External Evaluation Report

College of the Siskiyous 800 College Avenue Weed, California 96094

A confidential report prepared for the Accrediting Commission for Junior and Community Colleges Western Association of Schools and Colleges

This report represents the findings of the External Evaluation Team that visited the College Siskiyous on February 29, 2016 through March 4, 2016.

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Summary of the Report

Institution: College of the Siskiyous

Date of Visit: February 29, 2016 through March 3, 2016

Team Chair: Dr. Rajen Vurdien

Superintendent-President Pasadena City College

A fourteen-member Accreditation Visiting Team was present at the College of the Siskiyous from February 29, 2016 through March 3, 2016 in order to evaluate the College's request for reaffirmation of their accreditation. The team chair conducted a pre-visit on January 12, 2016 to meet with College leadership and other personnel that were involved in preparation of the Self-Evaluation Report. The team attended an all-day training session in Los Angeles on January 27, 2016 conducted by ACCJC.

Prior to the visit the team members received the College's self-evaluation document and related evidence. To prepare for the visit the team completed written evaluation reports on their overall impression of the College of the Siskiyous Self-Evaluation Report and their assessment of the Standards assigned to them.

The visiting team arrived in Weed, California the evening of February 28, 2016 and had their first team meeting to discuss general impressions of the College of the Siskiyous Self-Evaluation Report and the evidence the College had provided to support the report. The team found the report to include relevant information regarding the accreditation standards and, although some of the evidence links were not working, the College was very responsive to requests. Additionally, the team commented that some areas of the Self-Evaluation Report seemed less than complete and that for some of the subsections of the Standards the report lacked a depth of research and reflection. Additionally, there were some places where the narrative and evidence did not necessarily support the standard.

During the visit, members of the team held informal meetings with 55 members of the College's administration/managers, faculty, staff, and students. The team also interviewed members of various committees including the Instruction Council, Student Services Council, Planning Committee, Curriculum Committee, Program Review Committee, Budget Committee, Technology Committee, College Council, and the Academic Senate Executive Committee. Additionally, the team held three open forums, two on the main campus and one on the Yreka campus. Through informal meetings and open forums the team was able to confirm that there was broad participation in the preparation of the Self-Evaluation Report, but there seemed to be some disagreement about how the final Self-Evaluation Report was edited and produced.

The College provided a team room at the hotel and the main campus. Both team rooms were well equipped with laptops, projectors, WI-FI, and office supplies. The team found members of the campus community to be open and passionate about the College and the role they play in students' lives

Major Findings and Recommendations of the 2016 External Evaluation Team

Team Commendations

During the visit the team recognized several areas of excellence at the College worthy of commendations.

Commendation 1

The team commends the College for its newly developed Distance Education Committee and its vision of using emerging standards and best practices to better prepare faculty, improve the Distance Education Program at the College, and better serve students.

Commendation 2

The team commends the College on SOAR, a comprehensive matriculation process and introduction to key support services for students which combines several departments into a streamlined student experience.

Commendation 3

The team commends the College for its commitment to a robust professional development program inclusive of all employee groups.

Commendation 4

The team commends the College Information Technology (IT) staff for diligently maintaining and upgrading the College's infrastructure to serve the educational technology needs of students and staff.

Team Recommendations

As a result of the external evaluation, the makes the following recommendations.

Recommendations to Meet the Standards

Recommendation 1

In order to meet the Standards, the team recommends that the college review the propriety of its institution-set standards, assess student achievement and student learning relative to those standards, and address performance gaps in pursuit of continuous improvement. (I.B.2, I.B.3, IV.B.3)

Recommendation 2

In order to meet the Standards, the team recommends that the college engage in integrated and sustained assessment, dialog, planning, and resource allocation, informed by data that has been disaggregated appropriate to the college community, leading to continuous improvement in student learning and student achievement. The team also recommends that, as a part of this planning process, a Technology Plan is completed, based on appropriate data, assessment, and dialog. (I.B.1, I.B.4, I.B.5, I.B.6, I.B.9, III.C.2, IV.B.3, ER19)

Recommendation 4

In order to meet the Standard, the College should file a Substantive Change Report regarding its Instructional Service Agreements for the FIELD and SFPA programs. (IC12)

Recommendation 5

In order to meet the Standard, the team recommends the College develop a mechanism to ensure that all faculty include the College's approved student learning outcomes in course syllabi. (II.A.3)

Recommendation 6

In order to meet the Standard, the team recommends the College develop mechanisms to assure that student learning outcomes assessment and program review take place for the FIELD and SFPA programs. (IIA3)

Recommendation 7

In order to meet the Standard, the team recommends that Administrative Procedure 4021 provide guidance on program elimination to ensure appropriate arrangements are made for students enrolled in the program to complete their education goal in a timely manner. (II.A.15)

Recommendation 8

In order to meet the Standard, the College must include consideration of how employees are using the results of the assessment of learning outcomes to improve teaching and learning in the evaluations of regular faculty, part-time faculty, and managers who are directly responsible for student learning (III.A.6).

Recommendation 9

In order to meet the Standard, the College must demonstrate that it creates and maintains appropriate programs, practices, and services that support its diverse personnel and regularly assess its record in employment equity and diversity consistent with its mission (III.A.12).

Recommendations to Improve Institutional Effectiveness

Recommendation 3

In order to improve institutional effectiveness, the team recommends that the College establish a timeline and responsible individuals for updating both the print and electronic version of the College catalog. Additionally, the team recommends that the updating of the College catalog be coordinated with the updating of the College website to ensure students are provided the most current and accurate information. (I.C.1, I.C.2)

Recommendation 10: In order to increase institutional effectiveness, the College should create a comprehensive enrollment management plan to address long term fiscal stability in conjunction with its current Instructional Service Agreements (ISAs). (III.D.1 III.D.10)

Recommendation 11

In order to improve institutional effectiveness and provide for increased budget transparency, the team recommends that the College administration ensure that the Planning by Design: An Integrated Planning Model document be updated to reflect the current Budget Development and Revision Process and that this new process be widely disseminated throughout the campus governance and committee structures. (III.D.2, III.D.3)

Recommendation 12

In order to improve institutional effectiveness and provide for increased budget transparency, the team recommends that the College administration publicize and disseminate the Summary of Budget Requests document and that this information be shared on a regular basis with the campus community as resource allocation decisions are made and be included as a component of the budget development and revision process. (III.D.6)

Recommendation 13

In order to improve institutional effectiveness, the team recommends that the College continue the evaluation process of the governance and decision-making processes but more widely communicate those results to the campus community. (IV.A.7)

Recommendation 14

In order to improve institutional effectiveness, the team recommends that the College follow through on assessments of co-curricular offerings, collect the data and perform the analysis to better inform programmatic improvement. (II.C.4)

Introduction

Founded in 1957, College of Siskiyous (COS) is a small, comprehensive, rural community college located in the extreme north central region of California. The college maintains two campuses: the smaller Yreka campus in North Central Siskiyou County, is in the county seat of Yreka, and the main campus in the town of Weed in South Central Siskiyou County.

The College of the Siskiyous is the only institution of higher education located in the Siskiyou Joint Community College district. The main campus covers 260 acres at the base of Mount Shasta in the town of Weed. The main campus has 23 buildings including student residence halls, a 600-seat theater, and a state-of-the-art fire tower. The Yreka campus is 30 miles north of the main campus and is the site of the College's Rural Health Science Institute and the Tactical Training Center used by local law enforcement.

The Siskiyou Joint Community College District covers 6,300 miles but the largest city in the district, Yreka, has a population of 7,600. Sixty percent of the land in the District is National Forests. Siskiyou County has a population of 43,628. That makes the population density of the District 7 people per square mile.

The College has seen an increase in its student population over the last three years. The team was able to use the California Community Colleges Chancellor's Office data mart to review student trends and demographic information. It should be noted that this enrollment increase is primarily coming through Instructional Service Agreements (ISA) at distant locations. The demographic composition of Siskiyou County is eighty-six percent Caucasian, which differs dramatically from the State of California overall. Although the College is primarily Caucasian, forty-five percent, it has seen an increase in its Latino population over the last five years which may stem from the ISA's, and not the population on its main campus.

The Team would like to note that one signature line on the Self-Evaluation Report was left blank, the team was told, because of the degree to which the Report was modified without proper vetting through the campus community, so the CSEA President declined to sign. The copy of the Report provided to the team includes a signature on that line but the team was told the signature belongs to the new CSEA President. The Academic Senate had a discussion in closed session on whether the changes were so significant that the Senate President should withhold her signature; the team was told that the discussion was held in closed session because of fear of reprisal. Some members of the college community consider the final *Self Evaluation Report* a compromised document with regard to its accuracy and the integrity with which it was finalized.

The College last had its accreditation reaffirmed in 2012 by the Accrediting Commission for Community and Junior colleges.

Eligibility Requirements

1. Authority

The team confirmed that College of the Siskiyous is authorized to operate as a post-secondary, degree granting institution based on continuous accreditation by the Accrediting Commission for Community and Junior Colleges of the Western Association of Schools and Colleges (ACCJC). The College has been recognized as a degree-granting institution by ACCJC since 1957.

2. Operational Status

The team confirmed that the College is operational and provides educational services to approximately 2,800 students who are pursuing transfer, degrees, and certificates in the College's educational programs.

3. Degrees

The team confirmed the college offers a broad range of certificates and degree programs. A majority of the students are enrolled in Associate of Science/ Associate of Arts degree programs.

4. Chief Executive Officer

The team confirmed that the Governing Board employees a Chief Executive Officer as the Superintendent/ President. Following Board Policy 2200, the Superintendent/ President is appointed by the Board of Trustees. The Chief Executive Officer does not serve as the chair of the Governing Board nor as a member of the Board, as directed by Board Policy 2010 and Board Policy 2210. The Board of Trustees has employed a qualified Chief Executive Officer who is empowered to administer board policies and oversee the operations of the college.

5. Financial Accountability

The team confirmed that the College is audited annually by an independent audit firm and complies with routine financial reporting requirements. The college current and certified copy of the audited financial statements was available for review by the visiting team.

Compliance with Commission Policies

The Visiting team for the College of the Siskiyous verified the ACCJC polices for adherence:

Public Notification of an Evaluation Team Visit and Third Party Comment

Evaluation Items:

- The institution has made an appropriate and timely effort to solicit third party comment in advance of a comprehensive evaluation visit.
- The institution cooperates with the evaluation team in any necessary follow-up related to the third party comment.
- The institution demonstrates compliance with the Commission *Policy on Rights and Responsibilities of the Commission and Member Institutions* as to third party comment.

[Regulation citation: 602.23(b).]

Conclusion Check-Off (mark one):

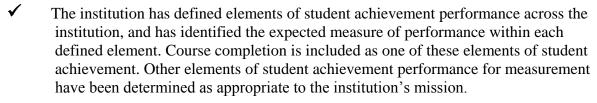
The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.

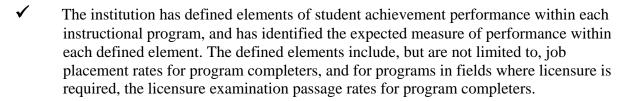
Narrative:

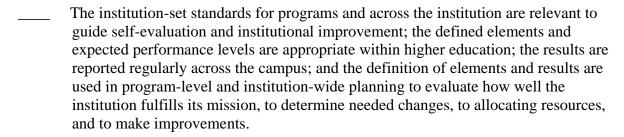
Through initial interviews the team was told that the final Self-Evaluation Report was not appropriately vetted through constituent groups and third parties. But after further investigation the team determined that the College had taken all appropriate measures to ensure the document was widely communicated and all constituent groups, including third party individuals had appropriate avenues to comment on the self-evaluation report.

Standards and Performance with Respect to Student Achievement

Evaluation Items:







The institution analyzes its performance as to the institution-set standards and as to student achievement, and takes appropriate measures in areas where its performance is not at the expected level.

[Regulation citations: 602.16(a)(1)(i); 602.17(f); 602.19 (a-e).]

Conclusion Check-Off (mark one):

The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:

The college has engaged in a collegial process of setting standards that include student achievement, course completion, licensure pass rates, and CTE graduate employment rates. However, these institution-set standards have not been used to identify performance gaps or to inform planning. Absent assessment of performance relative to standards, the college cannot and has not used the standards in any meaningful way. (See Recommendation 1)

Credits, Program Length, and Tuition

Evaluation Items:

- Credit hour assignments and degree program lengths are within the range of good practice in higher education (in policy and procedure).
- ✓ The assignment of credit hours and degree program lengths is verified by the institution, and is reliable and accurate across classroom based courses, laboratory classes, distance education classes, and for courses that involve clinical practice (if applicable to the institution).
- ✓ Tuition is consistent across degree programs (or there is a rational basis for any program-specific tuition).
- Any clock hour conversions to credit hours adhere to the Department of Education's conversion formula, both in policy and procedure, and in practice.
- ✓ The institution demonstrates compliance with the Commission *Policy on Institutional Degrees and Credits*.

[Regulation citations: 600.2 (definition of credit hour); 602.16(a)(1)(viii); 602.24(e), (f); 668.2; 668.9.]

Conclusion Check-Off (mark one):

The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.

Narrative:

College of the Siskiyous is in compliance with California state standards in these areas, and those standards are generally more prescriptive than federal standards. The team also checked on College policies and procedures on assignment of credit and was satisfied that the College was in full compliance with existing policies, procedures and regulations.

Transfer Policies

Evaluation Items:

- ✓ Transfer policies are appropriately disclosed to students and to the public.
- ✓ Policies contain information about the criteria the institution uses to accept credits for transfer.
- ✓ The institution complies with the Commission *Policy on Transfer of Credit*.

[Regulation citations: 602.16(a)(1)(viii); 602.17(a)(3); 602.24(e); 668.43(a)(ii).]

Conclusion Check-Off (mark one):

✓ The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.

Narrative:

Transfer policies for College of the Siskiyous are clearly outlined in multiple college documents, but especially the Catalog and the Schedule of Classes, which the college continues to publish in a printed format. Students and the public are clearly advised both as to the mechanism for transferring courses to College of the Siskiyous and from College of the Siskiyous to other institutions.

Distance Education and Correspondence Education

Evaluation Items:

- ✓ The institution has policies and procedures for defining and classifying a course as offered by distance education or correspondence education, in alignment with USDE definitions.
- There is an accurate and consistent application of the policies and procedures for determining if a course is offered by distance education (with regular and substantive interaction with the instructor, initiated by the instructor, and online activities are included as part of a student's grade) or correspondence education (online activities are primarily "paperwork related," including reading posted materials, posting homework and completing examinations, and interaction with the instructor is initiated by the student as needed).
- The institution has appropriate means and consistently applies those means for verifying the identity of a student who participates in a distance education or correspondence education course or program, and for ensuring that student information is protected.
- The technology infrastructure is sufficient to maintain and sustain the distance education and correspondence education offerings.
- ✓ The institution demonstrates compliance with the Commission *Policy on Distance Education and Correspondence Education*.

[Regulation citations: 602.16(a)(1)(iv), (vi); 602.17(g); 668.38.]

Conclusion Check-Off (mark one):

✓ The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.

Narrative:

College of the Siskiyous uses dedicated software—Etudes (and the college will transition to Canvas)—to serve its students and to meet regulatory guidelines. The distance education offerings of the college are of high quality. The team reviewed and confirmed that courses require regular and substantive contact between instructors and students. The Curriculum Committee is well informed regarding expectations for distance education and its distinction from correspondence education.

Student Complaints

Evaluation Items:

- The institution has clear policies and procedures for handling student complaints, and the current policies and procedures are accessible to students in the college catalog and online.
- The student complaint files for the previous six years (since the last comprehensive evaluation) are available; the files demonstrate accurate implementation of the complaint policies and procedures.
- The team analysis of the student complaint files identifies any issues that may be indicative of the institution's noncompliance with any Accreditation Standards.
- The institution posts on its website the names of associations, agencies and govern mental bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints with such entities.
- ✓ The institution demonstrates compliance with the Commission *Policy on Representation of Accredited Status* and the *Policy on Student and Public Complaints Against Institutions*.

[Regulation citations: 602.16(a)(1)(ix); 668.43.]

Conclusion Check-Off (mark one):

The team has reviewed the elements of this component and has found the institution to be deficient in one area, namely the absence of contact information for filing complaints with accrediting entities.

Narrative (add space as needed):

The College has a form that students with complaints complete that is processed by the Vice President of Student Services' office. There is a log of complaints and resolutions as well as issues elevated to a hearing through the college's grievance process. The college posts information on its website related to regional, state, and program accreditations. Contact information for filing complaints with accrediting entities is not present on the website, but is available through the Vice President of Student Services' office.

Institutional Disclosure and Advertising and Recruitment Materials

Evaluation Items:

- The institution provides accurate, timely (current), and appropriately detailed information to students and the public about its programs, locations, and policies.
- ✓ The institution complies with the Commission *Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status.*
- ✓ The institution provides required information concerning its accredited status as described above in the section on <u>Student Complaints</u>.

[Regulation citations: 602.16(a)(1))(vii); 668.6.]

Conclusion Check-Off (mark one):

✓ The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.

Narrative:

Information about programs, locations, and policies is communicated to students and the public via the College Catalog, the Schedule of Classes, and the College website. The College discloses information about planning, and the status on accreditation. College of the Siskiyous does not misrepresent program costs or job placement and employment opportunities, offer money in exchange for enrollment, or guarantee employment in order to recruit students. Scholarships are awarded based on specified criteria to support students in the pursuit of their educational goals.

Title IV Compliance

Evaluation Items:

- ✓ The institution has presented evidence on the required components of the Title IV Program, including findings from any audits and program or other review activities by the USDE.
- The institution has addressed any issues raised by the USDE as to financial responsibility requirements, program record-keeping, etc. If issues were not timely addressed, the institution demonstrates it has the fiscal and administrative capacity to timely address issues in the future and to retain compliance with Title IV program requirements.
- The institution's student loan default rates are within the acceptable range defined by the USDE. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range.
- ✓ Contractual relationships of the institution to offer or receive educational, library, and support services meet the Accreditation Standards and have been approved by the Commission through substantive change if required.
- The institution demonstrates compliance with the Commission *Policy on Contractual Relationships with Non-Regionally Accredited Organizations* and the *Policy on Institutional Compliance with Title IV*.

[Regulation citations: 602.16(a)(1)(v); 602.16(a)(1)(x); 602.19(b); 668.5; 668.15; 668.16; 668.71 et seq.]

Conclusion Check-Off:

✓ The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.

Narrative:

The College of the Siskiyous meets the Policy on Institutional Compliance with Title IV. Through the use of Board of Trustee policies, administrative procedures, financial aid policies and procedures, and responsiveness of the College to implement strategies to address student cohort default rates, the College demonstrates that it has effectively met the Commission's requirements of this policy.

Standard I

Mission, Academic Quality and Institutional Effectiveness, and Integrity

Standard I.A Mission

General Observations

The College of the Siskiyous has a mission statement that encompasses its purpose, population, program offerings, and its commitment to student learning and achievement. The College collects data to determine how effectively it is accomplishing its mission, but needs to establish a process for using the data and engaging in college-wide discussions about the data. The College has aligned its programs and services with its mission, but there is no clear indication that the mission guides decision-making, planning, and resource allocation or informs goals for student learning and achievement. There seems to be a systemic lack of communication between the different constituent groups and campus leadership as to how decisions are made.

Findings and Evidence

The mission provides a comprehensive statement to the College's purpose, population, what it offers and its commitment to student learning and achievement.(I.A.1, ER6) While the College borders another state (Oregon), it identified its college population to be the nation and the world. The College has identified international students but do not purposefully outreach beyond their service area at this time. The College President indicated that the College identified its student population due to the nature of Distance Education opportunities.

The College has recently hired an Institutional Researcher, who has been working to provide the institution with the data and analysis necessary to determine if the College is accomplishing its mission (I.A.2). The team has not been able to review how the College actually uses data to determine if it is effectively meeting the mission, but through interviews and open forums, it was evident that the process for revising the mission statement was a campus-wide discussion. The College had been relying on statewide data resources, which has somewhat hindered its ability to effectively evaluate its Mission because the data is not readily available and the source very often cannot be relied upon. The Mission of the college has been instrumental in guiding the institutional decision-making, planning, and resource allocation. It also informs the goals for student learning and achievement (I.A.3). The 2010-2014 EMP shows in detail how resource allocation and planning is tied to the mission. The new IMP (Institutional Master Plan) identifies one of the institutional goals (goal #3) to evaluate institutional effectiveness for continuous improvement. This will be done with the institution-set standards as well as IEPI (Institutional Effectiveness Partnership Initiative). The Institutional Researcher identified some problems with Argos and Banner, which the college is working on to resolve. During interviews with various administrators,

faculty, staff, and students, it became apparent that planning and decisions were made but not always widely communicated to campus constituents.

The College has frequently updated its mission (previously 2008, 2014 and 2015). The mission is widely published on the website, the college catalog, the schedule of courses, and Board of Trustees meeting agendas The Mission is codified in Board Policy 1200 (BP1200) and is prominently displayed on the walls of the all of the buildings (I.A.4). The College reviewed the mission statement before creating the new Institutional Master Plan.

Conclusion

The College meets this standard.

It has updated its Mission to reflect changes in the population it serves and the goals it have identified within the Institution.

Recommendations

None

Standard I.B Assuring Academic Quality and Institutional Effectiveness

General Observations

The College has established Board Policies and Administrative Procedures supporting program review, student learning outcomes, planning, assessment, and continuous improvement; however, the implementation of these policies and procedures has not been consistently sustained. Dialog, both formal and informal, has been distracted by past administrative dysfunction and only recently has come back to focus on planning and assessment. The College has the basis to assure academic quality and institutional effectiveness, but has not effectively maintained a culture of assessment.

The team has reviewed the evidence relative to Standard I.B. Interviews with appropriate administrators, faculty, and staff were conducted to provide greater depth and detail about issues relative to Standard IB.

Findings and Evidence

Sustained dialog about student outcomes, institutional effectiveness, academic quality, and continuous improvement occurs regularly and collaboratively across various venues: Planning Committee, Academic Senate, Instructional Council, Student Services Council, and College Council. Dialog about equity (and diversity) have been sparse, primarily revolving

around completing a mandated Student Equity Plan. Equity and diversity are issues about which the College has been hesitant to dialog. (See also III.A.12)

The culture of the College is such that substantial dialog frequently occurs in spaces separate from formal meetings that is characteristic of small colleges. This culture has the opportunity to provide informed analysis of college issues, including those noted in Standard I.B.1; but because the dialog does not always take place within the structure of committee meetings, there seems to be a lack of a documented connection between planning and decision-making.

Participatory governance at the College had been lost for an extended period of time until it was reinstated with the creation of the College Council in October 2014. The College Council has been able to provide a venue for substantive dialog about program reviews and planning, but as of yet, college-wide dialog has only been minimally sustained. (I.B.1)

The college acknowledges some of its deficiencies in completing and utilizing program reviews and SLOs. Program review, particularly, has been sporadic, at best. One year, program review was set aside completely. The adequacy of data to be used in the program review process has suffered from the absence of an institutional researcher. Additionally, the quality of program reviews varied widely among departments, from those done very well to those not done at all. Program reviews for student services and academic services departments were also completed, but those were only recently completed. There has been assessment of the processes of both student services and administrative services program review which has resulted in recommended improvements for the next program review cycle.

The College states that SLOs are defined and assessed as a part of the program review process. Despite the challenges posed by the software used for program review and lack of substantial data, the college is still responsible for defining and assessing program and student learning outcomes. Within the instructional departments, SLOs are defined, as well as within some student services departments. Assessment of SLO and the data derived from such assessments are only beginning to be utilized now. In some non-academic departments, the process of defining SLOs has recently begun. It should be noted that the college does address SLOs in one of its Quality Focus Essays and, in that essay, does plan to broaden the dialog and to improve the SLO assessment process.

The College asserts that, as a part of program review, SLOs are defined as part of curriculum development. Since curriculum is an academic endeavor, it leaves unstated where program or student learning outcomes for non-academic departments are defined. The College also asserts that SLOs are evaluated "through campus discussion," without clearly indicating in which venue that discussion takes place. Elsewhere in the Self-Evaluation Report and in the evidence, it is stated that the academic SLOs are primarily assessed as a part of final exams or class projects. Although such SLO assessments can be valid and viable, there is little evidence that all departments actually close the loop and implement improvements where SLOs are not being achieved.

Furthermore, program reviews as of now are not responsive to institution-set standards. It appears that the institution-set standards are of college-wide concern but somehow irrelevant

to individual departments. Program reviews note success rates, for instance, and how those rates have gone up or down over time, but do not reference performance compared to the institutional standards, nor are there plans to meet any performance gaps. (I.B.2)

Although the College, through the work of the Planning Committee and the Academic Senate, has set some institutional standards, the standards do not always appear to be appropriate. There is wide variation between success rates for basic skills students enrolled in spring semesters compared to students enrolled fall semesters, as much as 10-13% in the past two years. The institution-set standard is seems to have been established to accommodate the low success rate of spring semester students although the fall success rates clearly indicate that students are capable of succeeding at a higher rate. The standard set for transfer courses is at least 10% above student performance. Despite the availability of statewide performance metrics, there are no institutional standards for special populations or ethnicities that would address equity issues. Nor is there evidence that the institutional standards are addressed by individual departments as a part of program review. (I.B.3)

The College is fully aware that it had not captured and used data in the recent past, and the college notes that this has partially been due to the absence of an institutional researcher. The previous "researcher" was focused entirely on planning and did not consider it a part of the job description to be a "data puller." Recently, the College has hired a researcher who has made significant strides in collecting, analyzing, and using data. The College is hindered in extracting college-specific data due to multiple and ineffective computer systems. The College does make good use of available statewide data sources. Within the self-evaluation, data sources for assessment of academic programs has come primarily from the California Community Colleges Chancellor's Office DataMart and from the statewide Student Success Scorecard. The use of local or disaggregated data, in both academic and student service areas, has been essentially absent. Contributing to this is the fact that the researcher is not consistently able to query the college's Banner database and sometimes must rely upon the IT department to write queries. Throughout Standard I.B, analysis of data and what the data means with regard to institutional processes has been negligible.

There is still much to be done to effectively incorporate data and its analysis into program review, institutional planning, and college-wide decision-making in support of student achievement and student learning. Specifically, the college must overcome a culture of distrust relative to data. The researcher encountered considerable pushback from faculty as he began to produce data that contradicted long-standing anecdotal conclusions. There seems to be a fear of publishing data on the College's research website that might reveal to the public a less than favorable picture of student achievement. The college has not fully developed a culture of assessment. (IB4)

The college wide "floundering" on program review has been candidly acknowledged, and the College has pledged itself to re-invigorating the program review process. The College is currently on a program review cycle that calls for comprehensive program review every three years, with annual updates on off years. Academic program reviews are housed within

CurricUNET, as are some student services reviews. It does not appear that program reviews have recently been completed for administrative services departments.

Instructional department program reviews are primarily built upon data emerging from SLO assessments and from individual department enrollment, persistence, course retention and success rates, FTES, FTEF, and average GPA. Student services program reviews do not have sufficient data to indicate at what rate students access services or that those services are having an impact on students' achievement or learning. Except for college-wide data, there is no disaggregated data by department addressing mode of delivery.

Standard I.B.5 also calls on the college to assess its effectiveness by evaluating its goals and objectives. The 2010-2014 Educational Master Plan (EMP) had established measureable objectives, which the college annually assessed. Those assessments were analyzed and, where appropriate, adjustments to action plans, expectations, and objectives were made.

Responding to data from the Student Success Scorecard, the College is instituting curricular redesigns for both the English and math departments to improve student learning. This is an example of how the college has effectively made use of available disaggregated data. At this point there is no data or analysis to assess if the improvements are effective, but the changes are still in the early stages of implementation. The College asserts that it regularly uses qualitative data to assess student opinion and engagement, but the most recent student surveys were administered in 2012.

The college has shown a good faith effort to incorporate available data. However, it has not been a college-wide practice to consistently consult and analyze data as a part of the decision-making process. Some program reviews suggest needed changes for the department, but without the data to support those suggestions. The self-evaluation sometimes asserts standards being met without evidence or data analysis. (I.B.5)

As part of its Student Equity Plan, the college was able to disaggregate some data for certain special populations, gender, age, and ethnicity using the California Community College's Chancellor's Office DataMart. Admittedly the numbers within many groups, once disaggregated, are too small to be meaningful. This will remain a challenge for the College, given its small and relatively homogenous student population. However, there are groups large enough to be broken out and assessed. The College did a good job of responding to disaggregated data for basic skills students.

The College's own institutional standards reflect performance gaps for distance education students, and DataMart reveals a gap between the institution-set standard for transfer student success and the actual rate at which college transfer students succeed. The presence of an institutional researcher will give the College an opportunity to disaggregate data in alignment with the unique student population and college-going patterns. (IB6)

Evaluation at a college-wide level policies, practices, procedures, and plans is generally driven by senior administration, and the college has not had the stability at that level to do the best job possible. The college acknowledges that fact. Implementation of college plans has

veered in different directions depending on the vision of rotating administrators. Those changes in emphasis in how plans were interpreted and implemented were often based on personal preference or conviction rather than data and assessment. The college, through College Council, is in the midst of reviewing policies and procedures throughout the spring 2016 semester.

With the establishment of College Council as the college's participatory governance group, the College has a venue for dialog and evaluation of its policies and practices. The strategic goals and objectives are annually assessed and reviewed by the Planning Committee, but that evaluation for some objectives is sometimes the result of a single individual rather than a collaborative effort. (I.B.7)

The College does maintain a research website, but it is not always current; the most recent student profile, for example, is from 2010. Accreditation information is one click away from the home page. The college has multiple venues on campus to share the results of its assessment and evaluation activities, including Instructional Council, Student Services Council, and College Council, but it is the collegial environment of the small college that best contributes to broad communication. (I.B.8)

The area of planning has been hard-hit by the administrative turnover the College has endured. As noted in the self-evaluation, each new administrator brought a new vision and a new take on College plans. The planning processes were too often devoted to revising plans rather than implementing and assessing them. The self-evaluation also candidly acknowledges that items in the 2010-2014 Educational Master Plan (which serves as the College's strategic plan) "fell through the cracks" and that other items were mostly championed by single individuals.

The college developed a new EMP (which has become the Institutional Master Plan) through a collaborative effort that gave input to all college employees and various councils and committees. Multiple individuals have been assigned responsibility for each goal so implementation and assessment is more broadly based. Although the college has a well-designed, integrated planning process as evidenced in its Planning by Design document, this document is currently undergoing updates and revisions to make it less cumbersome. The College also admits that the planning cycle was not completed for the previous EMP; incomplete goals and objectives were rolled over, but there were no effective assessment results to integrate into the current Institutional Master Plan.

The Planning by Design handbook reveals that the College has the appropriate planning policies in place and that the College intent is to fully integrate all of its planning processes to address both short- and long-range needs, consistent with the College mission.

Although the college now appears to be back on track with its planning processes, the interrupted cycle of ongoing planning, assessment, and continuous improvement suggests that the college does not have an ongoing and integrated cycle of planning. (I.B.9, ER19)

Conclusion

The College does not meet the Standard.

A shared governance venue for college-wide dialog has only recently been established, and evidence of dialog linking data, planning, budgeting, and decision-making is minimal. Student learning outcomes are addressed and assessed, principally via final exams and class projects. The college has established institution-set standards but does not use them as an evaluative tool; the requirements of standard I.B.3. Standards I.B.4 and I.B.6 are only partially met. There is no use of disaggregated data nor reference to performance compared to institution-set standards. Assessment of the planning implementation and assessment of the efficacy of plans has not been completed. Standard 1.B.9 has been partially met.

Recommendations

Recommendation 1: In order to meet the Standard, the team recommends that the college review the propriety of its institution-set standards, assess student achievement, and student learning relative to those standards, and address performance gaps in pursuit of continuous improvement. (I.B.2, I.B.3, IV.B.3)

Recommendation 2: In order to meet the Standard, the team recommends that the college engage in integrated and sustained assessment, dialog, planning, and resource allocation, informed by data that has been disaggregated appropriate to the college community, leading to continuous improvement in student learning and student achievement. The team also recommends that, as a part of this planning process, a Technology Plan is completed, based on appropriate data, assessment, and dialog. (I.B.1, I.B.4, I.B.5, I.B.6, I.B.9, III.C.2, IV.B.3, ER19)

Standard I.C Institutional Integrity

General Observations

The College publishes accurate information to its constituents related to its mission and programs as well as its accreditation status. The College catalogue is published both in print and online. Although both are updated at the same time the information does not always match. There are checks and balances in place to assure consistency of data, and currency of all facts, requirements, and procedures. The catalogue is well organized and easy to use due to a format that integrates course descriptions, program learning outcomes, career options, degree/certificate options, and course descriptions (ER20). Distance Education is described as online courses as well as videoconferencing options which is interactive. Student achievement data on all students is presented through the Chancellor's Office Scorecard information as well as Scholar Athletes and students on the Dean's List. The College provides a description of its degrees in terms of purpose, content, course requirements, and expected learning outcomes in the current catalogue, on the website, and through hard copy brochures. The Schedule of Classes includes useful information to students including the

academic calendar, steps to registration, college fees and financial aid, academic and college policies, and courses grouped by type. Each course syllabus includes student learning outcomes and is available to all students in all classes. The College reviews its policies on a 5-year cycle and subscribes to the Community College League of California for assistance. Program and course information is updated on a regular cycle, and the catalogue is now published every year.

Students are provided information on the cost of attendance through the catalogue, the Schedule of Classes, and through the website. Board policies on academic freedom and student behavior standards are clearly published in the catalogue.

The College's Institutional Self Evaluation Report addressed and provided evidence for its compliance with the requirements of Standard I.C, Institutional Integrity. While uneven and often short in analysis, the summary of the evidence, analysis, and evaluation provided indicates ways in which the college meets the Standards.

Findings and Evidence

The Public Information Office, the Office of Instructional Technology, the Student Services Office, the Office of Instruction, and the Research Office work collaboratively to ensure all information is clear and accurate. Accreditation information is prominently displayed on the website and on frequently used documents. Administrative responsibility has been assigned for the catalogue, the Class Schedule, and for press releases. (I.C.1, ER20)

There is coordination between the electronic version and the hard copy of the catalogue. The catalogue clearly describes distance education options and how faculty interacts with students. There is both committee and administrative oversight to ensure the accuracy of degree and certificate information. (I.C.4) Syllabus information includes information on student learning outcomes consistent with the official course outline. The catalog is now updated every year instead of every two years. This change is commendable as it is assumed it was adopted to assure greater accuracy. The College evaluates and updates its policies and procedures regularly. (I.C.5) Cost of attendance is displayed prominently for students, and there is a tool to estimate individual costs of attendance through a price calculator. (I.C.6) Board and administrative policies on academic freedom can be easily found on the website and the Faculty Handbook. These policies and procedures are the same for on line courses as well as face-to-face courses. The College publishes a Code of Professional Ethics for employees and a Code of Ethics for the Board of Trustees. Academic honesty/plagiarism is clearly defined and can be sanctioned under the Code of Conduct.

The College addresses the issue of student cheating and plagiarism in BP/AP 5500 and in the 2015-16 *Student Planner*. However, while these documents recognize cheating and plagiarism as serious issues, the College does not have procedures to guide faculty in dealing consistently with violations. Faculty practices vary widely across syllabi, from indicating that students may forfeit credit for individual assignments which include plagiarism, to an opposite extreme where students are advised that they will fail the class for even a single

instance of plagiarism. The College should revise and communicate the administrative procedure so that students are treated consistently across the institution (I.C.8).

The August 2013 revision of the *Faculty Handbook* includes the following:

"Faculty members must strive for factual accuracy and show restraint in dealing with topics outside their area of concentration.

"While showing respect for the opinions of others, the instructor should, after impartial examination of the evidence points, note the inconsistencies in the data presented, if appropriate.

"Available data must be investigated comprehensively without selectively omitting pertinent information" (section 25, page 34)

In addition, the 2014-15 Faculty contract states the following expectations:

- "7.1 Standards of Performance for Contract and Regular Faculty
- 1. Communicates their academic subject clearly and effectively.
- 2. Displays a mastery of their academic subject material..."

Conversations between members of the team and a number of faculty indicate that the principles articulated in the *Faculty Handbook* and Contract are respected and adhered to. The college meets this standard (I.C.9).

The College does not require conformity to **specific codes of conduct.** This standard does not apply to College of the Siskiyous (I.C.10).

The College does not operate in **foreign locations.** This standard does not apply to College of the Siskiyous (I.C.11).

The College complies with Eligibility Requirements, Accreditation Standards, Commission policies, guidelines, and requirements for public disclosure and addresses the expectations of this standard in part through Board Policy 3200, which reads:

"The Superintendent/President shall ensure the District complies with the accreditation process and standards of the Accrediting Commission of Community and Junior Colleges and of other District programs that seek special accreditation.

"The Superintendent/President shall keep the Board informed of approved accrediting organizations and the status of accreditations.

"The Superintendent/President shall ensure that the Board is involved in any accreditation process in which Board participation is required.

The Superintendent/President shall provide the Board with a summary of any accreditation report and any actions taken or to be taken in response to recommendations in an accreditation report."

The College was sanctioned (Warning) after its previous comprehensive review, and the evidence indicates the college worked diligently to address and resolve the issues identified in the 2010 *Team Report*, and all issues were resolved after two follow-up reports and visits in 2011 and 2012. (ER21)

The College received a letter from the Commission dated 29 June 2015 indicating that it had "not adequately addressed College Recommendation 1 from the Financial review Task Force" and that it should do so at the time of the March 2016 comprehensive visit; these issues were reviewed by the 2016 Comprehensive Visiting Team (I.C.12, ER21).

The College received a letter from the Commission dated 17 August 2015 indicating that it "has been flagged for enhanced monitoring... on the basis of its responses in the March 2015 Annual Report." These issues were reviewed by the 2016 Comprehensive Visiting Team. (ER21)

The College submitted a Substantive Change Report for Distance Education dated April 2015.

The College maintains Instructional Service Agreements (ISAs) for two programs distant from the College's Service Area. One agreement covers the provision of non-credit ESL in Kern County under the auspices of an organization called the Farmworker Institute of Education & Leadership Development (FIELD) as well as a police training program under the auspices of the San Francisco Police Academy (SFPA). The June 3, 2015 Board minutes record that:

"The Board was asked to approve the continuation of two ISAs. In 2012 the college initiated two ISAs with the Farmworker Institute for Education and Leadership Development (FIELD) and the San Francisco Police Academy (SFPA). Both agreements are considered temporary with 3-5 year lifespans. However, in light of (1) the growth in FIELD's charter school movement; and (2) the revision upward to 175 new officer hires per year for the next 3 years in San Francisco, we believe now is the time for board approval to continue to operate the ISAs so long as the relationships prove beneficial to the district. COS was recently identified as operating within all of the 13 ISA guidelines by the Chancellor's Office. Continuation of the ISAs is vital to maintaining existing staff in the short- term."

These two programs account for a significant portion of the College's FTES. For fiscal year 2014-15, the FIELD program accounts for 307.91 FTES and the SFPD program for 539.84 FTES, for a total apportionment of \$3,543,642 or 43.6% of college FTES. The College indicated that it realized the need to submit a Substantive Change Report for these programs only after the college was within six months of its March 2016 comprehensive visit.

Given the significant percentage of the college's enrollment in these two programs, the fact that there seems to be no sustained documentation of student learning outcome assessment or program review is a concern. The faculty providing instruction in these areas are not employees of the College and have no obligations under the faculty bargaining agreement. There is no evidence of program reviews for these programs and they do not appear to be factored into the College's planning process. The College justifies the lack of inclusion of these programs into is assessment and planning process because they are temporary; while the college is aware of its fiscal dependency on these programs, there is no fiscal plan in place should either ISA be terminated.

The College's homepage includes a link to an Accreditation page which addresses matters of accreditation with clarity. Additionally, there are links to additional documents and discussion of the College's programmatic accreditation for (1) *Administration of Justice Reserve Peace Officer Programs* (accredited by the California Commission on Peace Officer Standards and Training), (2) an *Alcohol Drug/Human Services Program* (accredited by the California Association of Alcoholism and Drug Abuse Counselors), (3) a *Fire/Emergency Response Technology Program* (approved by the California State Board of Fire Services as an accredited regional academy for the State Fire Marshal's Office of the California Department of Forestry and Fire Protection), (4) an *Emergency Medical Services - Paramedic program* (accredited by the Commission on the Accreditation of Allied Health Educational Programs), and finally (5) the *Licensed Vocational Nursing* (LVN) program (approved by the State of California Board of Vocational Nurse and Psychiatric Technician Examiners).

Members of the team heard concerns from a variety of members of the College community that the Nursing program has multiple challenges. While student pass rates are high, the College has difficulty recruiting and retaining nursing faculty, and the director of the program is currently an interim. The college has also struggled to maintain clinical sites for nursing students, and there was discussion while the team was on the campus of a possible new site over three hours distant from the campus. The next Board of Registered Nursing visit is scheduled for spring 2017.

Both the written documentation and the team's observations confirm the impression that the College is committed to maintaining and enhancing educational quality. The College's *Institutional Self-Evaluation Report* and the team's observations provide evidence of a college attentive to developing the policies and procedures relevant to its small size and the community it serves with the goal of providing high quality instruction to its students (I.C.14).

Conclusion

The College does not meet the Standard.

Recommendations

Recommendation 3: In order to improve institutional effectiveness, the team recommends that the College establish a timeline and responsible individuals for updating both the print and electronic version of the College catalog. Additionally, the team recommends that the updating of the College catalog be coordinated with the updating of the College website to ensure students are provided the most current and accurate information. (I.C.1, I.C.2)

Recommendation 4: In order to meet the Standard, the College should file a Substantive Change Report regarding its Instructional Service Agreements for the FIELD and SFPA programs. (I.C.12)

Standard II: Student Learning Programs and Support Services

Standard II.A Instructional Programs

General Observations

The College has a small but dedicated faculty. Collaboration and dialog between full- and – part-time faculty is robust in many disciplines. The quality of all modes of instruction is high.

Courses at the College are scheduled so that students are able to complete programs of study within a reasonable time frame; faculty and administrators believe all necessary classes should be offered within at least a two-year rotation. The administration works with faculty to schedule courses at a variety of times, across sites, and online, providing students with opportunities to take classes at their convenience and complete programs within two years. (II.A.6, ER9) The college offers courses at its main campus in Weed, and at its Yreka campus. It also offers video conference classes at the Yreka campus and at high schools in its service area as well as a wide variety of online courses. (II.A.7)

The College awards credit for courses, degrees, and certificates based on student achievement of course requirements, objectives, and student learning outcomes. (II.A.9, ER10) Transfer-of-credit policies are available to students and the College articulates courses based on comparable student learning outcomes. (II.A.10) Department-wide and/or program examinations are utilized in certain CTE programs. External agencies create and validate these exams.

The College considers a program as any course of study which results in a degree or certificate. All degrees include an associate degree general education component, which includes components in communication, information, quantitative competency, analytic inquiry skills, ethical reasoning and the ability to engage diverse perspectives. (II.A.11, II.A.12, ER12) Each degree has program specific learning outcomes which are mapped to the student learning outcomes of the coursework required for the degree. (II.A.13)

Findings and Evidence

The College places great emphasis on its instructional programs. The College catalog and schedule of classes are comprehensive in communicating to students the multiple elements that make up academic programs: programs are thoroughly described, program learning outcomes are specified, career options are detailed, and individual courses are enumerated. The College has a modest and growing distance education program, which is important given the huge geographic size of the College's service area. Distance education is not limited to online and hybrid courses, but the college also offers innovative multi-location video-conferenced offerings.

The College offers both traditional liberal arts transfer programs as well as a number of career and technical education program important to its community, including programs in police, fire, and nursing. The college acknowledges difficulty with documentation of the assessment of course-level student learning outcome assessment due to difficulties in implementing the CurricUNET assessment module.

The College has seen declining enrollment over the past several years. The number of full-time faculty declined by a third. A number of disciplines (anthropology, philosophy) include no full-time faculty. While the College Catalog includes an unusually broad number of courses for a college of its size, it appears that many courses have not been offered in many years. In fact, record keeping is such that members of the Curriculum Committee are not certain how past course offerings could be documented, since it has been common for scheduled classes to be cancelled for low enrollment. The College also offers a number of Associate Degrees for Transfer, though team members observed a Curriculum Committee meeting in which members wondered whether the college had approved degree patterns requiring the regular offering of classes not consistent with its fiscal resources. (II.A.16)

At some point in the past, department chairs built class schedules, but that responsibility is now in administrative hands. The College appears to be in the midst of a transition toward a schedule of classes built on faculty preferences to one in which the schedule balances offerings in a way that better serves student needs. Given the College's extreme dependence on the Instructional Service Agreements described in Standard I.C.12, the college has a pressing need to develop an enrollment management plan that can develop the FTES capable of supporting the college's needs should one or both ISAs be terminated.

Course outlines include not only student learning outcomes, but a grid that suggests to faculty, especially part-time faculty, what kinds of assessment tools might be appropriate for specific outcomes.(II.A.11) The College Catalog includes program learning outcomes at the heading of each discipline's catalog section. Despite problems with the CurricUNET Assessment module, full-time faculty are engaged with student learning outcome assessment; in several academic disciplines, full-time faculty indicate that they work closely (if informally) with part-time faculty. This is of particular concern given that part-time faculty may be hired, scheduled, and evaluated without the participation of full-time faculty with discipline expertise. (II.A.2)

The College has a robust online education program. The College has used Etudes as its learning management system, but has planned to migrate from Etudes to Canvas in academic year 2016-17, which has been adopted by the California Community College system. The College's recently formed Distance Education committee which emerged from faculty initiative and is working collaboratively with the College's administration. Committee members have been to a variety of trainings associated with the Chancellor's Office's Online Education Initiative and is adapting a variety of materials to improve online education at the College. (II.A1, ER 11).

Review of many course syllabi indicate that a high level of quality of instruction is being offered. Informal evidence of dialog between full-time and part-time faculty indicate that changes in instruction methods are widely discussed. Dialog during the Curriculum Committee meeting observed by team members indicates an embracing of SLOs and dialog about how to engage in authentic assessment. (II.A.2).

The College has identified course level student learning outcomes, but the college's tool for documenting assessment activities is not working well. At the Curriculum Committee meeting, observed by team members, it was stated that the next meeting agenda would include student learning outcomes primary topic, which will be a joint meeting with the Program Review Committee. At that meeting the two committees would generate a list of issues to be resolved with Governet, the provider of the CurricUNET software. The College's fallback tool, Survey Monkey, is more effective at documenting past assessment activities than developing new strategies and interventions to improve student learning.

The college's course outline template not only includes course level student learning outcomes, but also indicates the methods of instruction and evaluation appropriate to evaluate student achievement of stated learning outcomes. The College's policy documents, faculty contract, and *Faculty Handbook* each articulate high expectations for all faculty in meeting the educational needs of students.

Team members reviewed several syllabi in association with the standard. The College provided over 500 syllabi from calendar year 2015 from all academic terms and for both full-time and part-time faculty. Most, but not all, syllabi included student learning outcomes derived from the college's course outlines of record. However, other syllabi included objectives but not outcomes (and the college's course outlines include both), neither objectives nor outcomes, or outcomes that appeared to be those the instructor wished to emphasize. One syllabus for a FIELD ESL course, which *does* include SLOs, indicates that the syllabus is populated with content "from the Lassen college catalog."

Full- and part-time faculty seemed equally prone to omit the College's approved SLOs. The Faculty Handbook includes a template of a sample syllabus (First Day Handout) and many faculty appear to use the document. Faculty are required to submit syllabi to the administration, which files, but does not seem to review.

Syllabi for dozen online courses reviewed were generally better at including the College's approved course SLOs. This may because faculty teaching online are required to take the

Etudes course that prepared faculty to teach online. The quality of faculty engagement with students and evidence of regular and substantive contact was very clear (II.A.3).

The College offers a typical range of pre-collegiate courses. As with most California community colleges, the College's course numbering systems identifies the level of the course. The College has recently ceased offering its lowest level mathematics class, which has had the effect of accelerating the math curriculum, but faculty in both English and math are exploring options that would lead to accelerated student progress through these key disciplines.

The College's programs follow established norms for programs in higher education. As a California community college, the College's curriculum at the course and program level are highly regulated by Title 5 of the state code of regulations. The College's associate degrees require the completion of 60 semester units.

The College provides students information on the required courses necessary to complete all degrees and certificates in their catalog. High demand courses are offered at different times, at different locations, through video conferencing, and online allowing students to take courses to fit their schedule. Faculty, along with the relevant dean, analyze and evaluate course offerings in terms of time and frequency. Recently, the Vice President of Instruction revamped the schedule of courses to ensure that high-demand general education courses are not offered at conflicting times. The college is planning to implement registration for the entire year for incoming freshman in order to ensure students can complete their programs of study in a timely manner (II.A.6),

The College offers courses at two campus and offers numerous courses via video and online to meet the needs of its students in a very large service area. Orientation and library services are provided for online courses, and students are able to get assistance in writing online through the Online Writing Lab. Faculty at the college exhibit concern and awareness of differing student learning styles and student needs. Discussion of effective teaching methods takes place informally among faculty as well as systematically in the Basic Skills Committee. This committee has initiated major changes in both math and English curricula designed to increase the success of basic skills students. The college will begin offering accelerated math and English classes to cohorts of students. These classes will include embedded tutors and require mandatory supplemental instruction in order to support basic skills students with varying needs and issues. The administration has supported these efforts by sending math and English faculty to conferences and workshops on acceleration and student success (Standard II.A.7).

Exams created and validated by third-party entities are used in the Fire Technology, Administration of Justice, Welding Technology, Emergency Medical Services, Nursing programs (II.A.8).

The College's Curriculum Committee ensures that each course meets for the proper number of hours for the credit that is awarded for the course. Credit is awarded based on the student's successful achievement of the course learning outcomes. These outcomes are included on

Course Outlines of Record, which are reviewed and approved by the Curriculum Committee, as well as on course syllabi (Standard II.A.9).

The College's catalog contains information on transfer credit, and procedures for obtaining transfer credit are outlined in Academic Procedure 4237. Articulation agreements are developed and maintained by the College's articulation officer with input from counselors and faculty. Articulation decisions are based on courses having comparable learning outcomes, content, and descriptors (Standard II.A.10).

All degrees at the College include an associate degree general education component, and the General Education programs include components in communication, information, quantitative competency, analytic inquiry skills, ethical reasoning and the ability to engage diverse perspectives (II.A.11).

The GE philosophy is articulated by the Academic Senate and appears in the College catalog. When a course is proposed for satisfying a general education component, faculty in the GE area are consulted as to whether the course learning outcomes meet the GE learning outcomes (II.A.12).

The College offers only associate degrees. All degrees in the specified disciplines are centered on core courses within those disciplines and include learning outcomes that reflect those core theories, concepts, and skills (II.A.13).

The college has strong relationships with industry and licensing entities and maintains Advisory Committees that provides information to the college regarding industry standards and the technical, professional competencies of the program graduates. Degrees and certificates are awarded upon completion of coursework, certification and licensure requirements. Testing is aligned with state and national skill standards and tests (II.A.14).

The Administrative procedure that addresses program closure contains no provision for ensuring students will be able to complete the degree or certificate they have started (II.A.15).

Program Reviews are used by each program to form its decisions on how to improve student outcomes. While the content and criteria of evaluation provide by program reviews have remained relatively constant, the reporting mechanism of the format has not been consistent (II.A.16).

Conclusion

The College does not meet the Standard

The college does not fully meet Standard II.A.15. The administrative procedure addressing program closure (AP 4021) contains no provision for ensuring that students will be able to complete the degree or certificated they have started.

Recommendations

Recommendation 5: In order to meet the standard, the team recommends the College develop a mechanism to ensure that all faculty include the College's approved student learning outcomes in course syllabi. (II.A.3)

Recommendation 6: In order to meet the Standard, the team recommends the College develop mechanisms to assure that student learning outcomes assessment and program review take place for the FIELD and SFPA programs. (II.A.3)

Recommendation 7: In order to meet the standard, the team recommends that Administrative Procedure 4021 provide guidance on program elimination and when program requirements are significantly changed to ensure appropriate arrangements are made for students enrolled in the program to complete their education goal in a timely manner. (II.A.15)

Standard II.B Library and Learning Support Services

General Observations

The College supports student learning and achievement by providing library, and other learning support services to students and to personnel responsible for student learning and support. There is a staffed Library on the Weed campus and a staffed Academic Success Center (ASC) on both the Weed and Yreka campuses. Both the Library and ASC offer a variety of services that are designed to support student learning for all programs and subject areas. While these services are available to all students regardless of location, the hours of operation are limited for both the Library and ASC. The Library does not have a physical presence on the Yreka campus, and the online services and book delivery are not well known at the Yreka site. The ASC is located in various locations. On the Weed campus, there is a Math Lab, Writing Lab and Reading Lab. Staffing is provided by faculty members and staff. The Math Lab has consistent coverage during hours of operation, but the Writing and Reading Labs require appointments. The Yreka ASC offers similar services.

Findings and Evidence

The Library recently restored the full-time faculty Librarian position and is rebuilding its classroom instruction for both face-to-face and online classes. A more visible presence on the Yreka site as to the services and instruction the Library can provide is needed. The library's webpage offers a variety of databases and ebooks that address the needs of the disciplines on campus and is accessible 24/7 which allows students taking classes online or at the Yreka site to have access to these resources. The library also offers a reserve collection of textbooks that are available onsite. The ASC's online resources are presently more limited to Etudes, the college's online course management system and videoconferencing. (II.B.1)

The Library welcomes input from faculty, other learning support professionals, staff, and students when selecting and maintaining educational equipment and materials. Reviews from a variety of journals, direct requests and communication with instructors regarding materials for assignments are used. Materials are chosen in a wide range of topics to support all courses in general and specific assignments. Online databases and eBooks provide direct and online support for students at both sites. Other online materials such as streaming videos and some audio materials are available. Recent collection decisions have focused on providing materials for the online community and devoting significant funds to the online resources. The Library's budget has remained fairly flat and the print collection suffers in terms of quantity, currency and variety. The Library works closely with Technology Services for equipment purchases and maintenance. The Faculty is also able to provide input into instructional equipment purchases within the academic program reviews. An Instruction Council relies on this faculty input when prioritizing and awarding instructional equipment funds. A Technology Council, which includes faculty, learning support services and Technology Services staff members also discuss and consider selection and maintenance of technology related equipment. (II.B.2)

The ASC and Library evaluate their services using methods such as student surveys, class evaluations, and student participation data. Both collect student evaluations after classes, such as in-class library visits and Student Success Seminars which have been valuable for improving services. A recent student survey indicated a need for additional open hours. The Weed ASC and Library piloted a program during fall 2014 to extend hours during the week prior to finals. Many Library class visits and seminars support the College's General Education SLOs for Information Competency Area A, particularly, "Locate and evaluated for credibility information provided by the Library, Internet resources and other sources". The Library also supports the Information Competency SLO with English classes. The Library and ASC would also benefit from surveying students who are not using their services for improvements. (II.B.3)

The Library collaborates with commercial vendors and other organizations in order to provide a range of library services. All contracts are reviewed to ensure for reliable maintenance, service and adequate security. The Library is a member of the California Community Colleges Council of Chief Librarians which provides membership in the Community College Library Consortium and the LVIS, Libraries Very Interested in Sharing. Services are evaluated before entering into contracts and the college's requirements for data security, reliability and maintenance is established. (II.B.4)

Conclusion

The College meets the Standard.

Recommendations

None

Standard II.C Student Support Services

General Observations

The College engages in program review as a means of evaluating the quality of its student support service areas. A regular and consistent cycle of program review, that is consistent across service areas, needs to be established beyond 2014-2015. The College offers support services both in-person and via phone to students attending both the Weed and Yreka campuses and students at a distance. The College has established athletic programs and co-curricular activities that are appropriate to its mission and student population. There is regular evaluation of Athletics and Co-Curricular activities through program review. The College provides counseling and/or academic advising services that support student development with both classified staff and counseling faculty assigned to ensure students are matriculated, receive educational planning, and are served across support areas. Key academic information including transfer policies and petitioning to graduate is also made available to students through the College website. There are robust online professional development trainings available to counseling faculty and staff. (ER15)

The College adheres to established board policies (5010 and 5052) and administrative procedures (5010, 5011, and 5040) on admissions policies that are consistent with the college mission and maintaining and releasing student records. The 2012 SENSE survey data demonstrated that the College had higher than average results in the area of providing clear academic plans and pathways as a way to stay on track to degree completion compared to nationwide cohorts. The College utilizes COMPASS as a standardized instrument for placement as well as other multiple measures including high school transcripts and student confidence level during the assessment process. They also accept ACCUPLACER test scores primarily from out of state students. The math and English departments have reviewed the placement score recommendations for entrance into the initial math and English courses and have recently added a level of English.

The College secures student records in both paper and electronic form through locked cabinets and industry standard firewalls and security system. Both the IT staff and the Records staff report there has never been an issue with record security. FERPA regulations are adhered to by asking students to verify their identity and/or appropriate security code. The Director of Admissions and Records meets with faculty every semester to review FERPA regulations where she covers pertinent topics such as the difference between the privacy rights of high school students and college students. All staff with privileges to view student records must first complete an online training on FERPA. The Director of Admissions is responsible for granting permission to have access to student records, and assesses each request carefully. Administrative Procedure 3310 identifies when and how records can be destroyed under Title 5 and federal procedures.

Findings and Evidence

The College has previously engaged in program review to evaluate three overarching support service areas: Counseling and Support Services, Student Life, and Enrollment Services. Service areas alternate between focused and comprehensive program reviews with focused reviews encompassing outcomes assessments and comprehensive reviews encompassing an evaluation of the services area. The College reports that all support services have previously engaged in the program review process which is evidenced by all three service areas completing a focused program review in the 2014-15 cycle. However, there is a lack of consistency regarding which departments engage in comprehensive program review and currently no timeline exists beyond 2014-15. The team confirmed that the College has established and published admissions policies and procedures that are consistent with its mission and an open-access community college. Admissions requirements are available and publicized on the College's website, in the College catalog, and the schedule of classes. (II.C.1, ER 15, ER16)

The College engages in assessment of student learning through its focused program review process. For the 2014-2015 program review cycle, all three service areas completed a focused program review that included identifying outcomes, collecting and analyzing data, and making recommendations for continuous programmatic improvement. (II.C.2)

The College provides support services at the Weed campus with dedicated staff to serve students across departments. A cross-trained Student Services Specialist is housed full-time at the Yreka campus to serve students with any support services questions as well as connect students via phone or email to dedicated staff at the Weed campus. There is a part-time Counselor dedicated to the Yreka campus as well who is also cross-trained to answer questions about application, financial aid, and graduation. Students looking to access services at other sites or at a distance access staff via phone during business hours or through email when someone is available to respond. Support services at both the Weed and Yreka campuses are open during extended evening hours at the beginning of the semester to accommodate high peak periods. The College does not assess if services offered to students at a distance in their current format meet student need. The Counseling/Advising department deploys a survey to students who participate in the SOAR (Siskiyous Orientation Advising Registration) process to assess student experience. There is evidence that information from the survey is utilized to further inform SOAR and improve upon the process. The College also offers tutoring at both the Weed and Yreka campuses and assesses the number of students served. (II.C.3).

The College provides students with the opportunity to participate in twelve team sports that are offered in accordance with federal Title IX guidelines. There is dedicated staff to support athletic activities. Student athletes regularly attend study hall in the Academic Success Center and are regularly monitored regarding grades and progress. If difficulties are encountered, the student is referred to meet with a counselor.

Athletics and Kinesiology has previously engaged in program review and student learning assessment for the athletics program, but data was not collected or analyzed to inform program improvement, and the last cycle of focused and comprehensive program review was

in 2012-13. The College offers clubs for all students and activities geared towards students living on campus. The College has an active Associated Student Board with representation on campus committees. While student learning outcomes have been identified, there is a lack of follow through on assessments to ensure quality in co-curricular offerings. Two student learning outcomes were identified for Student Activities in the 2012-2013 focused program review, but no data was collected or analysis done on the results to inform programmatic improvement. Additionally, the College utilizes national survey data to assess levels of student engagement and learning on an institutional level, but there is lack of recent data. (II.C.4

Staff and counselors are available in a centralized Counseling office at the Weed and Yreka campuses. Students at the Weed and Yreka campuses have the opportunity to take part in a comprehensive matriculation process and introduction to key support services through the SOAR (Siskiyous Orientation Advising Registration) process which combines several departments into one student experience transitioning into the institution. The program is also offered at feeder high schools with a focus on orientation and advising.

Staff and Counselors utilize DegreeWorks to develop educational plans with students and ensure that disseminated information to students is consistent. Students can submit a petition to graduate online, and Counselors serve as the point of contact for advising students who are graduating as well as evaluating transcripts and processing graduation petitions. General Counselors serve the overall student population as well as transfer students. Transfer information is available to students in the Counseling office as well as on the College website. Several online professional development trainings are available through Counseling and support services for both students helping other students and Counseling faculty and staff helping students including: at-risk students, veterans on campus, and LGBTQ on campus. (II.C.5)

Board Policy 5010 states that admission is open to any student 18 years of age or older, and Administrative Procedure 5011 outlines instruction for admission of K-12 students. (II.C.6, ER16) The College uses the California Community Colleges Chancellor's Office approved assessment instrument (COMPASS), and is planning to adopt the new common assessment instrument when it is selected. Other multiple measures are used to assist students in their selection of courses. (II.C.7)

Administrative Procedure 5040 outlines how the College secures student records in both paper and electronic form through locked cabinets and industry standard firewalls and security system. FERPA regulations are adhered to by asking students to verify their identity and/or appropriate security code. Administrative Procedure 3310 identifies when and how records can be destroyed under Title 5 and federal procedures. (II.C.8)

Conclusion

The College meets the Standard.

Recommendations

Recommendation 14

In order to improve institutional effectiveness, the team recommends that the College follows through on assessments of co-curricular offerings, collect the data and perform the analysis to better inform programmatic improvement. (II.C.4)

Commendations

The team commends the College for its newly developed Distance Education Committee and its vision of using emerging standards and best practices to better prepare faculty, improve the Distance Education Program at the College, and better serve students.

The team commends the College on SOAR, a comprehensive matriculation process and introduction to key support services for students which combines several departments into a streamlined student experience.

Standard III: Resources

Standard III. A. Human Resources

General Observations

The College has established board policies, administrative procedures, and collective bargaining agreements which ensure that it employs qualified personnel regardless of their job responsibilities or classification to support student learning programs and services. These policies, procedures, and agreements have been developed through participatory governance processes. The College offers a wide range of opportunities for professional growth and development consistent with the College's mission and in response to the identified needs of its employees.

The team reviewed all documents provided in the evidence portion for Standard III.A and requested additional documents which were provided. Additionally, the team conducted interviews with faculty, administration, and staff.

Findings and Evidence

The College has clear qualifications established and these are communicated in position announcements in the hiring and selection of all employees. Multiple policies, procedures, and practices are in place to select qualified personnel that can facilitate successful student learning. During the site visit, an additional issue arose regarding equivalencies. A team member was provided a list of faculty positions in which the equivalencies for the minimum qualifications were in question. In meeting with staff from Human Resources, the team

reviewed evidence that many of the individuals on the list did meet the minimum qualifications. And, those that did not had been employed at the college for many years (prior to subsequent evolutions of the minimum qualifications document). In interviews with faculty and staff, it was noted that the college is sometimes challenged with respect to attracting candidates because of the lack of available jobs, particularly if candidates have partners also needing employment in the area (III.A.1).

Faculty qualifications are required to conform to the minimum qualifications established through the statewide Academic Senate and the Chancellor's Office. Administrator and classified candidates must also meet specific minimum qualifications which are communicated through detailed job announcements. The College does not have an administrative procedure or board policy which articulates the procedures for the selection of personnel; however, there is a Hiring Procedures Document that was provided by the College. Information gleaned from faculty and classified staff who were interviewed explained that the hiring committees are supposed to participate in the development of the job announcements. The Hiring Procedures document does not address the development of the job announcement. The College provided two documents, Recruitment Procedures and Faculty Hiring Process which do include language that input from the committee on the development of the job announcement/recruiting brochure. Through the hiring process, copies of official transcripts are submitted and reviewed to ensure they are from accredited institutions. The College has one identified faculty service area for all faculty. Requests for equivalencies are addressed by an Equivalency Committee comprised of five faculty members and one administrator (III.A.2, III.A.3, III.A.4).

The College has established evaluation practices for all employee groups as specified in the collective bargaining agreements. Part-time faculty are only evaluated if they teach twenty-five hours or more in a semester; however, the College has the discretion to evaluate those part-time faculty teaching less than twenty-five hours. When asked why faculty teaching fewer than twenty-five hours were not regularly evaluated, College personnel explained that many of those faculty teach in CTE areas or academies and are often only at the college for a few hours in a given term. One example provided was a specific module on swift water rescue which is taught on one day in the term. According to evidence provided by the College, approximately four percent of part-time faculty are in this non-evaluated category.

In the institutional self-evaluation, the College acknowledged that evaluations were not completed in a timely manner. An analysis of the classified evaluations revealed that 40% had not been completed on an annual basis, with some of those employees having no evaluation since 2003 or 2006. With respect to part-time faculty, forty evaluations were in progress at the time of the visit, and seven part-time faculty had not been evaluated since fall 2012, thus making them out of compliance with the collective bargaining unit. Information on the timeliness of full-time faculty evaluations was requested

The faculty collective bargaining agreement (CBA) is silent on the issue of student learning outcomes and how faculty use assessment results to improve student learning. In Appendix H of the CBA, the evaluation form used for tenure review requires that faculty speak to two cycles of assessment in their self-evaluation. Tenure-track faculty are also required to

participate in program review which includes the reporting of student learning outcomes assessment results. Faculty self-evaluation reports were provided to the team that demonstrate compliance with the inclusion of SLO assessment discussions in the self-evaluations for tenure-track faculty members. This requirement does not, however, apply to tenured faculty. Tenured faculty have no requirement to address their involvement in SLOs as part of their evaluation process. Likewise, part-time faculty do not have as a component of their evaluation any assessment of their involvement in student learning outcomes processes, nor do administrators. The college recently bargained language for classified employees concerning this Standard. The new evaluation form includes a new section on evaluation for employees who are directly responsible for student progress toward achieving stated learning outcomes. Supervisors are asked to rate the employee's performance by addressing the following statement: Effectively assists faculty and others directly responsible for student learning progress in producing stated student learning outcomes. The new form will go into effect in spring 2016 (III.A.6).

The College has a sufficient number of faculty (combined full-time and part-time) to assure fulfillment of faculty responsibilities consistent with its mission. The College's fall 2015 Faculty Obligation Number (FON) was 32.40, and the college currently has thirty-four full-time faculty. When asked, faculty stated they believed the number of full-time and part-time faculty members was sufficient to accomplish the College's mission. Through the program review process, needs for faculty positions are identified. Instructional Council creates a list of the positions which is sent to the President's Cabinet and College Council. The Superintendent/President makes the final determination on the number of positions which are hired (III.A.7, ER 14).

Part-time faculty are provided orientation meetings at the beginning of each semester, most are evaluated regularly, and many professional development opportunities are made available to them. In addition, part-time faculty are encouraged to attend Academic Senate and faculty association meetings and Planning Days (III.A.8).

Like the faculty, the program review process is where additional staff needs are identified. A list is compiled and considered during the budget development process. The College does not have a process for prioritizing the positions and is working to create additional avenues of dialogue. (III.A.9)

The College has a sufficient number of administrators with the appropriate preparation and expertise to manage the college at the current time; however, administrative turnover has been an issue at the College. (III.A.10, ER 8)

The College has established, published policies and procedures that are fair and consistently administered. Policies specific to the Human Resources component are in chapter seven of the policy manual, and others related to non-discrimination and prohibition of harassment are in chapter three. All policies and procedures are posted on the College's website (III.A.11).

As noted in the Institutional Self-Evaluation Report, the population of Siskiyou County is 86% Caucasian. No statistics about the ethnic or gender classifications of the College's

employees were provided. The college did not provide evidence of assessment of its record in employment equity and diversity. During the visit, 2014-2015 annual data from the Chancellor's Office for the college revealed that the college reported the following diversity: African American—3% full-time faculty; 15% classified; Asian—3% full-time faculty, 1% part-time faculty; Hispanic—9% full-time faculty; 4% part-time faculty; 14% classified; and 10% administration; and Native American—30% administration.

In conversations with College employees from several different ethnic groups, there was a lack of evidence that the college creates and maintains appropriate programs, practices, and services that support its diverse personnel. The most frequent example of institutional dialogue concerning diversity and equity was EEO training conducted during the spring 2016 flex program. Additionally, the Vice President of Instruction presented a PowerPoint during fall 2015 flex in which he shared the demographic makeup and other characteristics of the College's students. That PowerPoint showed that the following ethnic breakdown: 3.7% African American, 4.8% Asian/Pacific Islander/Filipino, 28.8% Hispanic, 46.9% Caucasian, and 15.8% other/unknown. No other conversations about equity or diversity in support of the College's employees were identified.

Evidence from conversations with employees had consistent themes. The first theme was that the College did not necessarily understand the needs of first-generation students, students of color, or those with issues related to poverty (e.g., transportation, child care, etc.). The second theme is that the employees sensed a lack of support or consistent treatment. Issues related to supervising employees and the use of inappropriate comments were consistently made. Finally, the employees discussed the existence of a network operating underneath the mainstream culture of the College in which students of color sought out employees of color when they had difficulties receiving service or other issues in the College.

There was an acknowledgement that approximately 10 years ago, the College had a vibrant diversity council which engaged the College in conversations about diversity and had the support of the administration. The employees expressed hope that these types of structures could be reinstituted and that cultural opportunities and recognition could be extended to the students through intentional programming (III.A.12).

The College has board policies on non-discrimination, equal employment opportunity, and commitment to diversity. Hiring committees are trained with the use of an EEO checklist and sample questions (III.A.12).

The College has codified an institutional code of ethics in board policy (BP 3050). Through discussions in College Council, constituent groups were given the latitude to develop their own codes of ethics provided they did not conflict with BP 3050. Faculty was the only group to do so, and developed a Professional Ethics Statement which is codified in the Faculty Handbook (p.27). (III.A.13).

The College appears to have a robust system of professional development for its employees, especially given its small size. The College provides flex and staff development opportunities at the beginning of each semester sponsored by the Flex/Faculty Committee,

Staff Development Committee, and the Classified Professional Development Committee. These committees each have separate budgets to support the professional learning needs of College employees.

Faculty are required to participate in three on-campus flex days and provide another two days of self-planned development activity. The College provided evidence from the Office of the Vice President of Instruction that attendance at flex days and other activities meeting the flex requirement are verified and documented.

A classified staff development committee represents both classified and confidential employees and sponsors an annual day to recognize classified employees. They also provided professional growth award points for participation in professional development activities that directly relate to improved job performance. After the accumulation of 60 points, employees are eligible for a \$500 stipend. Through negotiations in spring 2016, the college and CSEA agreed to provide professional growth points for classified members who earn their college degrees. Managers and supervisors participate in workshops and training provided through the North 14 Employment Relations Consortium and the Safe College Program provided by the Northern California Community College School Insurance Authority JPA. The college provided evidence of the usage of the Safe Colleges training. Employees completed training in the topics of back injury and lifting, blood-borne pathogen exposure prevention, campus sexual violence. (III.A.14).

The College maintains personnel records in locked cabinets within the Human Resources Department, which is alarmed. Administrative Procedure 7145 articulates the procedure for accessing personnel files, and logs are maintained in each file to record who reviews the information. Consistent with collective bargaining agreements, the College has clear processes for employees who wish to address negative information contained within their files (III.A.15).

Conclusion

The College partially meets the Standard.

Board policies, administrative regulations, and collective bargaining units detail hiring and evaluation protocols and demonstrate compliance with the standards. The College does not meet standard III.A.6, student learning outcomes in evaluations. Only tenure-track faculty and classified employees have a requirement to address SLOs in their evaluations. The College does not meet III.A.12, creating and maintaining programs, practices, and services that support the needs of diverse employees. Although the College has board policies related to non-discrimination, equal employment opportunity, and commitment to diversity, faculty and staff acknowledged the lack of substantive and collegial dialog about matters of equity and diversity. Many employee groups discussed the lack of support for both employees and students. The College has a robust system of professional development which, given its size, is impressive and for which the College should be commended.

Recommendations

Recommendation 8: In order to meet the Standard, the College must include consideration of how employees are using the results of the assessment of learning outcomes to improve teaching and learning in the evaluations of regular faculty, part-time faculty, and managers who are directly responsible for student learning (III.A.6).

Recommendation 9: In order to meet the Standard, the College must demonstrate that it creates and maintains appropriate programs, practices, and services that support its diverse personnel and regularly assess its record in employment equity and diversity consistent with its mission (III.A.12).

Commendations

The College is to be commended for its robust professional development programming. There are multiple committees that plan activities for College employees, and each is awarded a separate budget to support those activities. The College has been proactive in establishing partnerships with outside entities (North 14 Employment Relations Consortium; Northern California Community College School Insurance Authority JPA) to provide additional training.

Standard III.B. Physical Resources

General Observations

The College maintains safe physical resources at both its Weed and Yreka campuses. The College develops and utilizes its physical resources to achieve its mission of providing academic excellence to its student and evaluates its facilities regularly. Long-range capital plans are in the process of being developed following the updating of the Facilities Master Plan.

Findings and Evidence

Construction at the College has been approved and inspected by the Division of the State Architect and meets or exceeds the Field Act Standards of Title 24 California Code of Regulations. Repairs of facilities are addressed as they arise. Faculty and staff can request service via telephone or SchoolDude, an online system that routes and tracks services requests. (Standard III.B.1)

Custodial and grounds staff routinely inspect facilities for any problems or safety issues. Any staff member can report problems via telephone or SchoolDude. (Standard III.B.3)

COS is in the process of updating its Facilities Master Plan. For this update, the College plans to elicit input from all stakeholders including faculty, staff and administration. The

College is currently forming a Facilities and Grounds Committee to update its master plan. (Standard III.B.2, III.B.4)

Conclusion

The College meets the Standard.

Recommendations

None

Standard III.C. Technology Resources

General Observations

Technology at the institution is managed by the Technology Services Department (IT Department) in collaboration with several committees including the ERP/Banner steering committee, the Web Team and the Technology Council. The Banner steering committee's main task is to address Banner projects, while the Web Team focuses in web related issues. A large part of the technology services at the College is provided by the IT Department. The Technology Council is the main body of the college in charge of coordinating technology planning, but all committees and the IT department collaborate very closely to identify technology needs for institutional operations and instruction. Individual department technology requests are submitted annually as part of the reinvigorated program review process. Through the College program review process, the requests are combined and ranked based on program review data and overall needs of the College. Then, the College Council reviews carefully this prioritized list and makes recommendation to the College president for inclusion to the budgeting process.

In general, the College provides a robust network to its employees and students and continues to improve its network infrastructure to meet increasing network security, bandwidth and throughput requirements. In addition to Banner and the network infrastructure, other resources supported by the IT department include: videoconferencing classrooms, student computer labs, VoIP/email/Helpdesk services, backup hardware and software. Other critical technology services that are maintained and supported with the help of third party vendors and outside consultants are the ERP/Banner/Oracle/DegreeWorks system, CurricUNET, the Learning Management System (Etudes). A full time staff has been assigned to support exclusively the technology demands of the Yreka center, but other staff moves back and forth between campuses depending on workload and special projects.

Despite organizational challenges, the College has been successful in its efforts to provide adequate technology to support the institution. However, in order to continue to provide sufficient technology resources in the future, the college needs to plan for and fund technology infrastructure and equipment to meet the increasing demand for renewing and upgrading technology resources across the college to support student learning.

Findings and Evidence

Technology services, hardware and software are currently adequate to support the College's academic programs, student learning and the operational services. Technological advancements have taken place at the College in both instructional and administrative services areas over the past years, including additional videoconferencing classrooms, increased delivery of student services such as online applications for registration; expanded webpages for students to access information about courses; programs and services; use of curricUNET; Banner Etudes integration and Help Desk integration to serve distance education students. The College has used a variety of funding sources to upgrade the network, communication (VoIP) and backup systems across the College. Computer replacement takes place approximately every four years; however, this goal has been difficult to achieve due to insufficient budget allocations. Recent budget constraints have hampered the Colleges' ability to replace old inventory or purchase new technology equipment that have been identified by the IT department and the Technology Council. Furthermore, the turnover of 100% of the IT department that took place in the academic years 2012-2014 has delayed upgrades and implementation of some projects. (III.C.1)

The College has plans and processes in place to update and replace technology to ensure that its technological infrastructure and software is adequate to support program and services and its mission. Current staff at the IT department has been able to put together a priority list for computer replacement and for hardware and software upgrades. The College recognizes the need to develop and implement a lifecycle replacement plan with supporting procedures to facilitate the replacement of outdated computers and technology equipment. The Technology Council identifies technology needs and works in conjunction with the Banner users group and the Instructional Council to implement technology requirements for the College and to identify technology needs for institutional operations and instruction. Yet, more systematic assessment, planning and innovation will be necessary to meet increasing technology demands and to make decisions about technology investments. A new technology plan was recently completed in draft form and is pending consideration through the College governance processes. The College will need to ensure that the final version of the technology plan is fully integrated into its institutional master plan and other College plans. (III.C.2)

The College HelpDesk staff receives requests for assistance via phone or email, and upon request; faculty, staff and administrators may also receive individual support in the form of desk-side training. Students may receive technology assistance remotely (via HelpDesk), in person in the Academic Resource Center or in various instructional labs across the campus. Technology resources are implemented and maintained at all locations where the College offers courses, programs, and services. The team observed that the main campus and Yreka Campus have classrooms and labs with proper computer and media equipment and a recently upgraded simulation laboratory that supports the nursing program. Adequate support is provided to the Yreka Campus by the IT department. The College has made a substantial effort to increase services and support to distance education students by increasing services such as orientation sessions, expanded email access and reallocation of library collections.

The College has also implemented Banner Etudes integration and Help Desk integration to serve distance education students. In addition, the College has improved security and authentication for all technological resources thanks to appropriate firewall configuration and networks audits which have led to improvements in the network. It was confirmed that authentication is required for access to computer resources. Data is backed up and stored and archived for long-term. Backups of critical systems such as Banner are adequate and take place regularly. (Standard IIIC.3)

Knowing that training is necessary for the effective application of its technology, the College has been diligent in ensuring on-time training for students and personnel. A significant amount of the end user training is usually provided one-on-one by IT and by the Help Desk staff. More formal training for faculty and staff is available during flex days, faculty orientation and planning days. The Academic Success Center also offers weekly seminars to students on technology topics such as using the Etudes application (LMS) and library research. Faculty and staff surveys conducted in 2012 seem to show a general satisfaction with the available technological resources and support. Nevertheless, efforts should be made to create more professional opportunities for all staff (including IT staff), and place much more emphasis on showcasing technology that can lead to a more effective educational environment. Dialog among College personnel seems to suggest that the creation of a Technology Learning Center could increase the capacity of the institution in the area of technology training and increase access to new technologies that could improve instruction. In addition, the College needs to begin a more systematic identification and evaluation of technology training for all staff to help its short and long term planning. (III.C.4)

The College is currently documenting and implementing procedures of acceptable computer and network use. Work in this area is progressing despite budgetary constraints to purchase required hardware and software to implement this new demand in the network environment (III.C.5)

Conclusion

The College meets this Standard.

The College has realized a number of accomplishments in improving its technology throughout the College. Although there is a detailed inventory for software upgrades and replacement of outdated equipment on a four-year cycle, funding has prevented from carrying out this plan. The Technology Council committee is effective in setting priorities and establishing guidelines related to instructional technology. The council also serves as a forum where constituencies discuss, share ideas and strategies about technologies that can enhance institutional operations, instruction and student services. However, the team could not find evidence that technology planning and decisions are based on assessments of the impact of such systems on student learning; the College needs to develop ways to assess the appropriateness and the effective use of technology. Furthermore, technology planning needs to be more fully integrated into the institutional master plan and other College plans.

Commendations

The team commends the College of the Siskiyous Information Technology (IT) staff for diligently maintaining and upgrading the College's infrastructure, to serve the educational technology needs of students and the technology needs of staff.

Recommendations

None

Standard III.D. Financial Resources

Planning

General Observations

The College has an educational master plan driven by the mission and three institutional board goals that it reviews every six years. There are yearly implementation plans that are created by point people. The College uses planning days every April to review progress on the implementation plans and engage in discussions of program review. Only two program reviews were provided as evidence for 2014-2015. Ten were completed in 2013-2014, and there is no clear connection to student learning outcomes. 2012-2013 program reviews include a question about whether SLO information is available.

The recently developed *Planning By Design* document attempts to create an integrated planning model. An August 25, 2014 memo from Planning Committee to the Budget Committee contains the following: "... it is the opinion of the Planning Committee that the current budget is not clearly linked to the EMP," and includes a recommendation for "improved linkage to the EMP should be integrated into the Budget Development Process." Similarly, an April 29, 2013 memo from the Planning Committee to the Budget Committee noted the following, "The committee recognizes that a roll-over budget does not automatically fund strategic efforts. If the outcomes of the EMP are to be successful, Budget Managers and EMP point people will need to identify how existing resources can be repurposed to support items from the Educational Master Plan." It appears the Planning Committee evaluates EMP progress, but the budget development process follows a different path.

The College moved to the Banner information system several years ago and is taking advantage of the desktop and reporting tools available through the Navigator application to ensure that financial information is disseminated in a timely manner. Policies and procedures in place at the institutional level and the incorporation of the California Community College Budget and Accounting Manual serves to ensure internal controls are available. The College works closely with its external auditors in addressing and responding to any internal control deficiencies that arise.

The College has policies, procedures, and internal and external reviews in place to effectively manage the institution's finances, grants, investments, and assets. Through the annual external audit process, the College has received unmodified opinions with respect to its latest end-of-year (June 30, 2015) audit of financial statements and the compliance-related audits as it relates to specific federal and state awards and programs, to include financial aid and the OMB A-133 compliance audit.

The College consolidates, monitors, and distributes a summary of requests for additional funding that originate in the program review process and that is vetted through the various components of the budget development process to ensure that resource allocations are aligned with goals of the department, program, and/or institution.

The Board of Trustees and the College administration have taken steps to ensure financial stability of the institution. The Board of Trustees has established a seven percent minimum fund balance goal, in excess of the five percent minimum fund balance that is recommended by state law. The College is expected to exceed the seven percent fund balance goal in 2015-2016 as the College is anticipating a twelve percent ending fund balance. In addition, the Board designates one percent of its available fund balance for contingencies or for emergency purposes

Due to the improved fiscal health of the state and a series of resource allocation decisions made by the College, addressing the short- and long-term liabilities of the institution has improved significantly over the past couple of years. The decision to move to a traditional premium-based health insurance plan has significantly reduced the Other Post-Employment Benefits (OPEB) liability enabling the College to meet its Annual Required Contribution (ARC) for both 2014-2015 and 2015-2016 and include in its budget plan an additional payment of \$100,000 in 2015-2016. Other liability controls are in place for employee's vacation leave (limits of accumulated vacation leave hours), and the budget has incorporated pending increases to the pension systems for CALSTRS and CALPERS employees. The College has limited debt instruments, being used only for lease payments of equipment in the Science building and for a student dormitory facility. Both of these financial obligations will end in 2017-2018.

In response to historically high student loan default rates, the institution implemented various default prevention programs in order to reduce risk and lower default rates. The 2013 draft cohort default rate has been reduced to 23.1%. The College remains in federal compliance with Title IV standards.

Control mechanisms are in place through a series of policies and procedures at the College to ensure that new, or renewal of existing, contractual agreements with external entities receive appropriate review and approval. Various levels of review and approval authority are required depending upon the type and cost of the contract. The College utilizes legal counsel when necessary and personal service agreements receive additional review.

The evaluation team reviewed all documents provided in the evidence portion for Standard III.D and requested additional documents that were provided and reviewed. Several

interviews were conducted with members of the institution's administration, faculty, and staff.

Findings and Evidence

Budget development is part of the institutional planning process and involves several participatory governance committees. After reviewing documents and meeting with College faculty and staff, the team found that the Planning by Design —An Integrated Planning Model document incorporates several of the institutions plans and processes, including the Educational Master Plan, Program Review, and the Budget Process into a comprehensive framework to address the institutional goals that are expressed in the college's mission. However, the Planning by Design model requires updates to reflect the current planning process, especially with regards to the Budget Development and Revision Process. The process outlined in the Planning by Design model is not consistent with the College's current process. The College identifies the resources needed to support and sustain student learning through program review. Those requests are prioritized in Instructional Council and reviewed by both President's Cabinet and College Council and are considered during the budget development process (III.D.1).

The College's mission and goals are the foundation for financial planning. The annual fiscal planning process is used to allocate resources toward plans identified in the Institutional Master Plan and program review, which are linked to the institutional mission. The College has policies and procedures to ensure sound financial practices and financial stability. The College has appropriate fiscal board policies (BP 6200, 6250, and 6300), annual planning priorities, and a minimum seven percent reserve—with a goal to achieve a ten percent reserve. The College receives a majority of its funds from state apportionment, property taxes, and student fees.

The College disseminates appropriate financial information throughout the College in a timely manner. The Vice President of Administrative Services provides appropriate financial information to the Budget Committee, including budget assumptions and a budget development calendar. The budget assumptions are a combination of information from the Board of Trustees, the state, and College revenue projections and expenditure increases (III.D.2).

The College sufficiently defines and follows its guidelines and processes for financial planning and budget development. The College has established Board Policy 6200 as the policy for financial planning and budget development. Administrative Procedure 6200 further clarifies and defines the College's guidelines and process for financial planning and budget development. Other guidelines and process for financial planning and budget development are defined in the Institutional Master Plan and followed and recorded in the program review processes. All constituencies have appropriate opportunities to participate in the development of institutional plans and budgets as evidenced through the program review, planning, and budgeting processes. The resulting resource allocation decisions are reflected

on the Summary of Budget Requests document. This document provides the linkage between program review resource requests and actual resource allocation decisions. The Summary of Budget Requests document should be regularly updated and shared with the campus community as resource allocation decisions are made. (III.D.3).

Evidence gained through committee minutes, various budget and planning documents, and through interviews suggest that there is active involvement in the institutional planning processes and that the Budget Committee and the Planning Committee play an active, participatory role in the institution's budget and finances. Committees are structured via a charge or purpose statement, membership is garnered from various campus constituencies, and committee minutes are recorded and archived. Financial resources are linked to the institution's planning process via the Planning by Design. Recently, the institution has streamlined the budget development process to address efficiencies. (III.D.4)

Guided by Board of Trustee policies, Administrative Procedures, and the California Community College Budget and Accounting Manual, internal control mechanisms are in place to ensure financial integrity, responsible use of resources, and to ensure that these resources are being used consistent with the purpose of the funding source. External audits provide independent verification of internal and external control policies and practices on an annual basis. The institution has implemented improvements to purchasing and payment voucher processing through internal evaluation methods and campus feedback. Additional improvements in internal controls and efficiencies will be gained through the implementation of electronic approval processes. (III.D.5, III.D.8, III.D.14)

Annual external audits verify that financial statements comply with federal and state requirements and that the resources of the institution are represented fairly. The external audit report returned an unmodified opinion on the College's financial statements for the year ended June 30, 2015, attesting to the financial health of the institution. The institution's response to the "Immaterial Instance of Noncompliance" during the latest external audit (June 30, 2015) was consistent with standard requirements. External audits are also used to identify process deficiencies, and the institution uses this feedback to implement procedural changes. Budget documents and the planned use of financial resources to support student learning programs and services is reflected on the Summary of Budget Requests document. This document provides the resource allocation linkage to requests for funding generated through the program review process. (III.D.5, III.D.6, III.D.7)

To ensure sufficient cash flow and reserves to maintain financial stability, the Board of Trustees adopted new policy changes with respect to minimum fund balance levels and to provide for financial contingencies. Board Policy Number 6250 was updated in October 2014 that sets an institutional goal of maintaining a minimum seven percent fund balance. The College's improved fiscal condition is noted as the institution ended 2014-2015 with a fund balance in excess of the minimum fund balance levels established by the Board of Trustees and is anticipating to do the same in 2015-2016. The institution demonstrates comprehensive oversight of its financial resources and assets through a variety a means, including; Banner financial reports disseminated to departments, monthly review of District

Financial Report by the Board of Trustees (Monthly Summary of Revenue and Expenditures, Statement of Cash Flow and Status of Reserves), annual external audits, Board of Trustee policies, Administrative Procedures, and budget planning documents. The College was required to provide ACCJC a Special Financial Report in April 2014 outlining its three-year cash flow projection to maintain financial stability and to address the issue of OPEB funding in a special section of the 2016 Institutional Self Evaluation Report (ISER) demonstrating the college had developed and implement a long-range plan to address OPEB funding. Based on the results of the report of April 2014 and the special section in the ISER, the team believes that the College has met this recommendation and fulfilled the ACCJC requirement. (III.D.9, III.D.10).

Considerable progress has been made by the institution in addressing the short- and long-term liabilities from a budget planning perspective. Debt instruments for the Science building equipment and the dormitory are nearing their terms and are validated by the annual external audit reports. The use of short-term financing for cash flow purposes through the Tax Revenue Anticipation Notes (TRAN) program is regularly evaluated and managed as part of the planning, budgeting, and cash flow projection processes. (III.D.9, III.D.11, III.D.13)

The annual budget planning process has also incorporated the institution's Annual Required Contribution (ARC) payment related to Other Post-Employment Benefits (OPEB). The institution was required by ACCJC "to develop a long-range budget plan to resolve OPEB financing" and include this plan in its Self-Evaluation Report. The College included the OPEB Funding Plan as Appendix B to the Self-Evaluation Report and outlines its on-going process of addressing this outstanding liability. (III.D.9, III.D.11, III.D.12)

Included as part of the College's April 2014 response to ACCJC on student loan default rates and actions the institution has taken to mitigate future issues, the College has implemented several initiatives, to include a default prevention consulting and counseling agreement, in order to address this student loan debt. The recently released 2013 draft cohort default rate has been reduced to 23.1%, its lowest rate since 2009. (III.D.15)

Various Board of Trustee policies, Administrative Procedures, and internal control mechanisms and protocols are in place to ensure that appropriate College officials provide review, approval, and oversight of contractual agreements. (III.D.16)

Conclusion

The College meets the Standard

Recommendations

Recommendation 10: In order to increase institutional effectiveness, the College should create a comprehensive enrollment management plan to address long term fiscal stability in conjunction with its current Instructional Service Agreements (ISAs). (III.D.1 III.D.10)

Recommendation 11: In order to improve institutional effectiveness and provide for increased budget transparency, the team recommends that the College administration ensure that the Planning by Design: An Integrated Planning Model document be updated to reflect the current Budget Development and Revision Process and that this new process be widely disseminated throughout the campus governance and committee structures. (III.D.2, III.D.3)

Recommendation 12: In order to improve institutional effectiveness and provide for increased budget transparency, the team recommends that the College administration publicize and disseminate the Summary of Budget Requests document and that this information be shared on a regular basis with the campus community as resource allocation decisions are made and be included as a component of the budget development and revision process. (III.D.6)

Standard IV: Leadership and Governance

Standard IV.A. Decision-Making Roles and Processes

General Observations

Since the hiring of the current Superintendent/President the College reestablished the committee and council structures that were in place prior to October 2008. The committee and council structure was reestablished to provide a mechanism for broad participation of among constituents and stakeholders at the College. The College supports four participatory governance councils, which include the Student Services Council, Technology Council, Instruction Council, and the College Council. In addition, the College supports the two participatory committees, the Budget Oversight Committee and Planning Committee. The participatory governance councils and the participatory committees meet regularly and are focused on the College operations, student learning, student equity, and academic quality. The participatory governance councils and participatory committees were reestablished to allow all the college constituents to become involved in dialogue and have the opportunity to represent on College matters. The planning and decision-making structure is clear; however, the decision-making process needs to be clearly communicated to the College constituents.

The College constituents are engaged in dialogue, which reflects a culture that encourages input from all parties. This culture is supported and encouraged by the Superintendent/President and the College Leadership. Through the College participatory governance councils and the participatory committees structure the college activities are

reviewed, discussed, and acted upon through participatory governance. These mechanisms appear to work; however, the campus decisions should be shared throughout the College community.

Findings and Evidence

The College has board policies and administrative procedures that outline the roles that each constituent group plays in the participatory governance process. In 2014, the Superintendent/President put into place the participatory governance structures that existed prior to October 2008. This structure includes the resurgence of the Instructional Council, Student Services Council, and Technology Council. These three councils meet on a monthly basis and are chaired by management representatives. In addition, the College has the Budget Oversight Committee, Planning Committee, and the College Council. The College Council is comprised of the Superintendent/President; the Vice Presidents of Instruction, Student Services, and Administrative Services; and includes various constituent groups at the College and the Yreka Campus who provide input on policies and administrative regulations and are addressing institutional topic/issues. For the previous year, the minutes and agendas from these committees are posted online. The College has implemented and completed a self-evaluation for the councils and committees (IV.A.1).

The participatory governance structure that has been implemented at the College was designed to allow all campus constituent to have a voice in the decision-making process. From board polices to administrative procedures to committees and to the councils, the College provides evidence that the college community is able to participate in dialogue and the constituents groups are involved in decision-making. For example Administrative Procedure 2510, Participation in Local Decision-Making, outlines the roles of the various constituent groups in decision-making at the College. The participatory governance structure at the college is inclusive of all stakeholders and campus constituents. The College is transparent through agendas and minutes; and has developed a process of regular evaluation and improve its governance structure. For the 2014-2015 year the College completed the complete evaluations of the four participatory governance committee and the two participatory governance committee (Standard IV.A.2).

The College has a clearly defined board policy 2510, Participation in Local Decision making. This policy includes participation from all constituent groups including students, classified staff, and faculty. The committees and councils provide a vehicle for receiving input on decision, policies, and procedure development. Agendas, meeting minutes' documentation of various committee and council activities provide evidence on the wide and broad-based discussions. However, the college is hopeful that with consistent leadership in key positions, the participatory governance structure can be fully implemented (Standard IV.A.3).

The College academic administrators and faculty collaborate and make decisions on curriculum matters, degree and certificate requirements, grading policies, educational program development, and process for program review, standards or policies regarding student preparation and success, and other academic and professional matters. The collaboration between the academic administrators and the faculty is primarily through the Academic Senate. Evidence of the collaboration is presented in the agenda and minutes from the Academic Senate and the Curriculum committee, which is a committee of the Academic Senate. In addition, the College provides evidence that academic administrators and faculty through policies and administrative procedures take responsibility for decisions made regarding student learning programs and services (Standard IV.A.4).

The minutes from the various College participatory governance councils and the participatory committees demonstrate a broad participation relating to the College mission statement, institutional goals, student learning programs and services, student support services, institutional planning and evaluation, and budgeting and resource allocations. (Standard IV.A.5)

The College creates opportunity for relevant perspectives through the participatory governance councils and the participatory committees and the administrative decision-making processes at the College. During the 2014-2015 year, the President's Advisory Committee, which is not a participatory governance body, provides a direct line of communication for disseminating information and gathering feedback from the campus constituents. The meeting minutes for the participatory governance councils and the participatory committees are posted online. In addition, the college holds campus-wide meetings, such as the Planning Day, Orientation Day, and Accreditation); the bi-weekly President's Advisory Council meetings; the President and the Vice Presidents make themselves available to the campus constituents; and through the monthly campus connection information is shared with the campus constituents. However, information and campus decisions are not clearly communicated to the College constituents (Standard IV.A.6).

Since 2014, the College has reestablish the committee and council structures, and the effectiveness of these processes have been evaluated. The Superintendent/President directed the College to complete evaluations of the four participatory governance committee and the two participatory governance committee for the 2014-2015 year. The results from the evaluations include the committee goals and the linkages to the institutional goals, major accomplishments or achievements from the previous year, major obstacles or problems with the committee, and recommendations for improving the process or efficiency. However, the results from the evaluations were not clearly communicated to the College constituents (Standard IV.A.7).

Conclusion

The College meets the Standard.

Recommendations

Recommendation 13: In order to improve institutional effectiveness, the team recommends that the college continue the evaluation process of the governance and decision-making processes but more widely communicate those results to the campus community. (IV.A.7)

Standard IV.B. Chief Executive Officer

General Observations

The Superintendent/President provides effective leadership in planning, organizing, budgeting, selecting and developing personnel, and assessing institutional effectiveness. The College's Board of Trustees has enacted appropriate policies and procedures that empower the Superintendent/President to provide leadership for the College.

The College has weathered difficult times under past administrations but under the leadership of the current Superintendent/President it appears to be stabilizing. The College has reorganized and the Superintendent/President has delegated authority to his staff consistent with their responsibilities. In addition, the Superintendent/ President has reinstated participatory governance committees in order to restore collegial processes and set College goals and priorities.

The Superintendent/President provided leadership during the College's self-evaluation process and worked with faculty and staff to ensure that a comprehensive Self-Evaluation Report was provided.

Findings and Evidence

The Superintendent/President has provided effective leadership in planning, organizing, budgeting and selecting and developing personnel to guide the College. The Superintendent/President recently reorganized the College's management structure to appropriately reflect the size and complexity of the College. (IV.B.1, IV.B.2)

The Superintendent/President makes an active effort to communicate the College's goals and values to the campus community, community organizations, state organizations, and media outlets. While there appears to be good communication between administrators and the president, communication effectiveness appears uneven in other venues. Faculty and students have reported that communication within the institution is not sufficiently effective. There is a generally perceived need to set institutional goals that reflect faculty and student input and ensure that these views are integrated with resource planning and allocations that support student learning and achievement (IV.B.3).

The Superintendent/President has used the College's the "Planning Day" to address staff training on the Accreditation Standards, Eligibility Requirements, and the Commission Polices (IV.B.4)

A review of the College's Board Polices and Administrative Procedures demonstrates that the Superintendent/President has ensured the College has institutional practices and policies that control the college budget and expenditures (IV.B.5)

The Superintendent/President has appeared before local community groups, including the Weed Rotary, Yreka Rotary, Mt. Shasta Rotary, City Councils, and the Chamber of Commerce in order to communicate the with the community the College services. Additionally the Superintendent/President serves on local community boards and councils. (IVB6).

Conclusion

The College meets Standard.

Recommendations

None

Standard IV.C. Governing Board

General Observations

The College has a seven-person governing board with authority over and responsibility for policies to assure the academic quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution. Given the area's ongoing struggle to recover from the recent economic downturn and the College's administrative turnovers, the governing board appears to be shepherding the College through a time of recovery. Board members, as a whole, have stated their satisfaction and high regard for what is essentially a new leadership team. Board policies are current and clear in their designations of duties and responsibilities. (IV.C.1).

The College's Board members have served for multiple terms and come from a range of backgrounds, three from public education, two from the private sector, one from ranching, and one from the Forest Service. Even with their varied experiences, a reading of Board minutes reveals a united board that frequently votes unanimously on key issues (IV.C.2).

The Board has in place a Board Policy and Administrative Procedure for evaluating the Superintendent/President. The Administrative Procedures calls for constituent group feedback that is reviewed and discussed by the Board. (IV.C.3)

The College's Board of Trustees in an independent policy-making body that has reflected the public interest. (IV.C.4, ER 7)

The College's Board of Trustees has Board Polices and Administrative Procedures in place, and publicly available that specifies the board's size, duties, responsibilities, structure, and operating procedures. A careful review of published policies on the College's website and provided to the accreditation team indicate that all relevant polices and publications appear to

be in place. The Board meets monthly, and its policies and bylaws are current. Its actions are consistent with its policies and bylaws, all of which are current (IV.C.6, IV.C.7).

The Board of Trustees regularly reviews key indicators of student learning and achievement and institutional plans for improving academic quality. As the college strives to recover from economic hardships and a recent reorganization, it has worked to reestablish student success measures, and the board is being kept appraised of ongoing progress but acknowledges that more work needs to be done in this area (IV.C.8).

The Board is involved in ongoing training through the Community College League of California. The Board has in place Policies and Procedures that govern conflicts of interest. The Board also regularly evaluates its practices and performance, and makes the results public. (IV.C.10)

Findings and Evidence

A review of Board Policies and Administrative Procedures on the College's website indicate that the Board has kept them relevant and up-to-date to effectively guide the institution (IV.C.1). Board Policies 2010, 2100, 2110, 2200, define the Board's membership, duties, responsibilities, structure and operating procedures (IV.C.6)

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

The Board is made aware of and reviews the key indicators of student success through annually presentations on the California Community Colleges' Scorecard. (IV.C.8)

The Board has in place a Code of Ethics and Standards of Practice codified in Board Policy 2715. The Board members adhere to the code. The Board members do not have ownership, or other personal financial interests in the institution. (IV.C.11, ER 7)

The Board has delegated full responsibility to the Superintendent/President as the Chief Executive Officer of the institution. This delegation is codified in Board Policy 2430 which also gives the CEO the authority to reasonably interpret Board Policy. (IV.C.12)

The Board was kept informed of the Accreditation process, including Eligibility Requirements, progress on the Self Evaluation report, adherence to Commission Policies and all other relevant information to the College's Accreditation status (IV.C.13).

Conclusion

The College meets Standard.

Recommendations

None

IV. D1-7 does not apply to the College of the Siskiyous as it is a single college district.

Conclusion

The College meets Standards

Recommendations

None

Quality Focus Essay

The team reviewed the College's Quality Focus Essay (QFE) and agree that the two projects identified are in alignment with the deficiencies identified by the team in the External Evaluation Report College's needs:

<u>Project 1</u>. Centralizing the Collection of Institutional Data to Better Inform College-Wide Decision-Making.

<u>Project 2</u>. Increase the Quality and Consistency of Assessment of Student Learning Outcomes.

Project One

Project One identifies the College's need to have an integrated data management system and data warehouse that will allow Campus constituents to access the data they need to make informed decisions. The College recently hired a Full time Research Analyst to assist with this project. An integral part of the project is training campus constituents on how to access data and the regular dissemination of data campus-wide through the research office.

Additionally the College identified the need to gradually role out data out to units, areas, programs and to annual evaluate how the data is being used and whether it is serving the needs of the users. Given the issues the External Evaluation team identified during the site visit and outlined in their recommendations to the college, this project, if completed would definitely assist the College in addressing the recommendations and benefit the College's decision-making processes.

Project Two

Project two identified in the Quality Focused Essay addresses the College's need to increase the quality and consistency of the assessment of Student Learning Outcomes. During the previsit to the College and during the External Team's full visit to the College, the issue of the assessment and the quality of assessment of Student Learning Outcomes (SLOs) was a

prevalent theme. The College acknowledged to the members of the External Evaluation Team that the assessment of Student Learning Outcomes was a challenge in general as well as the challenges they faced with the software they had identified to collect, store, and analyze SLOs (CurricUNET).

Project Two focuses on the need for professional development and mechanism for collecting, analyzing, and reflecting on SLO data. Project Two also outlines how the College will work with faculty to develop effective assessment practices and as outlined in the External Evaluation Report. Project two also speaks to the need to work with the faculty bargaining unit to address issues of compensation for all faculty but especially part-time faculty. Evaluation of the project is built-in over the 3-year implementation timeline.

Both projects would benefit from a more complete discussion of how the projects will have a positive impact student learning and achievement. Both will also need to add measurable outcomes against which the efficacy of the projects can be assessed.