Evaluation Of Midterm Report And Visit

INSTITUTION: Alan Hancock College

DATE OF VISIT: April 1, 2013

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Desert Community College District

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A two (2) member accreditation team visited Allan Hancock College on April 1, 2013, for the purpose of evaluating how well the institution is achieving its stated purposes and analyzing how well the college has addressed the recommendations noted in the May 11, 2010 Evaluation Report.

In preparation for the team visit, team members reviewed the Allan Hancock College Midterm Report for March 15, 2013. On the day before the formal beginning of the visit, team members spent the evening discussing their views of the written materials provided by the college and individually reviewed evidence provided by the college.

During the visit, the team met with numerous faculty, staff, administrators, students and the interim college Superintendent/President. Team members attended the College Council meeting as observers.

The team appreciates that the midterm report was well organized and written. College staff members were very accommodating to the team members and were available for interviews. The college was well prepared for the team's midterm visit. The following presents the team's findings and conclusions on the recommendations cited in the Commission's Action Letter of June 2010.

Recommendation 1:

Team recommends to increase effectiveness that the College fully implement student learning outcome assessment at all levels, using program review and student learning outcome assessment to evaluate, plan, and make needed improvements to courses, programs and services and linking assessment analysis to planning and resource allocation. (I.B.1; I.A.1.c; II.A.2.e; II.A.2.f; II.B.4; II.C.2)

Commission Concern:

With regard to the Commission's requirement that institutions meet standards and achieve the proficiency level by fall 2012, the College is required to develop comprehensive reports to clearly demonstrate the ongoing and systemic review of student learning outcomes and the use of data on student achievement of expected

learning outcomes to plan and implement improvements to courses, programs and services. Evidence of this should be included in the upcoming Midterm Report. (I.B.1; II.A.2.e; II.A.2.f; II.B.4; II.C.2)

Findings and Evidence

The College has demonstrated significant progress in learning outcomes assessment at all levels. Progress has continued since the comprehensive site visit in 2010. Courses with Defined SLO's now stand at 100%. Courses (that is, course-level learning outcomes) mapped to institutional learning outcomes stand at approximately 94%. Courses mapped to program learning outcomes stand at 90%. Of the courses with defined SLO's (100%), those that have identified learning assessments for those SLO's stand at 93%. Many courses have learning assessment data collected for multiple terms, for more than one SLO per course, and many courses also have course improvement plans identified. Course SLO assessment data collected and logged into eLumen stand at approximately 92%. Student services SLO's and SAO's are at 100% overall.

Data examined by the team are very current. Spring 2013 learning assessment data has been loaded into eLumen. Currently there are 892 active courses, all of them with defined course SLO's, 803 of which are mapped to program SLO's, and 838 of which are mapped to institutional student learning outcomes. 850 have identified assessments; 826 have assessment data collected, and 737 have recorded course improvement plans. The team reviewed the process faculty use to establish learning assessments in eLumen, record assessment data, and then (if appropriate) establish revisions to the SLO's. Program coordinators have been reviewing SLO's and learning assessments and convening discussions of these assessments among program faculty, in order to recommend improvements to curriculum, resource needs requested through program review, or the SLO's themselves. The minor gaps that remain consist of courses that are only offered periodically and are only taught by adjunct faculty.

The Midterm Report documents the many training activities that have occurred since the comprehensive report and visit, and also provides evidence of the multiple process improvements that have occurred in program review processes and institutional planning as a result of the SLO and learning assessment work that has occurred.

Improvement plans have been established for the vast majority of courses (over 80%) as a result of learning assessments that have been conducted.

Conclusion

The College has clearly attained proficiency in the SLOAC cycle. Not only do the faculty and staff measure student learning to determine whether learning is occurring at the level and in the ways expected, but these results are informing institutional planning. They are having greatest impact at the program level, as faculty revise curriculum, SLO's and learning assessments, and as staff adjust service processes in response to assessments of SAO's and as they advocate for needed resource allocations as well.

The College has demonstrated a remarkable record of achievement in student learning outcomes assessment and in the use of assessment results to prompt improvements to courses, programs and services. The challenge will be to continue this level of dedication to the SLOAC cycle, and to address the minor gaps that remain.

The College meets the Standard.

Recommendation 2:

The team recommends that Allan Hancock College implement the newly formulated college planning process in ways that enhance links between college goals, operational and strategic planning, resources allocation, and participation in college governance. (I.B.2; I.B.3; III.D.1.a; IV.A)

Findings and Evidence

The College implemented the college planning process in fall 2010. The processes thoroughly outlined in the Councils and Committees-Pathways to Decisions (CCPD) manual. The CCPD incorporated annual program reviews as part of the process. The Institutional Effectiveness Council (IEC) assessed the process in spring 2012 which resulted in the formation of a taskforce to improve resource allocation. The taskforce recommended several changes to improve the feedback loop on smaller fiscal requests.

Review of IEC minutes, the midterm report and interviews during the midterm visit indicated that the college has implemented the college planning process and through assessment refined the CCPD. The CCPD incorporated a survey assessment in the spring of 2011 and based on the results of the survey the taskforce identified the areas for improvement.

The college planning process and its implementation demonstrate that goals and measurable objectives are central to the planning process. The college has made significant efforts to improve linkage of the resource allocation with these goals and objectives.

The Institutional Effectiveness Council (IEC) is charged with conducting a full assessment of CCPD every two years going forward. The IEC reviewed challenges and suggestions for improvement in fall 2011 and spring 2012 as documented in the Annual Report of Accomplishments/Outcomes 2011-12 (AHC Councils, October 2012).

During the Comprehensive Evaluation Visit (March 8-11, 2010) the team noted that participation and understanding of the college planning processes was somewhat limited. The faculty and staff indicated (survey) that only about (34%) of respondents agreed that they understood the planning process. The midterm report and visit confirmed that the college provided widespread training related to the CCPD process prior to its implementation. However, interviews with Academic Senate leadership and California Schools Employees Association leadership indicated that familiarity with the CCPD

process and its role as a body was not fully understood. These individuals were relatively new to their positions and had been less engaged with CCPD.

Conclusion

The College has clearly and effectively implemented the college planning process that enhances links between college goals, operational and strategic planning, resource allocation, and participation in college governance.

The College has demonstrated its commitment to assess its process and make adjustments based on their findings. The challenge will be to continue training to all employees on the CCPD process and the function of the Institutional Effectiveness Council as it relates to shared governance and other decision making bodies.

The College meets the Standard.

Recommendation 4:

The team recommends that the college comply with existing board policy (BP 2110) for administrative evaluations. The team notes that administrator evaluations play a role in assuring the effectiveness of the college's decision-making, and that currently administrator evaluations are not up to date as they should be according to Board Policy 2110. (III.A.1.b; IV.A.5)

Findings and Evidence

At the time of the team's site visit, all administrator evaluations had been done on schedule, with only one out of twenty-eight that had not been filed (the one was awaiting signature of an administrator who had been out on leave, but the evaluation was complete). Administrator evaluations had clearly been tracked consistently since the 2010 site visit (additional evidence of the 2012-13 status was reviewed during the Midterm Report site visit). Staff have provided feedback on the forms and process for administrator evaluation, and modifications are under consideration.

During the Midterm Report site visit, staff provided examples of the communications concerning administrator evaluations. These samples provided good corroboration of the spreadsheet information on administrator evaluation status.

Staff also provided updates to the team concerning classified staff evaluations, fulltime faculty evaluations, and adjunct faculty evaluations. All are being tracked and follow-ups with responsible administrators occur as needed.

Conclusion

The College had satisfactorily resolved this evaluation by February 2011, based on the evidence reviewed. It was heartening for the team to see the consistent follow-through since then, on keeping administrator evaluations up to date according to Board Policy 2110, up to the current day. It is also heartening to see that the College has given attention to the effectiveness of the process.

The College meets the Standard.

Recommendation 7:

The team recommends that college (1) implement their proposed new decision-making process and (2) improve methods for campus-wide communications concerning decision-making processes, to ensure a healthy campus climate and effective participation in governance as well as strong and effective leadership. (Standard II.C.2; IV.A.1; IV.A.2.a; IV.A.2.b; IV.B.2.c)

Findings and Evidence

(1) Implement their proposed new decision making process

The College implemented the college planning process in Fall 2010. The process is thoroughly outlined in the Councils and Committees-Pathways to Decisions (CCPD) manual. The CCPD incorporated annual program reviews as part of the process. The Institutional Effectiveness Council (IEC) assessed the process in spring 2012 which resulted in the formation of a taskforce to improve resource allocation. The taskforce recommended several changes to improve the feedback loop on smaller fiscal requests.

Review of IEC minutes, the midterm report and interviews during the midterm visit indicated that the college has implemented the college planning process and through assessment refined the CCPD. The CCPD incorporated a survey assessment in the spring of 2011 and based on the results of the survey the taskforce identified the areas for improvement.

The college planning process and its implementation demonstrates that goals and measurable objectives are central to the planning process. The college has made significant efforts to improve linkage of the resource allocation with these goals and objectives.

(2) Improve methods for campus-wide communications concerning decision-making processes, to ensure a healthy campus climate and effective participation in governances, as well as strong and effective leadership.

The college has taken significant steps to improve campus-wide communications related to the decisions that are made and using a transparent inclusive process. The team reviewed the Councils and Committees: Pathways to Decisions (CCPD) process and related councils and committee documents.

The College also provides communications to staff via a staff portal that is used to inform staff about decisions being made, council and committees (actions, agendas, and minutes) and other pertinent updates.

The Superintendent/President publishes a monthly newsletter regarding important decisions and updates. Actions taken by the Board of Trustees are posted and available for staff and the community.

The CCPD assessment revealed a communication gap that the college addressed through modification to the planning calendar to allow for feedback to departments on pending requests. The Institutional Effectiveness Council conducted an assessment that incorporated questions to get feedback on campus-wide communication.

The college portal and the efforts to provide varying communication methods were validated by the campus interviews and evidence. However, the team recognizes that depending on the level of involvement on the CCPD and the amount of training occurring some ongoing confusion may exist. Continued training regarding the role of CCPD and other shared governance and bargaining roles will assist the college community in understanding the appropriate process and venue for decision-making. A broader understanding will ensure that the college agenda is moving forward and not that of any specific group or individual.

Conclusion

The College meets the Standard and has made significant efforts to improve communications.