Follow-Up Report

San Bernardino Valley College
701 S. Mount Vernon Ave.
San Bernardino, CA 92410

A Confidential Report Prepared for the Accrediting Commission
For Community and Junior Colleges

This report represents the findings of the team that visited

San Bernardino Valley College
on
April 22, 2016

Dr. Raúl Rodríguez, Chancellor
Rancho Santiago Community College District, Chair

San Bernardino Valley College
Team Roster

Dr. Raúl Rodríguez (Chair)
Chancellor
Rancho Santiago Community College District
2323 N. Broadway
Santa Ana, CA 92706

Ms. Carol Castle
Academic Officer
MTI College
5221 Madison Avenue
Sacramento, CA 95841

Dr. Jo Anne Cripe
Instructor, Human Development
Butte College
3536 Butte Campus Drive
Oroville, CA 95965

Follow-Up Report

DATE: **April 29, 2016**

TO: **Accrediting Commission for Community & Junior Colleges**

FROM: **Raúl Rodríguez, Ph.D., Team Chair**

RE: **Report of Follow-Up Visit Team to San Bernardino Valley College, April 14, 2016**

Introduction

An External Evaluation Team visited San Bernardino Valley College (SBVC) from September 29 to October 2, 2014 for the purposes of reviewing the Institutional Self Evaluation Report of SBVC and for verifying that there was sufficient evidence to confirm that the college continued to be in compliance with the Eligibility Requirements, Accreditation Standards, Commission Policies, and United States Department of Education (USDE) regulations.

As a result of the Report of the External Evaluation Team, the Commission took action to Issue Warning and to require the college to submit a Follow-Up Report by March 15, 2016. In that Follow-Up Report, SBVC was to provide evidence that it had resolved College Recommendation 1 and District Recommendations 1, 2, and 3 as well as Commission Recommendation 1 (which resulted from a Third Party Comment to the Commission). Specifically, SBVC was found to be out of compliance with the following Eligibility Requirements and Accreditation Standards from College Recommendation 1, District Recommendations 1, 2, and 3, and Commission Recommendation 1: I.B.1, II.A.2.f, II.B.2.a, III.A.1, III.A.1.a, III.A.1.b, III.A.1.c, III.A.3, III.A.3.a, III.A.5, III.A.6, III.D, III.D.1.a, III.D.1.b, III.D.1.b, III.D.1.d, III.D.3, III.D.4, IV.A.2, IV.B.1.e, IV.B.1.j, IV.B.3.b, IV.B.3.c and Eligibility Requirements 5 and 20.

The Recommendations were:

College Recommendation 1: In order to meet the Standards, the team recommends that all program student learning outcomes be assessed on a regular basis as part of a sustainable cycle of continuous quality improvement. (Eligibility Requirement 20, Standards I.B.1., II.A.2.f)

District Recommendation 1: In order to meet the Standards, the team recommends that the Board of Trustees examine its role in the development of policies and ensure that it acts in a manner consistent with its approved policies and bylaws. The team further recommends that the Board of Trustees take steps to ensure that all policies are developed or revised within the framework of the established input and participation process. (Standards III.A.s, III.A.3.a, III.D.3, IV.A.2, IV.B.1.e, IV.B.1.j)

District Recommendation 2: In order to meet the Standards, the team recommends that the Board of Trustees, and the chancellor, in consultation with the leadership of the college campuses, develop a strategy for addressing significant issues to improve the effectiveness of district human resources services that support the colleges in their missions and functions. These issues include:

- Reliable data from the Human Resources Department to support position control and other human resources functions;
- Timelines of employee evaluations;
- Responsiveness and improved timelines for employee hiring;
- Consistent policy interpretation and guidance; and
- Completion of the faculty evaluation instrument to include work on Student Learning Outcomes.
(Standards III.A, III.A.1, III.A.1.b, III.A.1.c, III.A.5, IV.B.3.b)

District Recommendation 3: In order to meet the Standards, the team recommends that the District follow their Resource Allocation Model focusing on transparency and inclusiveness, supported by a comprehensive district-wide Enrollment Management Plan and a Human Resource/Staffing Plan integrated with other district-wide programs and financial plans, broadly communicated to the colleges. (III.a.6, III.D, III.D.1.a, III.D.1.b, III.D.1.d, III.D.4, IV.B.3.c)

Commission Recommendation 1: In order to meet the Standards, the college must ensure that the president holds an appropriate degree from an institution accredited by a recognized U.S. accrediting agency at the time the degree was awarded. Furthermore, the college should ensure that the college catalog contain precise, accurate, and current information with the names and degrees of all administrators and faculty. (Eligibility Requirements 5 and 20; Standards II.B.2.a, III.A.1.a)

To verify the response of San Bernardino College to these recommendations as delineated in the Accreditation Follow-Up Report, the Commission sent a team to conduct a site visit to the college. The three-person team visited the college on the morning of April 14, 2016 and visited the District Offices on the afternoon of the same day.

The following report represents the observations, review of evidence, analysis, and conclusions of the evaluation team that visited San Bernardino Valley College on April 14, 2016. The report is intended to evaluate the Follow-Up Report prepared by San Bernardino Valley College concerning the single College Recommendation, the three District Recommendations, and the single Commission Recommendation cited in the action letter sent to the college.

Team Analysis of the College Responses to the Recommendations

College Recommendation 1: In order to meet the Standards, the team recommends that all program student learning outcomes be assessed on a regular basis as part of a sustainable cycle of continuous quality improvement. (Eligibility Requirement 20, Standards I.B.1., II.A.2.f)

Findings and Evidence: At the time of the ACCJC visit in fall 2014, only 22% of SBVC's programs systematically collected, recorded, and evaluated outcomes assessment data. Since that point, the college has developed and implemented several systems for both gathering meaningful data and stimulating dialogue and strategies for improvement based on that information. (Standard I.B.1) At present, ongoing assessment and three-year evaluation cycles have been established for 100% of SBVC's programs, and over 87% of programs have engaged in dialogue intended for thoughtful evaluation and change. (Eligibility Requirement 20) The remaining 13% (primarily new and recently revised degrees and certificates, such as ADTs) are scheduled to begin their first three-year evaluation cycle.

The college has collected Student Learning Outcome (SLO) data on every course offered since 2013. Each course's SLOs and corresponding outcomes data are now mapped to program goals. This data is tied to program review and is used in the 3-year evaluation cycle. The college now uses the "SLOCloud" open source system to collect assessment data and generate detailed course and program level reports. A demonstration of the SLOCloud and an accompanying discussion with members of the Accreditation and Student Learning Outcomes (ASLO) committee verified for the team that the college has implemented a thoughtfully-designed data collection tool that promotes a collegial approach toward the continuous improvement of student learning. (Standard II.A.2.f) Comments from the committee indicate that the SLOCloud allows increased opportunity for faculty input, particularly part-time faculty. It also provides flexibility when entering, evaluating, and reporting SLO data at the course and program levels.

Conclusion: The SBVC SLO/PLO evaluation processes function effectively and are well-established. While the March 2015 visiting team identified concerns regarding the PLO assessment cycle, with only a minority of programs having completed the cycle at the time of that visit, currently 100% of programs are assessed on a three-year cycle (although as previously noted a small percentage are just beginning the three-year cycle because they are new programs or programs that have recently undergone revision). Collection of assessment information, effective systems for disaggregating data, and meaningful dialogue for continuous improvement are occurring at the program level.

As a result of the continued and thorough progress of the college in regard to program student learning outcomes and their assessment, the team believes that the college has fully addressed the recommendation, corrected the deficiencies, and now meets the Commission Standards.

District Recommendation 1: In order to meet the Standards, the team recommends that the Board of Trustees examine its role in the development of policies and ensure that it acts in a manner consistent with its approved policies and bylaws. The team further recommends that the Board of Trustees take steps to ensure that all policies are developed or revised within the framework of the established input and participation process. (Standards III.A.3, III.A.3.a, III.D.3, IV.A.2, IV.B.1.e, IV.B.1.j)

Findings and Evidence: Since the external evaluation team site visit to SBVC in 2014, a number of actions have occurred in relation to this recommendation. An Ad Hoc Task Force was formed to identify and address areas of deficiency. The membership of the Ad Hoc Task Force had districtwide membership, including trustee and constituent group representatives.

The Ad Hoc Task Force set about to identify the component parts of the recommendations and to set out a number of useful tasks to respond to them. One of these was the development of a comprehensive Board Handbook to serve as a training tool and resource document for San Bernardino Community College District (SBCCD) Trustees. The Handbook is built on the CCLC framework for trustee training and adds local information to the mix by incorporating board policies and other information with which the board needs to be well versed. To complement the Board Handbook, several training sessions with the board were scheduled and completed. One of these training sessions was with an ACCJC representative, and another was with a trustee representative of the CCLC. At the first of these training sessions, the role of the board was a prominent agenda item. At the latter training session, the board self-evaluation and board goals were notable agenda items. (Standard IV.B.1.e) Trustees have also attended conferences where sessions related to the professional development of trustees were offered and attended by trustees.

The new training materials and orientation process for trustees were put into practice when a new trustee was appointed to the board in December of 2015. The new trustee submitted a letter to the evaluation team documenting her training experience and how helpful it was to her as a new trustee. She met with both the chancellor and the president of the board of trustees and they discussed information about board policies and other issues with her. It appears that this orientation was specific to her role as an SBCCD board member.

A process has been put in place to review board policies on a six-year cycle. (Standard III.A.3) It appears that this process is working well, and board policies are regularly being reviewed by appropriate bodies and then being approved at board meetings. (Standard III.A.3.a) Given the training with which the board has been engaged recently, there is evidence that members have reviewed their role in the development of policies.

A concern had been raised previously about the board acting in a manner that was non-compliant with their own policies. A list of perceived inconsistencies was identified and submitted to the chancellor and the board. It is not clear that all of the items listed by the college were violations of board policy or other regulations (such as the Brown Act or

AB1725 or Title 5). For example, there was an allegation that the board regularly failed to report the results of closed session items. In reviewing the minutes of board meetings for the district, actions taken are reported out in the minutes. However, there are a number of closed sessions where items were considered but no action is reported out. It is not unusual for items to be acted on in a closed session, but because of considerations of due process rights or other constraints, those actions cannot be reported out at that meeting. This disjuncture between when action is actually taken and when it can be legally reported out may be the cause of the perception that the board is not appropriately reporting out closed session actions. In any event, the team found no evidence that the board is not correctly reporting out actions taken in closed session. Similarly, there was an allegation about the evaluation of the chancellor not being reported out. As the evaluation of the chancellor is a personnel matter, it is not standard practice in most districts for the conclusion of such an evaluation to be reported out. The board is adhering to its policy of evaluating the district CEO. (Standard IV.B.1.j)

Another allegation on the list is that the board "frequently acts on items that have not had sufficient collegial consultation and/or items that fall under the 10 + 1 purview of the Academic Senate." Several of the examples cited appear to be issues that would fall under management rights. That is not to say that some level of consultation or information sharing pertaining to such items would not be desirable as an effective practice. The fact that these decisions occurred in the summer does not automatically mean that collegial consultation processes were violated. A district and its colleges typically operate on a 12-month calendar, and some decisions need to be made in the summer months as well. However, the fact that the District Budget Council is taking steps to anticipate adjustments to the budget in summer prior to commencement may alleviate the concern about budget adjustments occurring in the summer without the proper scrutiny. (Standard III.D.3)

The last item on the list is the statement by the board president "urging District employees to censor their conversations with ACCJC" or words to that effect. When confronted about this statement, the board president denied that his comments were intended to be taken seriously. Others, who were present at the meeting where the statement was made, disagree with that interpretation. Whether it was said in jest or meant to be taken seriously, it was a poor decision to make such a statement. Nonetheless, the board appears to have dealt with this matter internally and there have been no further repetitions of such commentary.

The district has implemented a clear and regular process for the review and approval of board policies and administrative regulations. (Standard IV.B.1.e) There is constituent group representation is this process. (Standard IV.A.2)

Conclusions: The team found that the board has engaged in self-reflection and training to examine their role in the development of policies and to act in a manner consistent with those policies. Additionally, a comprehensive process of policy review, revision, and approval has been established and is functioning appropriately. The team finds that

the college and district have fully addressed the recommendation, corrected the deficiencies, and now meet the Commission Standards.

District Recommendation 2: In order to meet the Standards, the team recommends that the Board of Trustees, and the chancellor, in consultation with the leadership of the college campuses, develop a strategy for addressing significant issues to improve the effectiveness of district human resources services that support the colleges in their missions and functions. These issues include:

- Reliable data from the Human Resources Department to support position control and other human resources functions;
- Timelines of employee evaluations;
- Responsiveness and improved timelines for employee hiring;
- Consistent policy interpretation and guidance; and
- Completion of the faculty evaluation instrument to include work on Student Learning Outcomes.
  (Standards III.A, III.A.1, III.A.1.b, III.A.1.c, III.A.5, IV.B.3.b)

Findings and Evidence: A considerable amount of work has occurred in the area of Human Resources. The district has invested in new personnel and in systems to improve the performance of this key area. (Standards III.A, IV.B.3b) Comprehensive plans have also been developed to guide the work that is being done.

The work on improving the reliability of human resources data is centered on the implementation of a new position control system. This new system allows for more precise tracking of employee positions, salaries, costs, funding sources, etc., than what was available previously. This new system is supplemented by a new internal hiring manual that provides guidance to managers who want to create new job descriptions or change existing ones. (Standard III.A.1)

The district purchased a new software system to assist Human Resources with keeping track of employee evaluations. Although this system does not appear to be fully functioning yet, the district has made strides in bringing employee evaluations current. (Standard III.A.1.b) There are still some evaluations that are overdue, but that percentage continues to drop. At the time of the visit less than 11 percent of the district-wide employee evaluations were still past due, which was a significant reduction from the amount due just this past January. Some of the past due evaluations have occurred because of changes to employee assignments or changes in supervisor, so the actual percentage of overdue evaluations is most likely even lower.

The Human Resources Department responded to the problems in employee hiring with several decisive actions. First, two additional personnel were hired to increase the capacity of the department. This has led to shorter timelines and better planning related to the hiring process. Second, the district has expanded its recruiting efforts. Previously, the district did not use the Chancellor's Office Registry to advertise positions. That site has developed into the main recruiting vehicle for community college faculty positions

across the state, and participating in that site should enhance the depth and size of hiring pools. The Human Resources Department is also increasing its attendance at job fairs and evaluating the results of various search engines.

To address inconsistencies in the interpretation of human resource and employment policies, the Human Resources Department implemented several tools. A new spreadsheet-type program is being used to assist with hiring processes and to better define interpretations of policy issues. Regular and ongoing training activities were established to supplement the spreadsheet tool and to educate staff about the elements of collective bargaining agreements and other important items. (Standard III.A.5)

The college has had a difficult time coming into compliance with Standard III.A.1.c which reads: "Faculty and others directly responsible for student progress toward achieving stated student learning outcomes have, as a component of their evaluation, effectiveness in producing those learning outcomes." In response to this Standard, the "Tools" committee, which is a districtwide committee with "the authority to change evaluation instruments" added a statement to the faculty evaluation instrument. The statement is as follows: "I have self-reflected in regards to the development and assessment of SLOs." There is a signature line on the form and a check box. If faculty check that box, it is assumed that "they have self-reflected on SLOs as per the SLO process defined by the Academic Senate."

The inclusion of the statement and the corresponding check box complies with the part of the Standard that requires a component of the evaluation be related to student learning outcomes. However, it is not clear that this statement accomplishes the intent of the Standard to assess how effective faculty are in producing student learning outcomes. Self-reflection is important and useful, but it is not necessarily an assurance that faculty are using that self-reflection to enhance and deepen student learning. The team reviewed the SLOCloud and was pleased to see numerous examples of documented self-reflection by faculty in different disciplines. However, when the question was asked as to what would happen if faculty chose not to engage in self-reflection or chose not to check the box on the evaluation form, the response was not fully satisfactory. That is, under the current MOU with the faculty bargaining unit, part-time faculty cannot request for additional compensation if they do not submit SLO assessment results. They do not receive the extra pay, but their pay is not docked. In the case of a full-time faculty member, there really were no tangible consequences other than peer pressure or pressure from a dean or other administrator that could be employed. Nonetheless, there is a Memorandum of Understanding between the faculty bargaining unit and the district that outlines areas of cooperation between the faculty and the district concerning SLOs, which includes a number of elements of the SLO process such as choosing measurement methods, setting of numerical targets, assessing outcomes, and documenting the results. (Standard III.A.1.c)

Conclusions: The Human Resources Department appears to be moving in the right direction and has made a number of improvements that have increased the productivity of the department and the quality of the services provided to the colleges. However, there is

a concern that the college technically meets Standard III.A.1.c, but may not fully meet the intent of that Standard. In spite of that one specific concern, the team believes that the college has addressed the recommendation, corrected the deficiencies, and now meets the Commission Standards. The college will need to ensure continued compliance with 2014 Standard III.A.6 as it provides more specificity in regard to faculty use of SLO assessment data.

District Recommendation 3: *In order to meet the Standards, the team recommends that the District follow their Resource Allocation Model focusing on transparency and inclusiveness, supported by a comprehensive district-wide Enrollment Management Plan and a Human Resource/Staffing Plan integrated with other district-wide programs and financial plans, broadly communicated to the colleges. (III.A.6, III.D, III.D.1.a, III.D.1.b, III.D.1.d, III.D.4, IV.B.3.c)*

Findings and Evidence: The district responded assertively to this recommendation by hiring external consultants to undertake a report on enrollment management. After that report was received, the Chancellor created an enrollment management task force that was asked to come up with a better method for the distribution of FTES between the two colleges of the district. The enrollment management committee came up with a recommendation to modify the resource allocation model of the district. The new modifications do not inhibit the growth of SBVC and, at the same time, allow the sister college to seek aggressive growth. (Standard III.D, IV.B.3.c) The enrollment management task force also completed a draft of a three-year Enrollment Management Plan for the district, which is going through the collegial consultation process at both colleges. (Standard III.D.1.a, III.D.1.b))

In a similar manner, a committee was created to develop a Human Resources/Staffing Plan for the district. That group met several times over the current academic year. They completed a draft of the plan and took it through the collegial consultation process with the various constituent groups. The plan is intended to guide human resources recommendations in the future. A document provided to the team by CSEA Chapter 291, challenges the staffing plan and questions why administrative staff were not included in the plan. The allegation is that the number of administrative hires has tripled over the last five years while vacant classified positons have gone unfilled.

The level of communication and transparency across the district has improved. This statement is based on the documentation reviewed by the team, the evidence in the SBVC Follow-Up Report, and by comments made by college and district employees during the visit. The budget is a particularly difficult topic to communicate to faculty and staff. Nonetheless, there are numerous and regular communications concerning the budget, including an annual report by the District Budget Committee, an FAQ communication, and letters and memos from the Vice Chancellor of Business and Fiscal Services. (Standard III.D.1.d, III.D.4))

Conclusions: The district has made adjustments to the resource allocation model that responds to the unique needs of each college. An Enrollment Management Plan and a

Human Resources/Staffing Plan were also completed and are moving through the collegial consultation process. These plans appear to be integrated with other district and college plans. (Standard III.A.6) Communication and information dissemination have improved. The team believes that the college has addressed the recommendation, corrected deficiencies, and now meets the Commission Standards.

Commission Recommendation 1

In order to meet the Standards, the college must ensure that the president holds an appropriate degree from an institution accredited by a recognized U.S. accrediting agency at the time the degree was awarded. Furthermore, the college should ensure that the college catalog contain precise, accurate, and current information with the names and degrees of all administrators and faculty. (Eligibility Requirements 5 and 20; Standards II.B.2.a, III.A.1.a)

Findings and Evidence: The issue of ensuring that the President holds an appropriate degree from an institution accredited by a recognized U.S. accrediting agency at the time the degree was awarded has been resolved. (ER 5) In November 2015, the President announced her retirement, effective June 30, 2016. The college has taken action to list the names and degrees of all administrators and faculty in the college catalog. (Standard II.B.2.a, III.A.1.a, ER 20)

Conclusions: The team believes that the college has addressed the recommendation, corrected deficiencies, and now meets the Commission Standards.

.