session confidentiality will result in sanctions. (IV.B.1.h)

Recommendation 7: Review/Update of Mission Statement
In order to meet the standard, the team recommends that the college institutionalize a timeline/schedule for regular and participatory review of the college mission statement with a process for changing the mission, vision and core values and beliefs when deemed appropriate through the review process. (I.A.1, I.A.2, I.A.3, I.A.4)