EXTERNAL EVALUATION REPORT

Redwoods Community College District
Tompkins Hill Road
Eureka, California 95501

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 Redwoods
Community College District October 9, 2017 through October 12, 2017.

Scotty Thomason
Chair

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Summary of the External Evaluation Report

Institution: Redwoods Community College District

Date of Visit: October 9, 2017 through October 12, 2017

Team Chair: Mr. Scotty Thomason
                                Superintendent/President College of the Siskiyous, Retired

A thirteen-member accreditation team visited Redwoods Community College District from October 9, 2017 through October 12, 2017 for the purpose of determining whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and USDE regulations. The team evaluated how well the College is achieving its stated purposes, providing recommendations for quality assurance and institutional improvement, and submitting recommendations to the Accrediting Commission for Community and Junior Colleges (ACCJC).

In preparation for the visit, the team chair attended a team chair training workshop August 3, 2017 and conducted a pre-visit to the campus on August 26, 2017. During this visit the chair and the assistant to the team chair meet with campus and key personnel involved in the self-evaluation preparation process. The evaluation team received team training by staff from the ACCJC on September 8, 2017.

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 Redwoods Community College District's Institutional Self Evaluation Report and their assessment of the Standards assigned to them. The team confirmed that the self-evaluation report was compiled through broad participation by the entire College community including faculty, staff, students, and administration. The team found that the College provided a thoughtful self-evaluation containing several self-identified action plans for institutional improvement.

The visiting team arrived in Eureka, California the afternoon of October 8, 2017 and had their first team meeting to discuss general impressions of Redwoods Community College District's 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 the College was very responsive to requests for additional evidence.

During the visit, members of the team held informal meetings with members of the College's administration/managers, faculty, staff, and students. Team members visited both Del Norte Center and Klamath-Trinity Site and also met with several Board of Trustee members. The team also interviewed members of various committees including the Accreditation Steering, Academic Senate, Budget Committee, California School Employees Association (CSEA), CR Faculty Association, Distance Education Planning Committee, Education Master Plan Committee, Enrollment Management Committee, Facilities Planning Committee, Institutional Effectiveness Committee, Presidents Cabinet, Program Review Committee, Safety Committee, and the Technology Committee.

Additionally, the team held two open forums on the main 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.

The College provided a team room at the hotel and at the main campus. Both team rooms were well equipped with technology and supplies. The team reviewed numerous materials supporting the self-evaluation report in the team room and electronically, which included documents and evidence supporting the Standards, Eligibility Requirements, Commission Policies, and USDE regulations. Evidence reviewed by the team included, but was not limited to, documents such as institutional plans, program review procedures and reports, student learning outcomes evidence, distance education classes, College policies and procedures, enrollment information, committee minutes and materials, and the College governance structure. The team also viewed evidence and documentation through the College's intranet and electronic copies stored on a flash drive.

The team greatly appreciated the enthusiasm and support from College employees throughout the visit. The team also appreciated the assistance of key staff members who assisted the team with requests for individual meetings and other needs throughout the evaluation process. Campus staff members met every request. The team found members of the campus community to be open and passionate about the College and the role they play in students' lives.

The team found a number of innovative and effective practices and programs and issued a number of commendations to the College. The team also issued one recommendation to meet the standards, as well as some to help the College to increase effectiveness.

College of the Redwoods Commendations and Recommendations

<u>Team Commendations</u>

Commendation 1: The College is commended for its Klamath-Trinity site for its unique partnership which enables students to receive exemplary advisement, tutoring, and support services and for its academic programs and its high student retention rates. (1.A.1, II.B.1)

Commendation 2: The College is commended for the work completed through the Basic Skills Transformation Grant. The college has built upon previous work to develop multiple measures, accelerated curriculum, and a growing embedded tutoring program (EPIC), along with a valid reliable data collection to assess the viability of the new interventions. (II.A.4, IV.A.1)

Commendation 3: The College is commended for the Cap & Gown Program which aims to reduce the achievement gap for athletes. The college is also commended for the Early Alert System which provides additional support to those students who may be at risk. (II.C.4, II.C.5)

Commendation 4: The College is commended for its broad and inclusive program of professional development that utilizes technology and multiple modes of delivery to provide opportunities for faculty, staff, administrators, and the Board of Trustees (III.A.14)

Commendation 5: The College is commended for its annual Institutional Effectiveness Summit and an excellent vehicle for dialog and reflection focusing on institutional-level data, integrated planning processes, and the achievement of its mission. (IV.A.5, IV.A.6, IV.A.7)

Commendation 6: The College is commended for the CR Digest, a newsletter publicizing pertinent information from the campus committees. (IV.A.6, IV.A.7)

Commendation 7: The College is commended for the Committee Handbook which documents membership, scope, and terms and most noteworthy is the alignment of committee function to the ACCJC standards. (IV.A.6, IV.A.7)

<u>Recommendations for Compliance</u>

Recommendation 7: In order to meet the standards, the team recommends that the college adopt budgets that match ongoing revenues and expenditures in the unrestricted general fund without the need to make significant draws on one-time resources or transfers from other funds. (III.D.1, III.D.11)

<u>Recommendations for Improvement</u>

Recommendation 1: In order to increase effectiveness, the college should establish a cycle of validation of institutional set standards so that they remain relevant and informative for

discussions on continuous improvement. The college should also publish all the institution standards. (I.B.3)

Recommendation 2: In order to improve, the team recommends the college review the processes for updating all published materials, including print and online information, to ensure alignment with institutional practices and provide clear and accurate information to students and prospective students. (I.C.1, I.C.2)

Recommendation 3: In order to improve effectiveness, the team recommends that the college continue to align courses to include student learning outcomes at the program level in all of its programs that include information literacy and ethical reasoning. (II.A.11)

Recommendation 4: In order to improve effectiveness, the team recommends that the college enhance the depth and availability of overall documentation of dialog about student learning and institutional planning, and that the college demonstrates implementation of improvement plans across courses, programs, and service learning outcomes. (II.A.16)

Recommendation 5: In order to improve, the team recommends that the college continue the collaborative work on updating AP 4021 to ensure all students enrolled in programs may complete their education in a timely manner with a minimum of disruptions. (II.A.15)

Recommendation 6: In order to improve, the team recommends that the college and its student service programs revisit the outcome assessment cycle for these programs and establish a more structured timeline for each learning outcome. Further, the team recommends that the college uses data to evaluate the effectiveness of strategy and its contribution to the success and learning of its students. (II.C.2)

Recommendation 8: In order to improve, the team recommends that the college maintain adequate controls at all times to ensure financial integrity and provide dependable and timely information for sound decision making. This includes closing their books in a timely manner and submitting their audit reports in a timely manner. (III.D.5)

Introduction

College of the Redwoods (CR) is a public community college located on the north coast of California. Serving one of the largest geographical areas in California, the district includes Del Norte and Humboldt counties, and parts of western Trinity County. Home to nearly 280,000 residents, the district covers almost 10,000 square miles. With a population of more than 27,000, Eureka is the largest city in the service area and is home to CR's largest campus. The nearest metropolitan centers are more than 260 miles to the south (San Francisco) and 420 miles to the north (Portland, Oregon).

The Redwoods Community College District (RCCD) was formed on January 14, 1964, by an election of Humboldt County voters. A bond issue of $3,600,000 was passed for initial construction of what is now the district's Eureka main campus. From 1965 to 1967, the district offered courses and programs on the campus of Eureka High School. Initially, 45 degree and certificate programs were offered, 15 of which were technical/vocational. More than 1,800 students registered at the College in 1965–1966. The initial staff of the College consisted of 31 full-time faculty, 85 part-time faculty and administrative support staff. Today there are approximately 80 full-time and 250 part-time faculty, while the administrative, managerial and classified staff include roughly 230 employees. In May 1975, the residents of coastal Mendocino voted for annexation into the RCCD. In July 1978, Del Norte County also joined the district.

An elected Board of Trustees governs the district, representing specific areas within this large and dispersed district. College of the Redwoods is a multi-site, single-college district offering instruction at the Eureka main campus, the Del Norte Education Center in Crescent City, the Klamath-Trinity Instructional Site in Hoopa, and an instructional site in Garberville. The College also offers residents of this sparsely populated, large district a robust selection of online course and degree offerings.

In June 2014, the College entered into an agreement with the Mendocino-Lake Community College District to begin the process of transferring the Mendocino instructional site to that community college district. The College of the Redwoods filed a substantive change proposal with the Commission that it approved, and the full transfer of the site to Mendocino College took place on June 30, 2017.

Eligibility Requirements

1. Authority
The team confirmed that Redwoods Community College District is authorized to operate as an institution based on continuous accreditation by the Accrediting Commission for Community and Junior Colleges (ACCJC) of the Western Association of Schools and Colleges (WASC). The ACCJC is a regional accrediting body recognized by the U.S. Department of Education and granted authority through the Higher Education Opportunity Act of 2008.

The College meets the ER.

2. Operational Status
The team confirmed that the institution is operational. Evidence provided by the College, as well as data from state and federal sources, indicates that students are enrolled in courses and are completing degrees and certificates. According to statewide data provided by the Chancellor's Office of the California Community Colleges, the College enrolled 5,259 students in fall 2016 and awarded 467 associate degrees in 2016-2017.

The College meets the ER.

3. Degrees
The college offers 27 associate degrees and 18 Associate Degrees of transfer, most of which can be completed in two years. A Suggested Program Sequence is provided in the catalog for each degree to provide this information to students. A decline in students taking credit courses is evidenced since 2009/10, however the majority of students still enroll in programs that lead to degrees.

The College meets the ER.

4. Chief Executive Officer
The team confirmed that the Board of Trustees employs a president/superintendent as the chief executive officer of the College of the Redwoods (CR). The current President was appointed by the CR Board of Trustees in April 2017. The CEO does not serve as a member of the Board of Trustees or as the board president. The team found that the Board of Trustees instills authority in the President to administer board policies.

The College meets the ER.

5. Financial Accountability
The team confirmed that Redwoods Community College District engages a qualified audit firm to conduct audits of all financial records. All audits are certified and all explanations or findings are documented appropriately. Audit reports are made publicly available.

The College meets the ER.

Checklist for Evaluating Compliance with
Federal Regulations and Related Commission Policies

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:

☒	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
☐	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
☐	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Standards and Performance with Respect to Student Achievement

Evaluation Items:

☒	The institution has defined elements of student achievement performance across the institution, and has identified the expected measure of performance within each defined element. Course completion is included as one of these elements of student achievement. Other elements of student achievement performance for measurement have been determined as appropriate to the institution's mission.
☒	The institution has defined elements of student achievement performance within each instructional program, and has identified the expected measure of performance within each defined element. The defined elements include, but are not limited to, job placement rates for program completers, and for programs in fields where licensure is required, the licensure examination passage rates for program completers.
☒	The institution-set standards for programs and across the institution are relevant to guide self-evaluation and institutional improvement; the defined elements and expected performance levels are appropriate within higher education; the results are reported regularly across the campus; and the definition of elements and results are used in program-level and institution-wide planning to evaluate how well the institution fulfills its mission, to determine needed changes, to allocating resources,

	and to make improvements.
☒	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:

☒	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
☐	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
☐	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

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:

☒	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
☐	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
☐	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

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:

☒	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
☐	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
☐	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

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:

☒	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
☐	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
☐	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

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:

☒	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
☐	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
☐	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:
The narrative identified items for the college to review.

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:

☒	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
☐	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
☐	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

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.
☐	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
☐	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Standard I.A: Mission

General Observations

The College has a defined mission describing its broad educational purposes and commitment to student learning and achievement. There is evidence of the College's data-driven efforts to align its programs and services with the needs of its student population. The mission guides institutional planning and decision-making. The mission informs its planning and resource allocation processes, including the former 2012-2017 Strategic Plan, the Program Review process, the 2017-2022 Education Master Plan, Integrated Planning Model, and resource prioritization rubrics.

The mission statement was last updated in June of 2016 and is widely published and visible across the college.

Findings and Evidence

The mission describes the College's broad institutional purposes and commitment to student learning and achievement. It identifies the institution's three broad education programs: developmental, career technical and transfer education. The mission statement indirectly describes the types of degrees and credentials offered, which are directly described in other college documents. Intended student population is addressed by referring to accessible education and service area. (I.A.1)

Evidence that the College uses data to effectively accomplish its mission and that the mission informs its priorities can be found in the College's Institutional Effectiveness Scorecard, which is structured around the phrases of the mission statement. The Scorecard includes data as well as College-level institution-set standards and target/stretch goals for some indicators. Further evidence can be found in the Annual Report to ACCJC, Student Success Scorecard, Institutional Effectiveness Report, Institutional Learning Outcomes, Program Learning Outcomes, Course Learning Outcomes, Education Master Plan, Strategic Master Plan goals and objectives, Personnel Resource Request Review/Ranking Procedures, Equity Planning document and Program Review reports. The college mission directs institutional priorities through the Integrated Planning Model which explicitly includes the mission. The rubrics college committees use to prioritize resource requests from program review require a description of the resource request's relationship to the mission. (I.A.2)

Administrative Policies 4020 and 4025 clearly state the College's commitment to align educational programs with the mission. Board Policy 5050 provides evidence of the College's commitment to support student success and Board Policy 2200 states the Board's commitment to promote the mission of the institution. Evidence that planning, and evaluation of that planning, is linked to the mission of the institution can be found in the

Integrated Planning Model, the 2016 Reorganization Plans, the Institutional Effectiveness Reports, Institutional Learning Outcomes, Criteria for Staffing requests, 2012-2017 Goals and Objectives in Strategic Plan and Education Master Plan, the Institutional Self-Evaluation Report, Rubrics for resource requests Technology and Facilities departments, the Annual Plan, Personnel Resource Request Review/Ranking Procedures, Equity Planning document and Program Review Reports.

Existing programs demonstrate alignment with the mission through program review. The first program review question asks responders to state how the program supports the mission, and there is evidence that programs answer this question thoughtfully. New programs are aligned with the mission through the curriculum approval process. Administrative Procedure 4020, "Program and Curriculum Development," lists alignment with the College mission as one indicator to include when proposing a new program. The team confirmed that the template for new program proposals includes a question on alignment with the College mission. Further, the Integrated Planning Model outlines how the mission informs all college processes, including resource allocation and the rubrics used to prioritize resource requests (I.A.3)

The mission is published on the College website and the College Catalog. The mission statement is reviewed by the Board every spring. It is also reviewed by the College Council every four years as part of its review of Board Policy 1200, "District Mission." (I.A.4)

Conclusion

The College meets the Standard and related Eligibility Requirements.

Commendation 1: The College is commended for its Klamath-Trinity site for its unique partnership which enables students to receive exemplary advisement, tutoring, and support services and for its academic programs and its high student retention rates. (1.A.1, II.B.1)

Standard I.B Institutional Effectiveness

General Observations

The College has instituted multiple processes and reports to support ongoing and collegial assessment of and dialog on matters of academic quality including student outcomes, student equity, and institutional effectiveness. The College has defined learning outcomes and a cycle of ongoing assessment for all instructional programs and student learning support services, with results available on a publicly accessible website.

Key performance indicators and institution-set standards are broadly communicated through an annual Institutional Effectiveness Report and there is evidence of a recurring cycle of dialog so that the institution has a shared understanding of its strengths and weaknesses and sets appropriate priorities. When the institution identifies performance gaps, it implements strategies, which may include allocation or reallocation of human, fiscal and other resources, to mitigate those gaps and evaluates the efficacy of those strategies.

Board Policy and Administrative Procedure 3225, "Institutional Effectiveness," establish requirements for setting and assessing goals related to student performance and achievement. Disaggregated data is published on the college website and is disseminated and reviewed through the Program Review process. The Integrated Planning Model identifies multiple planning committees which develop operational plans for specific operational areas of the college in support of the larger Education Master Plan, and ultimately, the mission. This model also formally integrates planning and assessment activities across the college, incorporating assessment of student learning outcomes, review of data and performance indicators and program review into a coordinated cycle leading to an annual plan and systematic resource request prioritization process.

The annual Program Reviews and Area Plans, Institutional Effectiveness Scorecard, Student Success Scorecard, the Annual Report to the ACCJC and the Institutional Effectiveness Reports provide evidence that the institution regularly evaluates its policies and practices across all areas of the institution, including instructional programs, student and learning support services, resource management, and governance processes to assure their effectiveness in supporting academic quality and accomplishment of mission.

The Institutional Effectiveness Report illustrates that the institution assesses accomplishment of its mission through program review and evaluation of goals and objectives, student learning outcomes, and student achievement.

Findings and Evidence

The team confirmed evidence of dialogue about learning outcomes for courses and programs. The online assessment reporting tool includes sections for findings/results which document dialogue. Faculty and staff participate in Institutional Learning Outcomes (ILO) dialogue sessions annually. There is evidence of these ILO discussions leading to improvements. Two examples include moving counselors into offices in instructional areas for convenient drop-in counseling (based on ILO dialogue about instruction and student services working together

more closely) and working with Humboldt State University to improve transfers (based on ILO dialogue about transfer data).

Dialogue about equity is evidenced through equity data presented to the programs conducting program review. The program review document includes questions for instructional programs about enrollment and success by student group. The program review document for student services programs includes a broad equity question. Dialogue about equity also includes Board of Trustees discussions looking at equity gaps. Additionally, the Student Equity Plan Committee has broad representation from different constituency groups.

The presentation of the Institutional Effectiveness Report, the Institutional Effectiveness Scorecard, and the Annual Plan support dialogue about institutional effectiveness and continuous improvement of student learning and achievement. Dialogue about academic quality occurs through the Curriculum Committee and Assessment Committee as well as discussions about outcome measures from the Student Success Scorecard and other reports. (I.B.1)

The College has developed a web app that lists learning outcomes for instructional programs and student services; the team confirmed that programs and services have defined learning outcomes. A review of the online assessment reporting system shows some gaps in which departments have not yet recorded assessments. All services have records of assessment reports. The College has established a four-year assessment cycle for learning outcomes. (I.B.2)

At the institutional level, institution-set standards were established in 2014 based on seven-year minimums for each indicator. The standards and institutional data are regularly published in the Institutional Effectiveness Scorecard. The college also presents examples taking action when institutional performance falls below the standards (certificate completion in 2013-2014 and number of transfers in 2015-2016). The team noted that the set standard for awarded degrees was significantly below the actual number of degrees awarded in recent years and thus the standard appeared to be set at a level lower than would provide meaningful analysis. This is attributed to the process in which standards were set, which were based on the minimum level over a seven-year period. Such disparities would likely be resolved when standard metrics are next reviewed and revised. In interviews, the team determined that the College does not yet have a process or cycle for revising their institution-set standards.

At the program level, in comprehensive program review, programs have begun to set standards for numbers of degree and certificate completers. Additionally, some programs have set standards for licensure exam pass rates and employment rates, as reported in the College's annual reports to the Commission. However, the team found no evidence that the College publishes program-level standards on licensure exam pass rates and employment rates outside the ACCJC annual report. This information is not available in the Institutional Effectiveness Report or the Institutional Effectiveness Scorecard, where institution-set standards are published. The team also found no evidence of procedures for addressing when program performance falls below established program-level standards. (I.B.3)

The ISER and the Institutional Effectiveness Report, the Institutional Effectiveness Scorecard and the Student Success Scorecard are provide evidence that assessment data are used to support student learning and student achievement. The ISER says "A demonstration that plans are tied to assessment is also required for programs to request resources." There is evidence that such a demonstration is required for all resource requests. Evidence of alignment between data assessment and the organization of institutional processes include the College's Cap and Gown program to reduce the achievement gap of student athletes and the changes in the Math and English curricula to accelerate the progress of its students. (I.B.4)

The College has a well-developed program review process in place. Programs complete a comprehensive program review every four years, which is aligned with the learning outcomes assessment cycle. Employees at all sites are involved in program review. Program review templates integrated with the institutional mission through the first question, which asks how the program supports the mission. The data used in program review are disaggregated by delivery mode and other factors. Analysis of assessment results are included in program review for instructional and student services programs. (I.B.5)

Achievement data are disaggregated, analyzed, and discussed through program review and research reports. Student success data, including data on achievement gaps, are presented to the Board of Trustees on a monthly basis. Identified performance gaps are addressed through the Student Equity Plan as well as the Institutional Effectiveness Scorecard. In a pilot project, some courses are using Canvas to collect course learning outcomes for individual students, allowing disaggregation of learning outcomes data to be analyzed. This pilot was initiated in spring 2017 with generally positive results and is being continued; the Assessment Committee plans to decide whether to recommend institution-wide expansion in the near future. (I.B.6)

The College has established a four-year cycle for reviewing and updating Board policies and administrative procedures. Policies and procedures covering all areas of the College, including instruction, student and learning support services, resource management, and governance, are included in the review cycle, which is included on the board policies web page. The team confirmed that policies and procedures scheduled for review in summer 2017 were reviewed and in some cases revised within the past four years, following the established cycle. Governance processes are reviewed through an annual committee survey, the results of which are discussed at the annual Institutional Effectiveness Summit. (I.B.7)

Assessment results are communicated through ILO sessions where assessment results relating to ILOs are presented. Evaluation results are communicated through the annual Institutional Effectiveness Report, Institutional Effectiveness Scorecard, Student Success Scorecard, and the Annual Plan. Evidence for a shared understanding of strengths and weaknesses comes through the annual Institutional Effectiveness Summit and the Education Master Plan development process, which includes an analysis of strengths, weaknesses, opportunities, and threats. Institutional priorities are defined in the Education Master Plan and are reviewed in the Annual Plan. (I.B.8)

The team confirmed that the College follows a systematic planning process that incorporates College goals in the Education Master Plan, annual goals in the Annual Plan, program action plans in program review (which includes all resource allocation). A broadly inclusive process was used to develop the Education Master Plan. From the description in the ISER, the planning, program review, and resource allocation processes appear to be integrated well. Planning addresses short-term needs through the Annual Plan and program review and long-term needs through the Educational Master Plan, the Facilities Master Plan, and other plans.

As presented in the ISER, a key feature of resource allocation is the evaluation of program reviews and associated resource requests through well formulated rubrics. (I.B.9)

Conclusion

The College meets the Standard and related Eligibility Requirements.

Commendations

See Commendation 1.

Recommendations for Improvement

Recommendation 1: In order to increase effectiveness, the college should establish a cycle of validation of institutional set standards so that they remain relevant and informative for discussions on continuous improvement. The college should also publish all the institution standards. (I.B.3)

Standard I.C Institutional Integrity

General Observations

The College publishes both a print and online catalog for students and prospective students with required information on facts, requirements, policies, and procedures. In addition to catalog information, students and prospective students are informed on accreditation status, total cost of education, and student learning outcomes online. The College documents assessment of student learning and evaluation of student achievement and provides relevant and accurate information related to certificates and degrees.

The College has an established four year review cycle for all Board Policies and Administrative Procedures. The mission statement is reviewed by the Board of Trustees annually, with an additional four-year cycle of review by the College Council. The Education Master Plan is updated on a five year cycle.

Board Policy and Administrative Procedure 3200 provide evidence that the College "complies with the accreditation process and standards of the Accrediting Commission of Community and Junior Colleges (ACCJC) and other agencies with which particular District programs seek special accreditation." The College has established Board Policies and Administrative Procedures to assure institutional and academic integrity, honesty and responsibility, and distinguishing personal conviction and professionally accepted views in a discipline (BP 4030, AP 3050, BP 2355, AP 2715, BP/AP 3410, BP/AP 7310, AP 5500, and AP 7365).

Findings and Evidence

The College gives accurate information to the students and the public about its accreditation status with the ACCJC. Information on courses, programs, learning outcomes, and student achievement are made available to the public through publications printed and online, including the Catalog the Course Schedule. (I.C.1)

The team identified a few areas in both the printed catalog and online information that was no longer accurate or was difficult to locate. The ISER indicates that "Online and hard-copy publications are checked for accuracy and updated on the College website on a regular basis." The team found evidence of some inaccurate information in the 2016 Catalog. Some of the errors were corrected in the 2017 Catalog, however a few were still present, such as a particular an incorrect course number in both Catalogs. These errors were infrequent, but notable. The Catalog requirements are included in the College's 2016-2017 Catalog. (I.C.2)

According to the ISER, the College presents matters of academic quality through the publication on the web of its student learning outcome assessment reports. While these reports are available, they are difficult to find and would be somewhat difficult to interpret by the general public. Data about institutional effectiveness are available on the web via the Institutional Effectiveness Report and the Institutional Effectiveness Scorecard among other documents. (I.C.3)

In the Catalog, the College describes degrees and certificates in terms of their purpose, content, course requirements, and expected learning outcomes. (I.C.4)

As discussed under I.B.7, the College has established a four-year cycle for reviewing Board Policies and Administrative Procedures, and there is evidence they are following the cycle. The team found evidence that the Catalog is reviewed regularly. (I.C.5)

Total cost of education information is available online through the College Financial Aid website https://www.redwoods.edu/financialaid/cost. The page includes a current Cost of Attendance Worksheet as well as a Net Price Calculator to estimate the potential amount of Financial Aid available. The College has recently hired a financial literacy advising specialist in the Financial Aid Office in addition to existing Financial Aid advisors. (I.C.6)

The College publishes Board Policy 4030, "Academic Freedom," on academic freedom and responsibility for faculty and students, last updated on June 2, 2015. In addition, Administrative Procedure 3050, "Institutional Code of Ethics," provides guidance to employees to support the freedoms of other employees and to students. (I.C.7)

Administrative Procedure 3050, "Institutional Code of Ethics," last amended on June 7, 2016, defines the College's code of ethics for employees, and includes an expectation of ethical behavior for students. The policy includes specifics as well as a section on consequences of violation. Administrative Procedure 5500 defines the student code of conduct. This policy promotes honesty and integrity, and includes specific sanctions, as well as processes related to those sanctions, for students violating the code of conduct. (I.C.8)

The code of ethics, AP 3050, "Institutional Code of Ethics," says that employees should use care and integrity in sharing information, and their judgments should be dispassionate, fair, consistent, and equitable. The curriculum peer review process ensures that only professionally accepted views in a discipline become part of the official course outline of record. Processes for evaluation of faculty are in place to monitor that faculty present data and information fairly and objectively. (I.C.9)

As a public community college, College of the Redwoods does not require conformity to specific codes of conduct for students or employees, and does not seek to instill specific beliefs or world-views. (I.C.10)

The College does not operate in foreign locations. (I.C.11)

Board Policy and Administrative Policy 3200, "Accreditation," requires compliance and communication in all matters of accreditation. The College has provided evidence of compliance with Eligibility Requirements, standards, policies, guidelines, reporting requirements, and prior approval of substantive changes. Reports to the ACCJC are posted on the College website. Substantive change proposals have been submitted in advance of major changes, including offering 50% or more of programs via distance education. (I.C.12)

The College provided evidence of the programs, accrediting agencies, current accreditation status, and cycles of evaluation. (I.C.13)

As a public community college, College of the Redwoods does not generate financial returns or contribute financially or otherwise to a parent or related organization. The ISER presents evidence of public oversight (e.g., the Citizen's Bond Oversight Committee) such that external interests are not prioritized over education. (I.C.14)

Conclusion

The College meets the Standard.

<u>Recommendations for Improvement</u>

Recommendation 2: In order to improve, the team recommends the college review the processes for updating all published materials, including print and online information, to ensure alignment with institutional practices and provide clear and accurate information to students and prospective students. (I.C.1, I.C.2)

Standard II
Student Learning Programs and Support Services

Standard II. A: Instructional Programs

General Observations

The institution provides instructional programs, library and learning support services, as well as student support services that are aligned with its mission. The institution's programs and offerings are at levels of quality and rigor expected for institutions of higher education.

The institution assesses its educational quality through methods accepted in higher education and makes the results of its assessments available to the public. The institution defines and incorporates into all of its degree programs a substantial component of general education designed to ensure breadth of knowledge and to promote intellectual inquiry. The provisions of this standard are broadly applicable to all instructional programs and student and learning support services offered in the name of the institution.

Findings and Evidence

The college has a clearly defined process to develop, approve, and evaluate courses and programs. Courses and programs are approved by the faculty led Curriculum Committee and in adherence with the Program and Course Approval Handbook. A clearly defined structure for assessment of SLOs and PLOs is scheduled to be completed every four years and is overseen by the Assessment Committee. The Program Review process ensures continued viability of programs College Programs. Distance Educations courses are approved separately through the Curriculum Committee. The "Narrative" portion of all program change documents requires description of the tie to the College mission. (II.A.1)

The College relies upon faculty, both adjunct and full time, to ensure the viability of courses and programs, and continue to determine the content and methods meet professional standards, both in GE and CTE, and regardless of modality. The college effectively uses Program Review goals to impact the college annual plan. The College developed a "Program Revitalization, Suspension, or Discontinuance" process in 2011 and has used it to bring all stakeholders into a discussion and evaluation of data for several programs. Curriculum is routed to departmental faculty to provide dialog on effective instructional method.

The College has identified Student Learning Outcomes and implemented a four year system for assessment after determining that a 2 year cycle did not allow for meaningful completion of the assessment/action plan cycle. Course Outline of Records and syllabi are approved and include Student Learning Outcomes. Syllabi clearly posted on the college website. Institutional Level outcomes have been developed, each has been assessed, and a convocation and FLEX activities have been provided in response. (II.A.3)

The College provides Curriculum Committee approved basic skills courses that are distinguished from college level curriculum in the catalog. Courses are offered in an

accelerated format (with faculty training provided) and in a distance modality. Basic skills courses are developed by discipline area faculty who determine the kills required to align with transfer level curriculum. This work has been supported by the Basic Skills Grant. The work on this grant is three-fold: the college has been working to develop and implement a valid and reliable multiple measures placement system, accelerated curriculum (with professional development for faculty included, and an embedded tutoring program, EPIC. The college is encouraged to continue this work. (II.A.4)

The College's degrees and programs follow common practices in Higher Education. All degrees require 60 semester units, with 18 units in a major area. CTE uses labor market and advisory committee input and adheres to state and/or national standards. Transfer Degrees adhere to the transfer model curriculum and courses meet C-ID requirements. (II.A.5)

The College schedules courses at a variety of times, locations, and modalities so that most students can complete a program in a timeframe consistent with established expectations. This includes suggested 2-year course rotations for degrees and certificates published in the catalog. To further support completion, the college has developed a means by which students can register for one entire year at a time. Student orientation, counseling courses, priority registration and early alert systems are used to further support students towards completion.

The team found that what is in the catalog is not necessarily consistent with what is found in the schedule of classes or on the website, which could impact completion. This could prevent a student from finishing in 2 years. It is unclear whether students impacted by program discontinuance, or the transfer of the Mendocino Center to Mendocino College, are impacting completion for every student potentially impacted by the changes. The institution set-standards for degree completion is set rather low, at less than 55 percent from that obtained last year. (II.A.6)

The team found substantial evidence of the College offering a variety of services to support its diverse students, guided by the College's Student Equity Plan. These include, for example, Basic Skills efforts, TriO, DSPS, EOPS, Cap and Gown, the Veterans Support Services, and the Academic Support Center. This is complemented by a good number of guidance courses for students and relevant staff development opportunities for faculty. As well, the college offers courses through a variety of delivery modes, including online and telepresence, and reaches out to its population through high school AB 288 (CCAP) courses or offerings for the large incarcerated population within the district. (II.A.7)

The team found evidence of the college investigating the validity of department-wide and/or program wide examinations. Examples includes the College's Nursing programs use nationally approved exams to provide remediation when needed for students, while also allowing faculty to compare the college's student performance to industry standards and to that of students in similar programs across the country. Prior learning is assessed through the colleges prerequisites challenge process that ensures reliability and equity. In

so doing, the institution is positioned to successfully ensure process is in place to minimize test bias and enhance reliability. (II.A.8)

College of the Redwood awards course credit, certificates, and degrees based on student attainment of course and program learning outcomes. Assessments are embedded in graded assignments and exams and systematically presented in the rubric. Improvement plans are included where warranted. The team found inconsistent evidence of these plans having been implemented.

Programs are mapped to course student learning outcomes to ensure program level assessment, though some programs lack such maps. For example, the college provides the map of courses to programs for the Agriculture's General AS-T and Communication Studies AA-T, as well as for the Corrections Associate of Sciences Degree and Corrections Certificate of Achievement. This lack of mapping seems to be the exception rather than the norm though it is prevalent enough to be of note. The unmapped programs are not getting assessed at the most basic level.

Other documents also indicate a lack of program level assessment. The Administration of Justice 2017 Program Review, for example, reported that "Degree/Certificate PLO assessments have not been done".

The Distance Learning program review (9/20/2017) reports that "insufficient assessment activity completed for the program to reflect on assessment-based changes." As well, the majority of programs lack a program assessment report, the tool used by the college to report dialog at the program level. There is evidence of dialog around assessment taking place during the "Assessment Summit" that took place in 2012 as well as other such dialog sessions. The team did notice that good tools and processes (e.g. program assessment worksheets) have been put in place for these dialog to occur and be documented, such as through the mapping process, and posting of assessment reports which comprises dialog. Though the majority of programs have not posted such reports, the few I have seen are rich in support of dialog around assessment and improvement plans. Good examples of dialog are also found around ILOs and GEOs.

Credit units are awarded consistent with college policy that reflect generally accepted norms or equivalencies in higher education. College of the Redwood does not offer clock-to-credit hour course offerings. (II.A.9)

The College's catalog, website, and policies provide clear information on transfer requirements to the California State University and University of California systems and other institutions. The college certifies learning outcomes for related transfer courses through the state Course Identification System as well as specific articulation with 4 year institutions. The catalog, policies and procedures also provides detailed information on its acceptance of transfer credits from other institutions. Students may challenge selected courses through the college's approved credit by examination process (BP and AP 4235) and the college also provides credit for prior military experience (AP 5013).

With support of its Articulation Officer, the college develops articulation agreements in accordance with Board Policy and Administrative Procedures 4050. Where patterns between institutions are identified, the institution develops articulation agreements, as illustrated by the number of AA-T and AS-Ts programs as well as CCAP courses offered, or through articulation agreement proper to the college's location such as with the Southern Oregon University and Oregon Institute of Technology. The college does not differentiate between online and face-to-face courses with regard to course articulation. (II.A.10)

Some program maps and assessment reports, such as with the Communication AA-T or Ag Horticulture Practice or Firefighter NCL, are absent from the assessment system, and we therefore lack confirmation that students graduating with these degrees achieve the required general education learning outcomes. Good systems are in place for mapping, assessment, dialog and improvement to take place and some of it is occurring, as demonstrated in program reviews and in assessment reports where they exist, as well as in numbers of career technical education (CTE) programs that include program-specific learning outcomes to meet external program requirements. (II.A.11).

The College has an institutionalized system to approve and re-evaluate the appropriateness for courses to be included in the GE pattern. The Academic Senate has created and defined the specific GE areas, and the Curriculum Committee approves new courses and has an established review process to ensure continued compliance. (II.A.12)

All degrees of the College require 60 units, with 18 units in an area of specialization. Program Level Outcomes are developed by the discipline faculty, approved by the Curriculum Committee, Academic Senate, the Board of Trustees, and the State Chancellor's office. CTE degrees include additional evaluation by advisory councils. All degree programs at the college include 18 degree units in an area of specialization. Program Level Outcomes are published in the catalog for each of the programs and are determined by the areas of key theories and practices. All PLOs are assessed every four years to determine the level of student attainment. (II.A.13)

The CTE programs of the College have developed Program Level Outcomes with input from advisory committees. These committees provide information on skills sets needed and local labor market needs. College CTE programs also work to meet industry-specific requirements to maintain compliance. The POST Basic Course Certification for Basic Law Enforcement is from 2011 and is out of date, however this is due to the lack of cooperation from the certifying body, not the college. Licensure rates are considered by the faculty and advisory committees, as are employment statistics. (II.A.14)

Programs at the College are discontinued through the process described in Administrative Procedure 4021, which outlines how to serve students when programs are eliminated or changed significantly. Several programs have been discontinued and the college provides a number of examples of how the policy is applied with the goal being student educational goal attainment. Students with 50 percent or more of their program coursework are contacted and are directed to meet with a counselor and are provided with alternative to completion. Since

these alternative and equivalence mostly rely on offerings from other colleges that are available online, the college would do well to ensure the affected students are provided with College of the Redwood on-site support to succeed in the given online courses.

A substantive change proposal was submitted to ACCJC in 2015 to transfer the College of the Redwoods Mendocino Center to Mendocino Lake County Community College District, and an agreement was developed between the two colleges to facilitate such transfer in control of a Service Area at which students were able to complete at least 50 percent of an educational program. The proposal covers in details how both colleges made appropriate arrangements for affected Redwood Community College District students to complete their programs of study, with a crosswalk of courses from one college to the other, as well as lists of courses needed for these students to complete so that Mendocino Lake Community College District could prioritize these offerings. This effort is a courageous and shrewd one for College of the Redwood to pursue.

One concern that remains is that both in this case, and in the case of other program discontinuance, only students with 50 percent or more of their program coursework at the given center are supported through completion. (II.A.15)

College of the Redwoods evaluates instructional courses and programs through its program review process, including collegiate, pre-collegiate, career- technical, and community education course, regardless of delivery mode or location. The College's Curriculum Stoplight determine annually which courses require regular revision through the curriculum process. Faculty use the assessment "dialog sessions" to discuss ways to improve student outcome achievement. The College has embedded processes and structures to allow meeting the requirements of the Standard. There is a lack of evidence of closing the loop and documenting changes and improvements to instructional programs resulting from the outcomes assessment. (II.A.16)

Conclusion

The college meets this Standard and related Eligibility Requirements.

<u>Commendations:</u>

Commendation 2: The College is commended for the work completed through the Basic Skills Transformation Grant. The college has built upon previous work to develop multiple measures, accelerated curriculum, ad a growing embedded tutoring program (EPIC), along with a valid reliable data collection to assess the viability of the new interventions. (II.A.4, IV.A.1)

<u>Recommendations for Improvement</u>
Recommendation 3: In order to improve effectiveness, the team recommends that the college continue to align courses to include student learning outcomes at the program level in all of its programs that include information literacy and ethical reasoning. (II.A.11)

Recommendation 4: In order to improve effectiveness, the team recommends that the college enhance the depth and availability of overall documentation of dialog about student learning and institutional planning, and that the college demonstrates implementation of improvement plans across courses, programs, and service learning outcomes. (II.A.16)

Recommendation 5: In order to improve, the team recommends that the college continue the collaborative work on updating AP 4021 to ensure all students enrolled in programs may complete their education in a timely manner with a minimum of disruptions. (II.A.15)

Standard II.B: Library and Learning Support Services

General Observations

The college is mindful of the importance of the library and learning support services to ensure that all students are successful in their academic pursuits. The extensive Learning Resource Center (LRC) at the Eureka campus houses the Library, the Academic Support Center (ASC), mathematics lab, testing center, computer lab, and LIGHT Center which services for students with special needs. At the Del Norte Center, library and tutoring services, access to computers are available for student use.   The Klamath-Trinity site provides tutoring for EOP&S students and proctoring for its student population. The Humboldt Public Library, located across the street from the classrooms, provides sufficient resources and services for the students at this Klamath-Trinity campus. For all three campuses, hours and services are posted at each campus site.

The college systematically relies on the expertise of librarians and learning support service specialists to ensure that the capacity and quality of the services are appropriate to promote student success. During the accreditation cycle, the college has increased librarian coverage at the Del Norte campus and provided the library with resources to provide online access to librarians through ask-a-librarian asynchronous email service, and video tutorials available on the college website. During this same time period, learning support services has implemented online tutoring service available distance education, EOP&S, and TRIO students. Through the Academic Success Center (ASC), the college supports student learning through tutoring, a math success lab, testing, and a modified supplemental instruction program (EPIC). Within the last year of the cycle, the college has implemented tutor training that is comprised of a one-day training, four hours of online training through Tutor Lingo software and 25 hours of mentoring. The college's conversion to a new content software for its website, has limited information regarding ASC's services for the fall semester. Although all of the library and student support services' usage appears to be increasing, data showing the link between the services and student success appears to be in the beginning stages of data analysis and has potential for closing the evaluation loop to improve student success. Personnel responsible for learning support services have a keen understanding of the students they serve and are mindful when designing and/or selecting appropriate resources and services. It is apparent that the learning support services align with the college's mission.

The college is cognizant that many students rely on online services and have responded to meet this need through the use of an online tutoring service and electronic library resources. Schedules for tutoring and other learning support services are posted at each campus and also presented on the ACS website. The facilities are sufficient to meet the needs of the tutoring and other services electronically and utilizes NetTutor (EOPS and Trio students) and OEI materials. Annual program review is conducted to determine the programs and services are effectively meeting student needs and interests. Data and findings from the program review documents are publically disseminated and used to improve programs and services.

Findings and Evidence

The college provides sufficient learning support services for its student population through the programs and services offered in the Learning Resource Center at the Eureka campus and at the Del Norte campus. The college has determined the appropriate resources and services at each of its campuses and the personnel responsible are diligent to ensure that resources and services appropriate for the student population and comparable at each site. The college offers courses at the Pelican Bay State Prison and college provides learning support services for these students when appropriate. (II.B.1)

At the Eureka campus, the college provides a sufficient and stable level of funding for resources to support collections of print, electronic, and non-print materials in sufficient quantity, currency, depth and variety to support educational program regardless of the delivery modality. At the Del Norte campus, the library provides collections of print, electronic, and non-print materials that are sufficient in quantity, depth, and variety; however, the currency of the print collection does not adequately support student needs. The library uses the expertise of librarians, faculty requests, and data analysis to improve, grow and maintain collections and resources. In addition, the library maintains a collection development policy to close gaps in the collections' depth and variety of materials added to the collections. The collection development policy also outlines weeding criteria used to maintain the currency of the collections contents. (II.B.2)

Annual Program Review documents the goals of the library and learning support services, the alignment with the college's mission, staff allocations, budget, number of students served, and findings from the biannual student satisfaction survey. The data and findings are used for planning and requests for resource allocation. Program Review documents are published on the college website. (II.B.3)

The college has formal agreements with vendors for library services including those services associated with the library's integrated library system and bibliographic records vendor. Contracts provide information regarding technical support levels and hosting of client's data which are sufficient to show the college takes responsibility for and assured security, maintenance and reliability of services for the contracted services. The library evaluates these services to ensure their effectiveness on ad hoc, basis during the contractual period. The college provides evidence that these facilities are secure and provide a positive learning environment for all its students. (II.B.4)

Conclusion

The college recognizes that supporting student success and achievement extends beyond the classroom. The library and its associated learning support services are comprehensive and open to all students who seek assistance. The college is responsive to the types of programs and services which best serve their student populations and continually reviews their progress to ensure that their efforts align with the college's mission and enhance student learning. The College meets this Standard and related Eligibility Requirement.

<u>Commendations</u>

See Commendation 1.

Standard II.C: Student Support Services

General Observations

The College is committed to increasing student success through enhancement of student services programs. Faculty, staff, and management in student services seem to be involved and engaged with the Program Review and decision making processes. Student Services staff tend to understand the prioritization and allocation of resources in relation to Program Review, as well as the process for learning outcomes and assessments.

Findings and Evidence

The College requires that Student Services Programs complete an annual Program Review. Such a requirement in essence satisfies the existence of evaluation processes through which quality of support services can be measured. The College has demonstrated that an evaluation process is in-place and that there is an established timeline by which such evaluations should occur. The services programs are aligned with the mission of the College. The institution has protocols and considerations to ensure access to various services is provided to students in other locations. This also includes communication and involvement of employees in other locations in the overall processes and decision making. While improvements can be made to provide equitable services to online students, the College does provide such services via electronic communication or telephone conversation. (II.C.1)

While engagement of staff and dynamics related to Program Review processes and assessment of outcomes have been enhanced compared to prior years, and while the desire for improvement is apparent, the College will need to continue to increase its efforts in utilizing data to establish more structure in completing assessments. The learning outcomes for Student Services Programs have been mostly developed, but the outcome assessments have not consistently been completed across all Service areas within an established timeframe. The outcome assessments have a four-year cycle to be evaluated. To that end, if a program has four learning outcomes, potentially, one of those outcomes could be assessed within eight years if assessed during the first cycle of the initial four-year cycle and then again at the end of the second four-year cycle. The College will be able to have more consistent action items if the outcomes are assessed more systematically with specified timeframe for each outcome. In addition, there were no visible evidence that the action items that were identified as a result of learning outcomes were assessed for effectiveness. There were no indications why some action items or strategies for improvement were removed and what led to other action items/changes to occur.

Some areas in Student Services use other indicators (program indicators) to improve service delivery to students. For example, Enrollment Services is using the results from Ruffalo Noel Levitz satisfaction survey in order to identify students' challenges through implementing future plans. While this is an indication of program improvement, service areas could benefit from a more structured and consistent strategic process through which program enhancement for service areas are measured. (II.C.2)

The College does provide equitable services to students located in other sites. There is district-wide communication to students. Students at one of the locations can meet with a student services representative and arrangements are made with students in the other location to ensure services are provided [via email, telephone, or if need be, a visit to the site]. The College is currently providing counseling services via email and telephone to online students and is looking into enhancing these services to online students in the future. (II.C.3)

The College provides athletics programs and has made an effort in enhancing planning for co and extra curricula activities. However, the College will need to ensure that resources are adequate before additional programs are incorporated. For example, in the Athletics Program Review document, it is indicated that in recent years they have reinstated two sports and have added a third one. Such an expansion did not lead to any additional resources for the program. Considering the importance of these programs to the mission of the College, allocation of resources will need to be considered as such expansions take place. The College also has a Cap & Gown Program which provides tutorial services and assistance to student athletes. This has been a successful attempt in helping student athletes with their academic success.

The College also provides on-campus housing. Residents have opportunities to be involved in various events and programming for housing residents. The nature of the position for former director of campus housing has been reevaluated. The new scope of duties includes oversight of campus life. This will allow the Campus to coordinate and plan activities that further contribute to the cultural and educational enrichment of students' experiences. This is consistent with the desire of student leaders' perspectives (two of whom were interviewed) at the College. (II.C.4)

The College does provide counseling services to students in order to prepare them for their academic goals. The College does evaluate the services, but will need to incorporate data driven strategies in enhancement of its learning outcomes (as reflected in Standard II.C.2) in their program review process. The College provides SSSP core services to its students including orientation (both online and in-person) which describes services offered and information on educational path. The College also provides orientation and counseling to students in special programs such as EOPS. The College has implemented an early alert system through which faculty report those students who might be at risk. This program includes personal individual follow-ups by a retention counselor. The early alert system is a systematic effort to increase student development, success, and retention. (II.C.5)

The College has adopted and adheres to its admissions policies that are approved by the governing board and has in place mechanism through advising and counseling and other special programs to prepare students to complete degree, certificate, and transfer goals. The institution, through orientation and counseling services provides up-to-date information on degree and certificate requirements as well as transfer information. Prospective students can obtain information through Consumer Information, College's catalog and website. The College has established partnerships with local high schools at which testing and educational path information is provided. (II.C.6)

The College evaluates its admissions and assessment instruments for their effectiveness. The Enrollment Management Committee discusses enrollment goals and their plan identifies trends and strategies to enhance enrollment management as related to the College's mission. The Institution has admissions policies and administrative procedures that are approved by the governing board. Student Development and Leadership Group has also examined the admissions process and the members have gone through submitting applications, receiving the correspondence and addressing communications and steps that might require improvement.

The College has reviewed and validated its cut scores previously and has moved to implement multiple measures in conjunction with Accuplacer. The College does have plans in place to evaluate the impact through proper assessment. (II.C.7)

The College has processes in place to permanently maintain student records and adheres to confidentiality rules. Students receive an annual notice related to FERPA and their records. This information is also available in the College's catalog and website. Related to record keeping, the College has in place a Behavioral Intervention Team (BIT). However, the College does not have a systematic database to maintain records on complaints, grievances and intervention cases. This will make the reporting mechanism more difficult for members of the campus community. Further, since there is no reporting database, individuals make oral reports which go 'undocumented.' It is encouraged that the College continues to do this important work, but also consider the implementation of an appropriate database as well as providing adequate training to BIT members. (II.C.8)

Conclusion
The College meets the Standard and related Eligibility Requirement.

Commendations

Commendation 3: The College is commended for the Cap & Gown Program which aims to reduce the achievement gap for athletes. The college is also commended for the Early Alert System which provides additional support to those students who may be at risk. (II.C.4, II.C.5)

Recommendations for Improvement

Recommendation 6: In order to improve, the team recommends that the college and its student service programs revisit the outcome assessment cycle for these programs and establish a more structured timeline for each learning outcome. Further, the team recommends that the college uses data to evaluate the effectiveness of strategy and its contribution to the success and learning of its students. (II.C.2)

Standard III.A: Human Resources

General Observations
Quality and Sufficiency of Employees: Through Board Policies (BP) and Administrative Procedures (AP), the college has formal and well-documented plans to ensure all employees are well-qualified for the position they seek.   Requests for faculty, staff, and administrators begin in the program review process. Faculty position requests are forwarded to the Faculty Prioritization Committee and then to the President and executive cabinet for his recommendations and rationale. Classified staff position requests are prioritized by directors and managers and then forwarded to the President and Executive Cabinet for his recommendations and rationale. A careful examination of the need for the position, its pay-grade classification, and budget support is completed prior to the position being posted. Upward mobility for classified staff personnel is encouraged when positions are appropriate and available. Categorical positions for both faculty and classified staff are initially formulated to meet the regulations by the funding agency. These positions are then posted and filled following the guidelines of the funding agency and the protocol of the College.

Evaluation: The district/faculty organization Collective Bargaining Agreement delineates how faculty will be evaluated, the criteria to be used, and the timeline for evaluation all which adheres to Title 5 and federal regulations. The district/California School Employees Association Collective Bargaining Agreement delineates how staff are evaluated, the individuals responsible for conducting the evaluation, and the timeline for evaluation. Evaluation for administrators is delineated in an administrative procedures document. Human Resources is responsible for ensuring that all employees are evaluated appropriately and in a timely fashion and maintaining the security of personnel documents.

Professional Development: The College has a well-established and extensive professional development model for faculty, staff, and administrators, include full-time and part-time. The Professional Development Committee, comprised of faculty, classified staff, and administrators, meets regularly to discuss the surveys sent to all constituents regarding the topics for professional development sessions that are needed or where there is a particular interest. The Professional Development Committee then collectively selects the sessions for the academic year and schedules the sessions at the beginning of each semester. Professional development opportunities are widely disseminated to all three sites. Some sessions are delivered at the Del Norte campus which are attended by Klamath-Trinity faculty and staff. For the sessions offered at the Eureka campus, many sessions utilize telepresence in order to accommodate faculty and staff from the other locations. After each session, evaluations are completed and reviewed and discussed at the following Professional Development Committee meeting. The committee encourages faculty and staff at the three sites to serve as

presenters for professional development sessions. The Faculty Mentorship Program designed for new full-time faculty from all locations is an informative and collaborative year-long program which faculty learn about how to successfully navigate the campus environment and protocol, discuss pedagogical perspectives, and build a strong bond among few faculty from varied disciplines.

Policies and Practices: The College is mindful that clearly written and comprehensive policies and procedures that are widely disseminated and regularly assessed to ensure quality will result in a smoothly operating organization. These policies and procedures pertain to employees and their performance, ensuring fairness and equity in all actions at the college, professional ethics – all which align with the college's mission.

Finding and Evidence
The College has in place a well-designed and comprehensive plan to recruit and hire exemplary faculty, classified staff, and administrators. There is a systematic protocol for requesting faculty positions, which begin by way of the Program Review process, then ranked by the Faculty Prioritization Committee, and finally forward to the President and the Executive Cabinet for decisions and rationale. Classified staff also begin with Program Review, then forwarded to the Student Development Leadership Committee for ranking and then to the President and Executive Cabinet for decisions and rationale. Administrator positions begin with Program Review make their way to the President and Executive Cabinet for decisions. The College has established ranking rubrics for candidates seeking employment as full or associate faculty, classified staff, and administrators. AP 7120-1 to AP 7120-4 document the process for hiring all employees and are published widely.   Human Resources ensures that all policies and procedures are properly implemented to ensure fairness and equity during the process. (III.A.1)

AP 7120-3 (Full time faculty) and AP7120-4 (Associate faculty) delineate the procedures to be used to hire faculty at the campuses at Eureka, Del Norte, and Klamath-Trinity. Faculty screening committees are responsible for implementing fair and rigorous procedures review faculty portfolios, interview desirable candidates, and select candidates to further review. Guidelines and protocol for the hiring process are well-documented and candidates are informed of the procedures, requirements, and processes. (III.A.2)

AP 7120-1 (Classified and Confidential) and AP 7120-2 (Management and Administrators) documents the procedures used to hire classified staff and administrators at the Eureka and Del Norte sites. Human Resources is responsible to ensure that candidates meet the minimum qualifications and are suitable for the position for which they are applying. The College contracts with Jacobson Betts Company to verify all pertinent information pertaining to the candidate's degrees, qualifications, and experience. Screening committees are responsible for reviewing candidate portfolios, interviewing desired candidates, and selecting candidates to continue along the hiring process. Human Resources personnel ensure that all processes are followed. (III.A.3)

The College follows Title V regulations to ensure that all faculty, classified staff, and administrators meet the minimum qualifications for employment. Human Resources is responsible to ensure that transcripts are complete and appropriate. If equivalency is needed to evaluate transcripts from institutions outside the United States, the College contracts with the Educational Records Evaluation Services Company of Sacramento, CA to verify the appropriateness of coursework of these candidates. (III.A.4)

The Collective Bargaining Agreements describe how faculty and staff will be evaluated, the timeline for evaluation, and the criteria to be used. The Board of Trustees ratified the Collective Bargaining Agreement for faculty (full-time and associate) effective July 1, 2016 – June 30, 2019 was ratified in October 2017. The criteria used to evaluate faculty (tenured, probationary, associate, librarians) is comprehensive and attention is devoted to student learning and achievement and service to the college community. The Collective Bargaining Agreement 2015-2018 proves comprehensive documentation regarding how classified staff are evaluated. Administrative Procedure 7262 describes the methods to which administrators will be evaluated. (III.A.5)

Student learning outcomes are a part of the full-time and part-time faculty evaluation process. Faculty discuss the data, findings, and implications from the student learning outcomes assessed for the classes they teach which is reported as a formal part of the evaluation packet they provide. (III.A.6)

Faculty positions are generated through Program Review, then prioritized by the Faculty Prioritization Committee, and forwarded to the President and Executive Cabinet for decisions and rationale. This process has been in place for several years and there is consensus that the procedures work well for determining the faculty positions that are selected for funding. AP 7212, Faculty Prioritization Process, formally details the procedures that are currently used. The President and Executive Cabinet adhere to AP 7120-7123, which delineates the protocol that will be used to select the positions that are slated for funding. (III.A.7)

The College provides adequate information to associate faculty members teaching at the Eureka, Del Norte, and Klamath-Trinity sites. Orientation is provided for all associate faculty. The College culture promotes strong collaborations between full-time and associate faculty. Associate faculty are welcomed to all professional development activities and they are well-informed by the Professional Development Committee regarding the activities being offered. (III.A.8)

Classified Staff positions are generated through Program Review, then forwarded to the Student Development Leadership Group for ranking and prioritization, and then sent to the President and Executive Council for funding decisions. If categorical funding or grant dollars become available, decisions will be made to ensure compliance with the funding agency and appropriateness of the prioritized positions. Human Resources has a tracking mechanism that documents the status of each of the classified staff positions. Employment

opportunities for categorical faculty and classified staff are initially designed to meet the regulations of the funding agency and then posted and filled in a timely manner. All employment positions are widely disseminated. (III.A.9)

The College has a sufficient number of administrators for optimal operations for the campuses and there is a process in place to continually examine the effectiveness of the administrative body. In 2015, the administrative structure was reconfigured to include associate deans to each division. These positions were instituted to ensure that there are sufficient personnel to effectively address assessment. (III.A.10)

Board Policies (BP) and Administrative Procedures (AP) describe the plan to examine how staffing positions are determined, protocol for hiring employees, and determining the quality and appropriateness of academic degrees and experience. At the foundation of the BPs and APs is fairness, equity, and inclusive in order to hire the most-qualified individuals. (III.A.11)

The College, through BP/AP 7100 "Commitment to Diversity", supports and nurtures all aspects of diversity when hiring employees in all capacities. The Equal Employment Opportunity Plan, which is updated regularly, describes how diversity will be incorporated into the hiring process and reflected in employee trainings. (III.A.12)

Codes of conduct and ethics for all employees are communicated though AP 3050, which specifies the code of ethics, expectations of ethical behavior, and employee responsibilities. AP 7365 delineates the protocol for disciplinary action for classified employees which includes the responsibilities of the institution and employee. The Employee Manual describes pertinent policies and procedures as well as local and state codes. The documents are available to all classified employees. (III.A.13)

The professional development program for all employees is well-established, widely disseminated, open to all, and regularly assessed to ensure quality and relevancy. Part-time faculty participate in orientation and administrative assistance is in place to ensure that faculty have the knowledge and resources needed to effectively teach their classes. The Professional Development Committee, comprised of faculty, staff, and administrators from the Eureka and Del Norte campuses, meet regularly during the academic year to examine responses to the professional development interest survey, design a year-long professional development program, and examine the evaluations from the sessions to ensure that they are meeting the needs and interests of the constituents. The Faculty Mentorship Program, reinstated for the past three years, provides new full-time faculty from all sites with the information needed to be a successful faculty member, discussions about pedagogy which will promote student learning and success, and build a bond between new faculty from various departments.   (Standard III.A.14)

The College established a protocol to ensure that all personnel files are secure and that confidentiality of pertinent records are secure as specified in AP 7145. (III.A.15)

Conclusion
Board Policies (BP) and Administrative Procedures (AP) for hiring all employees is clearly stated, well-documented, and published widely by the Human Resources. The policies and procedures are fairly and equitably enforced. Staffing requests begin with program review and are ultimately decided upon by the college president. Professional development opportunities for all employees are available and encouraged to ensure that they will deliver high-quality programs and services to the student population.   Secure documents adhere to legal regulations and secured in Human Resources. The College meets this standard.

Commendations

Commendation 4: The College is commended for its broad and inclusive program of professional development that utilizes technology and multiple modes of delivery to provide opportunities for faculty, staff, administrators, and the Board of Trustees (III.A.14)

Standard III.B: Physical Resources

General Observations

College of the Redwoods (CR) is a public community college located on the north coast of California. The District covers almost 10,000 square miles. With a population of more than 27,000, Eureka is the largest city in the service area and is home to CR's largest campus.

The College's Eureka campus sits atop an active seismic fault zone. Over the past 12 years, the college has endured extensive seismic research in order to determine where new building facilities can be built.

The College recently updated its Facilities Master Plan (Five-year plan 2017-22) which supports the Educational Master plan and the mission of the college. Outlined in the master plan are long-range capital plans to support institutional improvement goals and objectives as well as projections of the total cost of ownership (TCO) of new facilities and equipment. Criteria for TCO includes required staffing, custodial requirements, routine supply costs, estimated equipment and facility maintenance costs, utility costs, disposal costs, and other projected maintenance costs pertaining to the capital improvement projects.

Some of the projects that are currently underway are the Utility Infrastructure Replacement (UIR) and Seismic Strengthening project, demolition and replacement of a new fieldhouse with new bleachers, new Veteran's Resource Center, new Multicultural Center project and a major marquee and signage upgrade project just to name a few. The findings and evidence below demonstrates the College's on-going and extensive work to provide relatively safe building facilities for administrative leadership, teaching and student learning.

Findings and Evidence

Emergency Preparedness and Safety Committee/Life Safety Committee: The Emergency Preparedness and Safety committee develops the Emergency Preparedness Plan for the College. This plan includes specific procedures for a campus emergency or disaster. The plan is developed by the committee to provide the basic structure and procedures necessary to cope with most emergencies or disasters. The committee meets monthly except during summer months.

Ranking of Facilities Resource Requests: The Budget Planning committee, Facilities Planning committee, and the Technology Planning committee review and rank program review resource requests each year, including request for facility upgrades and alterations.

Ground Motion Report: Review and evaluation of significant faults and assessment of site seismicity.

Emergency Operations Plan: The Emergency Operations Plan is for significant incidents or disasters and is designed to protect lives and property through effective use of pre-planning and training, exercises and drills, and available personnel and resources during emergency operations.

The plan is placed into operation whenever a natural or human-caused significant incident or disaster affects the district that exceeds normal or routine operations.

The plan's purpose is to:
● Protect the health and safety of students, employees, and visitors;
● Protect personal and district property;
● Protect the environment;
● Preserve the orderly continuity of district functions;
• Establish lines of authority, responsibility, functions and operations of the district during emergencies;
● Provide contingency plans for disasters and major emergencies, which may affect the district;
● Provide a basis for the coordination of emergency operations with the management of critical resources during emergencies;
● Identify the district's role for mutual aid to the city/county during a major incident; and
●Coordinate emergency operations with other emergency response agencies. (III.B.1)

Utility Infrastructure Replacement (UIR) and Seismic Strengthening project: This process includes zoning cleared of surface rupture potential by subsurface paleo fault trench exploration investigations. This project and evaluation determines where buildings can be placed for occupancy.

Capital Outlay Plan (Five-year plan): List of facilities and additional replacement building programs for the next five years. (III.B.2)

Facilities Master Plan (Five-year plan 2017–22): The purpose of this Facilities Master Plan is to provide college constituencies and the larger community with a comprehensive model for future campus facility decisions. The Facilities Master Plan is one part of a larger integrated planning model framework. This plan is intended to link to and support the College's Education Master Plan, Mission and Vision. It also is intended to link to and support the College's continuous adherence to Accreditation Standards.

Many of the goals of the Education Master Plan are directly supported by a modern and functional campus infrastructure, including classrooms, laboratories, student support areas, parking lots, walking paths, and on-campus directional signage. In many cases, the Facilities Master Plan is pivotal in advancing the objectives and goals of the Education Master Plan and ensuring continuous adherence to Accreditation Standards.

Gym Geotech & Geohazard Report: Report done to determine where fault lines are located in order to determine where new or replacement buildings can or cannot be placed. The process will involve either bringing an existing structure up to current code standards in accordance with Division of the State Architect (DSA) and California Geologic Survey (CGS) seismic hazard requirements, or the demolition and reconstruction of a new building complex meeting the seismic requirements.

Fusion Facilities Condition Index Report: Tracks all of its useable space and the costs for replacement thus ensuring complete utilization of facilities.

Maintenance Program Review: College supplies and equipment needed that are beyond the standard budget allocation. Needs are prioritize by the maintenance committee to the division level for potential funding that supports the Facilities Master Plan. (III.B.3)

Conclusion

The College meets the Standard.

Standard III.C: Technology Resources

General Observations

The College provides appropriate and adequate technology services to support the college's management and operational functions, academic programs, teaching and learning support services through the provision of professional support, facilities, hardware and software for these services.

The College divides the duties of technology services between two administrative positions – Director of Information Technology & Facilities Planning and the Manager of Information Systems & Applications. Each of the positions is supported by qualified staff.

The College uses Colleague by Elusion to support management functions, such as human resources, financial accounting and admission and records. In addition, student services functions are supported by Colleague through the e-advising, early alert, and WebAdvisor modules. The College supports the learning environment through software such as the learning management system, Canvas, and a distance learning video projection system, and Telepresence.

The College has developed a Technology Plan for a five year period. The Plan has completed two years and has three years remaining. A "Minimum Technology Standard" has been developed along with a three-year replacement calendar for desktop computers and peripherals.

The administrative positions and professional technology staff are housed at the main campus with one instructional technology specialist at the Del Norte campus. Klamath-Trinity's on-site technology support is provided through the staff of the Hoopa Valley Tribe.

The College's technology and technology service provision is supported through the Administrative Procedure 3720, "Computer and Network Use", and Administrative Procedure 4105, "Distance Education".

Findings and Evidence

The College provides sufficient and appropriate technology services to support facilities, hardware and software to support the college's management and operational functions, academic programs, teaching and learning, and support services. (III.C.1)

The College has developed a five year Master Technology Plan which is in the process of being implemented. A "Minimum Technology Standard" has been developed and implemented at all campuses and sites at which the College has equipment. A three-year replacement plan for desktop computers and peripherals has been implemented. The

replacement plan operates with the following guidelines: 1) New equipment is provided in learning environments where students will be the primary user; 2) When the new equipment serving students is replaced, the roll-down equipment is available for assignment to faculty and administrators. Software is being used to identify roll-down priority replacement. (III.C.2)

Technology requests for service are prioritized through the use of a help desk software that is used for request of services input and then assigned to the appropriate technician for resolution. The Del Norte campus faculty and administrative help desk service requests are completed once a week. An onsite instructional technician at Del Norte provides instructional technology help. At the Hoopa site, the Hoopa Valley tribe provides a technician to support desktops that access college systems. The TelePresence room is maintained and paid for by the College as well as a satellite connection to the campus.

The technology needs of the campus are identified through the program review process and prioritized through the college's Technology Planning Committee prior to their forwarding to the Budget Committee.

The College has purchased equipment and software for their TelePresence and hardware to provide appropriate learning experiences for students at Del Norte and the Hoopa site.

The College maintains security for data with a redundancy of backups at regular intervals. Uninterruptable Power Supply (UPS) devices have been placed on systems to maintain the ability to perform orderly shutdown procedures in case of electrical failure or fluctuations. Telephone shutdown protocols have been developed and implemented. The UPS devices are tested twice a year. In addition, the College has completed a Disaster Recovery Plan with off-site data storage and backup. Full implementation of the plan is scheduled for completion by June 2018. (III.C.3)

Training for college-wide software applications is provided as needed. Methods for delivery of training are small group or a one-to-one mentorship. (III.C.4)

The College has constructed and maintains a data warehouse for data extracted from Colleague. Two programmers are available to assist in the construction of standard reports and specialized reports from the warehouse.

The institution has policies and procedures that guide the appropriate use of technology in the teaching and learning processes. (III.C.5)

Conclusion

The College recognizes the need for the provision and implementation of current technology which affects student learning. The College provides technology services at an appropriate

level to all campuses and sites. Direction for technology is provided through the college's Master Technology Plan with the program review process providing additional input into the identification of individual academic and learning program technology. Security of college and student data is realized through the redundancy of backups and the Disaster Recovery Plan.

The College meets this Standard.

Standard III.D: Financial Resources

General Observations

College of the Redwoods has established policies and procedures to ensure financial resources are sufficient to support and sustain the needs of the institution. The College has an integrated planning model that provides the structure for review and discussion of the budget. The College manages its financial resources with integrity and in a manner consistent with policies. The College produces a three-year budget forecast however; the forecast may assume unrealistic expectations. FCMAT identified large assumed intra-fund transfers that were used to reflect a balance budget in its three year budget forecast.

The College adopts budgets that do not match ongoing revenues and expenditures in the unrestricted general funds. In order to balance their budget and maintain current reserves, the College uses significant draws from one-time resources or transfers from other funds.

The College's budget is driven from the mission, educational master plan, and strategic plan.

The College's annual budgeting process includes participatory governance where all user groups are able to provide their input. The College continues to improve the effectiveness of resource allocation.

The College has adequate internal controls to ensure fiscal integrity, which is evidence with the absence of financial statement audit findings (significant deficiency and material weaknesses). The College for the most recent five fiscal years has received an "unmodified/unqualified" audit opinion on the financial statements. These audits are considered "clean" audits.

The Business Office manages all financial transactions under the oversight of the vice president for administrative services, and all financial transactions are included within the scope of the annual financial audit.

As part of the College's internal control system, the college has developed an online training available to employees and offers group and one-on-one trainings upon request. The College has begun working on a business process study to help ensure that process and procedures are efficient and provide professional development to the Business Office staff. This project is in the preliminary stage and the final product is not complete.

The College has sufficient cash flow and reserves to maintain stability. The College provides those in charge of governance monthly financial status reports. The College maintains reserves in accordance with BP 6200 Budget Preparation. The College prepares multiyear forecasts to monitor fund balance reserves. The College has a goal of maintaining a reserve of 10%.

The annual budget includes resource allocations to cover short-term obligations. The College's 2016-17 adopted budget forecasted operating deficits in 2017-18 and 2018-19.

The College began taking steps to reduce the deficit in order to have a balance budget. The College encouraged feedback on ways of reducing the budget by creating a budget forum website and held annual open forums to discuss the budget forecast. The Board of Trustees recently approved a new collective bargaining agreement with the faculty and provided salary increases of 2% beginning July 1, 2016, another 2% beginning July 1, 2017, and another 2% beginning July 1, 2018, totaling 6% all together. The collective bargaining agreement for the classified union will expire on June 30, 2018. The College's Adopted Budget for 2017-18 did not match ongoing revenues and expenditures in the unrestricted general fund. In order to balance their budget and maintain current reserves, the College used significant draws from one-time resources or transfers from other funds. The 2017-18 budget noted revenues growing by 4.0% while expenditures were only increasing by 3.2%. During 2015-16, the College received over $2 million in unrestricted one-time funding from the State. The Budget Planning Committee recommended setting aside $1 million, by placing $300,000 in a pension reserve and $700,000 in the capital fund. Majority of these funds will be utilized in support the 2017-18 budget unrestricted general fund and the remaining amounts plus more are forecasted to be needed in addition to projected revenues, in order to balance the forecasted 2018-19 and 2019-20 fiscal years. The 2% retroactive pay increase for 2016-17 will be covered with a capital fund transfer to the general fund, and the pension cost increase will be covered by the pension reserve.

The College plans for and allocates resources for the payment of liabilities including other post-employment benefits (OPEB). The College contributes resources annually towards their OPEB. The College has contributed more than 100% actuarially determined amounts necessary for their annual required contribution. The College does not have an irrevocable trust however has set aside funds in a separate fund.

The College approves an annual budget calendar by the Board of Trustees. The budget calendar includes timelines for the reporting to the College's Budget Planning Committee (BPC) and the Board of Trustees. The BPC reviews enrollment forecasts and makes recommendations to the president/superintendent relative to budget preparation and the spending priorities.

The College monitors and manages compliance with student loan default rates, federal requirements including Title IV. The College's default rate for the three most recent fiscal years are well below federal requirements. The College's two most recent audit reports noted no instances of noncompliance with federal requirements.

The College's contractual agreements with external entities are consistent with the mission and goals of the college.

Findings and Evidence

The FCMAT Fiscal Health Risk Analysis dated March 14, 2017, noted that the College produces a three-year budget forecast however; that the forecast assumes unrealistic expectations. The College uses large "intra fund transfers in" to reflect a balance budget. There is no documentation to support these assumptions and/or amounts. Financials should

be managed with integrity and provide dependable and timely information for sound decision-making. (III.D.1)

The annual budget includes resource allocations to cover short-term obligations. The College's 2016-17 adopt budget forecasted operating deficits in 2017-18 and 2018-19. The College began taking steps to reduce the deficit in order to have a balance budget. The College encouraged feedback on ways of reducing the budget by creating a budget forum website and held annual open forums to discuss the budget forecast. The College recently signed a new collective bargaining agreement with the faculty and provided salary increases of 2% beginning July 1, 2016, another 2% beginning July 1, 2017, and another 2% beginning July 1, 2018, totaling 6% all together. The collective bargaining agreement for the classified union will expired on June 30, 2018. The College's Adopted Budget for 2017-18 did not match ongoing revenues and expenditures in the unrestricted general fund. In order to balance their budget and maintain current reserves, the College used significant draws from one-time resources or transfers from other funds. The 2017-18 budget noted revenues growing by 4.0% while expenditures were only increasing by 3.2%. During 2015-16, the College received over $2 million in unrestricted one-time funding from the State. The Budget Planning Committee recommended setting aside $1 million, by placing $300,000 in a pension reserve and $700,000 in the capital fund. The majority of these funds will be expended in support the 2017-18 budget unrestricted general fund. Additional funds will be needed, since revenues forecasted for the 2018-19 and 2019-20 fiscal years are projected to be less than expenditures. The 2% retroactive pay increase for 2016-17 will be covered with a capital fund transfer to the general fund, and the pension cost increase will be covered by the pension reserve.

2017-2018 Final Budget - The College adopt budgets that do not match ongoing revenues and expenditures in the unrestricted general funds. In order to balance their budget and maintain current reserves, the College uses significant draws from one-time resources or transfers from other funds.

BP 6200 – Budget Preparation - Each year, the President/Superintendent shall present to the Board of Trustees a budget prepared in accordance with Title 5 and the California Community Colleges Budget and Accounting Manual (BAM). The schedule for presentation and review of budget proposals shall comply with state law and regulations, and provide adequate time for Board study. (III.D.1)

The College uses participatory governance to ensure its mission is integrated and supports the institution's planning process. The College's planning process begins in the mission statement which feeds into the educational master plan. The annual strategic plan is developed from the education master plan. The Facilities Master Plan integrates with the Educational Master Plan. (III.D.2)

BP 6250 – Budget Management - The budget shall be managed in accordance with Title 5 §58311 Principles for Sound Financial Management, Education Code 84040(c), Accreditation Standard IIID and the California Community Colleges Budget and Accounting Manual. Budget revisions shall be made only in accordance with these policies and as

provided by law. Revenues accruing to the District in excess of amounts budgeted shall be added to the District's reserve for contingencies. They are available for appropriation only upon a resolution of the Board that sets forth the need according to major budget classifications in accordance with applicable law. Board approval or ratification is required for changes between major expenditure classifications. Transfers from the reserve for contingencies to any expenditure classification must be approved or ratified by a two thirds vote of the members of the Board. Transfers between expenditure classifications must be approved or ratified by a majority vote of the members of the Board.

BP 6300 – Fiscal Management - The President/Superintendent shall establish procedures to ensure that the District's fiscal management is in accordance with the principles contained in Title 5 §58311 Principles of Sound Financial Management, including: Adequate internal controls exist. Fiscal objectives, procedures, and constraints are communicated to the Board and employees. Adjustments to the budget are made in a timely manner, when necessary. The management information system provides timely, accurate, and reliable fiscal information. Responsibility and accountability for fiscal management are clearly delineated. The books and records of the District shall be maintained pursuant to the California Community Colleges Budget and Accounting Manual. As required by law, the Board shall be presented with a monthly report showing the financial and budgetary conditions of the District. As required by the Budget and Accounting Manual, expenditures shall be recognized in the accounting period in which the liability is incurred, and shall be limited to the amount budgeted for each major classification of accounts and to the total amount of the budget for each fund. (III.D.3)

The Budget Planning committee (BPC) is charged with reviewing and recommending to the president/superintendent a set of budget assumptions. The BPC receives updated budget information on a regular basis. The Board of Trustees approved the College's budgets in an open meeting. The College prepares budget forecasts relative to long-term financial sustainability. (III.D.4)

The College has not able to close their books in a timely manner, which resulted in filling their past three audit reports late (December 31). The College needs to maintain adequate internal controls in order to assure financial integrity and provide dependable and timely information for sound decision-making. The College should develop standard operating procedures and provide staff professional development routinely to assure financial data is reliable and provided in a timely manner. (Standard III.D.5)

Final budgets are prepared each year, discussed at the Budget Planning Committee and provide recommendations to the superintendent/president. The Board of Trustees adopted a set of goals and objective for 2016-17. One of the goals was Fiscal Stability "Ensure the fiscal health of the District by making decisions that lead to long-term sustainability."

The Vice President of Administrative Services and accounting staff review monthly financial reports before being submitted to the Board of Trustees. The Vice President of Administrative Service reports all budget adjustments during the fiscal year for the board's approval on the "Monthly Financial Status Report." (Standard III.D.6)

The College for the most recent five fiscal years has received an "unmodified/unqualified" audit opinion on the financial statements. These audits are considered "clean" audits. The most recent 2015-16 audit report noted audit finding relating to state compliance and the reporting of FTES. The College's general obligation bonds audit and performance audit produced no findings. The Business Office manages all financial transactions under the oversight of the vice president for administrative services, and all financial transactions are included within the scope of the annual financial audit. On an ongoing basis, the Vice President of Administrative Services and the Board Audit Committee review all audit reports and track progress towards implementation of corrective actions for all audit findings. (III.D.7)

For fiscal years 2011-12, 2012-13, 2013-14, 2014-15, and 2015-16, the received an "unmodified/unqualified" audit opinion on the financial statements. No significant deficiencies or material weaknesses were identified in these audits. The most recent 2015-16 audit report noted audit finding relating to state compliance and the reporting of FTES.

The Board of Trustees, the Board Audit and Financial Committee, and the Citizens' Bond Oversight Committee review annual bond expenditures and performance audits. Information and results of the independent audits are provided to the Board of Trustees, the Board Audit and Financial Committee, the Citizens' Bond Oversight Committee, and Executive Cabinet used to evaluate and improve financial management and internal controls.

As part of the College's internal control system, the College developed an online training available to employees and offers group and one-on-one trainings upon request. The College has begun working on a business process study to help ensure that process and procedures as efficient and to provide professional development to the Business Office staff. This project is in the preliminary stage and no final product is complete. (III.D.8)

The College reports cash balances to the Board of Trustees on the "Monthly Financial Status Reports." The College reports the unrestricted cash balances separately from the College's other funds. The College current cash flow projections do not indicate the need to issue a Tax Revenue Anticipation (TRAN). The College is preparing for potential cash flow needs arising from the $36 million state capital outlay project - Utility Infrastructure Replacement and Seismic Strengthening. To prepare for the cash flow needs, the Board of Trustees approved a resolution to provide for interfund borrowings. (III.D.9)

An independent certified public accountant audits the College's accounting records, including its foundation and bond funds, annually. The Department of Education conducted a program audit in 2014 on the Financial Aid program. The program audit noted repayments totaling $6,678 and other program improvement findings. The College developed and implemented corrective actions in 2015-16. The College's independent certified public accountant audits of the Financial Aid program noted no findings. The College monitors its unpaid student receivable accounts. The Board of Trustees receives updates on unpaid student accounts. The College reviews and updates, when appropriate, procedures focus on student financial responsibility. The Board of Trustees adopted a set of goals and objective

for 2016-17. One of the goals was focus on monitoring progress on delinquent accounts receivables. (III.D.10)

The College has developed an integrated budget planning system that considers both short-term and long-term financial needs. The College creates a three year forecast of revenues and expenditures as part of their budget. The Budget Planning Committee review enrollment forecasts. The College engages outside professional services to establish funding levels for their other post-employment benefits. The three year forecast take into account these funding levels. The three year forecast includes estimated increases from CalPERS and CalSTRS payments. The forecast is used to ensure reserves levels are adequate and comply with board policy. (III.D.11)

The College plans for and allocates resources for the payment of liabilities including other post-employment benefits (OPEB). The College budgets for and allocates resources annually towards their OPEB. The College has contributed more than 100% towards their annual required contribution. From fiscal year 2010-11 to 2015-16, the College has contributed more than 100% towards their annual required contribution. The College does not have an irrevocable trust however has set aside funds in a separate fund. The College plans to eventually transfer their OPEB funds into an irrevocable trust; however, no trust has been established. The College has established policies and procedures BP/AP 7340 to account for and monitor sick leave and other employee leaves balances. (III.D.12)

The College assesses and allocates adequate resources to for repayment of all locally incurred debt such as compensated absences and early retirement incentives. These debt instruments are paid from unrestricted general fund resources and are included in the budget. The College made a final payment on a certificate of participation (COP) totaling $56,200 during 2016-17, satisfying this obligation. (III.D.13)

The Business Office uses established policies, procedures, controls, and templates to assure the appropriate handling of financial resources. The College has established an internal control system and received an "unmodified/unqualified" audit opinion on the financial statements for fiscal years 2011-12, 2012-13, 2013-14, 2014-15, and 2015-16. No significant deficiencies or material weaknesses were identified in these audits. The College has received "clean" audits for the bond financial funds and performance audits ensuring bond funds were spent on the intended purpose of the funds. Departments manage the daily operations and reporting on grants funds and are reviewed by the Business Office. The Business Office monitors expenditures. (III.D.14)

The College monitors and manages compliance with student loan default rates, federal requirements including Title IV. The College's default rate for the three most recent fiscal years are well below federal requirements. The College's two most recent audit reports noted no instances of noncompliance with federal requirements. The Department of Education's website published the following default rate information for the College: College of the Redwoods Fiscal Year (FY) FY 2013, FY 2012, FY 2011 Default Rates are 22.7%, 23.8%, 24.7%. (III.D.15)

The College's contractual agreements with external entities are consistent with the mission and goals of the college. The College included copies of lease and contract templates. The College notes that contract templates include adequate standards and termination provisions. The Business Office reviews contracts for compliance to manage risk and maintain quality. Contracts not completed on standard templates, containing unusual risks, or uncommon terms are submitted to legal counsel for review. Contracts are summarized and submitted to the board for ratification. (III.D.16)

Conclusion

The College meets the Standard and related Eligibility Requirements except for Standards III.D.1, III.D.11.

<u>Recommendation for Compliance:</u>

Recommendation 7: In order to meet the standards, the team recommends that the college adopt budgets that match ongoing revenues and expenditures in the unrestricted general fund without the need to make significant draws on one-time resources or transfers from other funds. (III.D.1, III.D.11)

<u>Recommendation for Improvement:</u>

Recommendation 8: In order to improve, the team recommends that the college maintain adequate controls at all times to ensure financial integrity and provide dependable and timely information for sound decision making. This includes closing their books in a timely manner and submitting their audit reports in a timely manner. (III.D.5)

STANDARD IV
LEADERSHIP AND GOVERNANCE

Standard IV.A: Decision-Making Roles and Processes

General Observations
The College has a robust process for evaluating institutional effectiveness at the program and institutional level. The institution has implemented many innovations that were supported through their program review process and institutional effectiveness evaluation. The College had additional innovations that were mentioned in other parts of the Institutional Self-Evaluation Report that highlight the excellent work that is occurring through their evaluation of institutional effectiveness. The institution set standards help the College monitor student achievement and trigger interventions when the data show outcomes that do not meet the standard.

The College has policies and procedures in place that define participatory governance for the institution. Participatory governance committees at the College have membership from the administration, faculty, staff, and students. Recommendations from all committees are forwarded to the president for consideration. The program review process informs institutional planning through program evaluation. Administrators and faculty serve on all participatory governance committees, they collaborate on the approval of curriculum, and the two groups are represented on the program review committee that oversees the program review process. Policies and procedures are developed with the input of administrators and faculty that serve on Academic Senate, College Council, and the other committees where policies are reviewed and developed.

The program review process and the curriculum review process involve input and approval from faculty and administrators. The program review process includes all areas of the College and is the responsibility of faculty and administrators in the respective areas. The College has clearly defined processes that incorporate consideration of constituent group perspectives on decision making. Committee memberships include the appropriate constituent participants to ensure that the board and institutional governance is informed by their expertise.

The board complies with the Brown Act to ensure that the public and college community is informed of institutional decision making. The College maintains a committee handbook to inform the college community of the charge and membership of each committee. Information on current committee agendas and minutes are posted on the College webpage. The College uses institutional level reports to disseminate information on institutional processes and structures for decision-making. The College administrative leadership uses updates sent to the entire college community to keep all groups informed of decisions made through the participatory governance structures of the College. The CR Committee Digest that the College produces at least once a term gives a summary of actions taken by College committees, this is an excellent tool for disseminating the outcomes of decision making and planning that take place at the institution.

Findings and Evidence
The College has demonstrated that it supports innovations that lead to institutional excellence by supporting projects like the Curriculum Acceleration Project in both English and Mathematics, the Cap and Gown project, the Human Resources Onboarding Program, and the New Faculty Mentoring Program. The College supports new faculty participation in the New Faculty Mentoring program by offering stipends. Interviews conducted at the College revealed a three-pronged approach for basic skills student support that is funded through the College planning process and the attainment of grant support. The Transfer Task Force is an example of actions being taken to improve practices and services to promote institutional excellence through systematic participative processes. The student success summits provide a venue for fostering innovation that can be supported through the planning and program review process. Multiple innovations have been identified and implemented due to dialogue and planning that is a result of the summits. The actions taken demonstrate institutional support of improvement innovations for the integrated planning process. The institution's integrated planning process requires the completion of program reviews to request resources. Systematic participative processes are in place to support the planning and support of program innovations through program review and evaluation of institutional effectiveness. The assessment of programs and services show the commitment of the College to improving practices, programs, and services. The College provides the tools necessary to support improvements through the availability of program and service area data, in addition to the venues that make reflection possible. (IV.A.1)

The College has established policies and procedures that clearly outline the role of the constituent groups in participatory governance at College of the Redwoods. The College implements the policies and procedures through the structure of the planning committees and committees such as College council and the operational committees. Student participation in decision making is outlined in BP 2510, and AP 2510, student representation on key committees allows students to be involved in those matters of interest to the student experience. Interviews with the leadership of the Associated Students of College of the Redwoods indicates that students have a voice in decision-making, are invited to participate in the educational master planning process, were provided with an opportunity to give input into the ISER, and contribute to the evaluation of the services provided by the College. In AP 2510 the procedure indicates that the Board, "shall not take action on a matter having a significant effect on students unless they have been provided with an opportunity to participate in the recommendation process." All other constituent groups have a role that is described in AP 2510, through representation on committees. Recommendations from all groups (committees) are forwarded to the President. The program review process gives the faculty a voice in the planning process through the action plans that inform the annual plan and the operational plans. Through the program review process the Program Review committee creates a Program Review Committee Executive Summary that informs institutional planning through the IEC. (IV.A.2)

Administrators and faculty play key roles in institutional governance through the committee structures the College utilizes for participatory governance. Board policies and administrative procedures clearly define how participatory governance is implemented at the College (AP 2510). The committee membership indicates that Administrators, faculty, staff,

and students are represented in the decision-making structure of the College (Committee Handbook). There are many plans that are developed for the institution that address different programs and institutional level planning needs, these reports are captured in the IERs. Interviews with faculty, staff, and management at the College indicate that the college community is aware of the planning process and how decision-making occurs at the institution; these groups convey that there is collaboration amongst groups through this process and communication about outcomes is occurring. Various committees are responsible for the development of the plans and each of the planning committees has representation from each of the constituent groups at the College. The participation of the constituent groups on committees and task forces provide the institution with expertise from the various perspectives. (IV.A.3)

The curriculum routing procedure requires participation by faculty and academic administrators. Policies and procedures for the College ensure that faculty and academic administrators have responsibility for recommending to the board for adoption curriculum, programs, and services (AP 2510). According to AP 4020, a task force of both faculty, academic administrators, and an appointee by the President review new program proposals and make recommendations for the development of new programs. In AP 4021 the procedure for Program Revitalization, Suspension, or Discontinuation indicates that the task force formed to examine programs is composed of both faculty and academic administrators. Through the established policies and procedures recommendations and decision-making is aligned with faculty and administrative expertise. Institutional plans are created by participatory governance committees with participation from all constituent groups including faculty and academic administrators. College of the Redwoods tasks the College Council with developing policies and procedures that are developed and revised through the input of all constituent groups. (IV.A.4)

The College has clearly defined processes for ensuring that their committees have representatives from all constituent groups so that relevant perspectives are considered in the development of institutional plans, policies, and other considerations within the institution (Committee Handbook). Interviews with the leadership of the constituent groups indicate that they all have a voice in decision-making through the participatory governance committees at the College. Board policies and procedures have been established to ensure consideration of relevant perspectives in institutional planning, program evaluations, and the review and development of policies and procedures (BP 2510 and AP 2510). Utilizing the perspectives of the different constituent groups helps the College align decision-making with expertise to ensure appropriate perspectives have been considered. The Institutional Effectiveness Summits reflect the use of relevant perspectives to address key concerns that come up through program review action plans from all areas and for use in developing and updating the annual plan. The curriculum committee has representatives from faculty and staff that review curriculum using their areas of expertise to make recommendations for curriculum adoption to the Board. The development and review of curriculum is the responsibility of the faculty. Faculty have the primary responsibility for the review of academic programs through AP 4020 and AP 4021. (IV.A.5)

The College publishes agendas and minutes for subcommittees, committees, and the Board of Trustees as described in BP 2510 and AP 2510. The Board of Trustees agendas and minutes are published on the public webpage. The agendas and minutes for other committees are housed on the College webpage under the Faculty and Staff link. The college provides a Committee Handbook that describes the membership by constituent group and the charge of each committee to communicate the role of each committee at the College. This is an excellent to support an understanding of decision making at the College. Board of Trustees meetings provide a venue for constituent groups to report on their work and these reports are recorded in the minutes. The Board meetings are open to the public and provide college stakeholders with reports on decision-making at the College. The College produces the CR Committee Digest to report on the activities of the participatory governance committees, the CR Committee Digest is sent out to the college community using email communications at least once a term. This is a great tool for disseminating the outcomes of College decision-making. The IERs provide a review of the planning process and provide for an understanding of how planning and decision-making occurs at the College. The IERs are shared widely across the College and serve as the basis for the dialogue about institutional effectiveness that occurs at the Institutional Effectiveness Summits. (IV.A.6)

The College publishes an evaluation of the effectiveness of the integrated planning process in the yearly IERs. Interviewing the IEC revealed that the IERs are developed by the co-chair of the IEC by pulling from the student achievement data and the survey used to evaluate committee effectiveness. The IERs also include a review of the program review process which is conducted with input from the Program Review Committee. The Institutional Effectiveness Summits provide a venue for discussing improvements in College processes after reflecting on the evaluation results in the IERs (IEC interview). Included in the IERs is the Program Review Committee (PRC) evaluation of the program review process. The PRC uses the evaluation to make changes that are designed to improve the program review process for the College. The IERs are disseminated widely at the College, are available on the college website, and all college constituents are welcome to participate in the summits. The College Council reviews policies and procedures and implements appropriate updates with the input of college constituent groups. Evaluation of the President and the Board of Trustees is described in board policy and evaluation processes exist for administrators and faculty that ensures that college leadership are evaluated regularly to ensure integrity and effectiveness (BP 2435, AP 2435, BP 2745, and AP 2745; Administration Evaluation Schedule; Faculty contract). The College improvement of the curriculum submission form and routing procedure demonstrate the commitment to evaluation and improvement for making more effective processes. The Academic Senate performs a yearly evaluation during their planning retreat to evaluate progress on the goals and actions from the previous year and to set new goals. Through program review of service and administrative areas the administrative structure of the College is evaluated. All the results of these evaluations are disseminated through the posting of minutes, the CR Committee Digest, e-mail communications from college leadership, and the Board agendas and minutes. The role of the committees is summarized in the Committee Handbook which is an excellent resource

that supports an understanding of how the evaluation of institutional effectiveness is conducted at the College. The College is committed to regular evaluation of college leadership, planning processes, and governance structures where decision making occurs to ensure their integrity and effectiveness. (IV.A.7)

Conclusion
The College meets this Standard.

<u>Commendations:</u>
See Commendation 2

Commendation 5: The College is commended for its annual institutional Effectiveness Summit and an excellent vehicle for dialog and reflection focusing on institutional-level data, integrated planning processes, and the achievement of its mission. (IV.A.5, IV.A.6, IV.A.7)

Commendation 6: The College is commended for the CR Digest, a newsletter publicizing pertinent information from the campus committees. (IV.A.6, IV.A.7)

Commendation 7: The College is commended for the Committee Handbook which documents membership, scope, and terms and most noteworthy is the alignment of committee function to the ACCJC standards. (IV.A.6, IV.A.7)

Standard IV.B: Chief Executive Officer

General Observations

The president/superintendent serves as the institutional chief executive officer and has been delegated the authority to ensure the quality of the institution. The College has established administrative and participatory governance structures, board policies, and administrative procedures which allow for the president to provide effective leadership in planning, organizing, and assessing institutional effectiveness.

The president has been given the authority and responsibility for implementing and evaluating the administrative structure of the college through board policy. A recent reorganization of the administrative structure demonstrates that the president acts to ensure that the administrative structure continues to meet the needs of the institution.

The president guides the institution to fulfill its mission through the established Integrated Planning Model which places learning outcomes and program review at the core of planning and evaluation processes. The President serves as the Chair of the Institutional Effectiveness Committee guiding the planning model. A collegial process is built into the model for setting values, goals, and priorities as well as evaluation of effectiveness. The program review process provides for the integration of educational planning with resource allocation. Institution set standards are used to identify areas of improvement with triggers that initiate focused work by the institution to improve student achievement.

The president has the responsibility to ensure that the institution meets accreditation requirements under established board policies. With the leadership of the president, the institution has identified the responsible cabinet member, employees, and committees/groups for each standard. The participatory governance structure ensures that faculty, staff, and administrative leaders share the responsibility for complying with accreditation requirement. The president ensures compliance with all system requirements, accreditation requirements, and institutional policies through the administrative structure of the college that the board grants the authority to the CEO to implement.

The president along with college leadership ensure that practices within the institution are aligned with the mission and established policies through collegial consultation and review by all constituent groups. The program review process provides for alignment with the mission and plans of the institution. Control of the budget and expenditures is achieved through delegation to administrative leaders and oversight within the organizational structure of the institution.

The president utilizes many approaches for maintaining communication within the institution and with the communities served by the institution. The president's blog provides open communication of important information from the president to the public. The president holds ongoing meetings with educational leaders and participates in local community organizations to further effective communication.

Findings and Evidence

The chief executive officer at this institution is the president/superintendent. To ensure that the president has primary responsibility for the quality of the institution, he serves on a variety of committees that are charged with planning, budgeting, and organizing the administrative work at the college (committee handbook, President's Goals). As the chair of the Institutional Effectiveness Committee, he provides leadership in planning for the college (IEC charge). The president chairs the top policy making committee, the College Council, charged with updating and reviewing policies and procedures that provide the structure for operations at the college. The president also chairs the Executive Cabinet and Expanded Cabinet with leadership from across college constituencies to address college-wide issues and ensure that college plans and processes are administered as intended to ensure effectiveness.

The president has delegated the selection and development of personnel to the appropriate leadership. Evaluation of top level administrators such as the vice presidents, director of human resources, and the director of institutional research & planning are the responsibility of the president. The final decision on the selection of all administrators, faculty, and staff is ultimately the president's decision. The president has delegated authority for the development of personnel to the appropriate college leadership to ensure the expertise of the institution is utilized to support personnel development (Convocation Institutional Planning, Faculty Orientation Program). The Board delegate's authority to the president to implement and administer the policies they adopt, this is described in BP 2430 and BP 7110. The president executes this authority by delegating the oversight to appropriate administrators for the development of various institutional plans. The president oversees development of the budget (BP 6200, BP 6300). (IV.B.1)

The board gives the president the authority to develop and implement an organizational structure and assign staff within that structure (BP 3100). The president has established an organizational structure that provides for the administration of the programs and services offered by the college (Organization charts). The president delegates the authority given to him by the board to the administrative organization of the college. The duties and responsibilities for each administrative position indicate how the president has delegated his authority. Each position within the administrative structure has clearly defined duties, responsibilities, and qualifications in outlined job descriptions. Administrators and staff are held responsible for their work through an established evaluation process. Revisions to the organizational structure occurred in 2015 and 2016 which demonstrate the use of established processes to make adjustments to better reflect the institution's purpose and size. (IV.B.2)

The college has policies and procedures in place that have delegated the authority to the president to establish a planning process where values, goals, and priorities are identified. The integrated planning process at the college tasks the Institutional Effectiveness Committee (IEC) with developing annual plans and assessing planning processes for improvement. The IEC develops an annual Institutional Effectiveness Report, including a student success scorecard with institutional set standards and student achievement indicators.

The Office of Institutional Research provides actionable data on student achievement and outcomes, data for programs review, and institutional level data and appropriate reports. Through the program review process, the college ensures that educational planning is integrated with resource planning and allocation with student learning and achievement data as the basis for evaluation. (IV.B.3)

The president is given the responsibility for assuring the college meets accreditation requirements through the authority and charge conferred upon the position (BP 3200). The president demonstrates leadership in accreditation through his participation in the process and the delegation of participation in accreditation to his administrative team. The president takes the leadership role by working with the cabinet to determine the member responsible for each standard, the employees responsible for each standard, and the committees/groups responsible for each standard. The president is the responsible cabinet member for multiple standards. The membership of the Accreditation Oversight Committee shows that leaders from all constituent groups are involved in the accreditation process. The Academic Senate at the college participates in the review of the ISER as evidenced by the meeting minutes and the signature on the certification page of the ISER. The involvement of the broader college community to ensure the college meets eligibility requirements, accreditation standards, and the commissions policies is achieved through the participatory governance structure the college has created. Faculty, staff, and administrators share responsibility for compliance with accreditation requirements through their participation in program evaluation, planning, and collaboration on the assessment of student learning. (IV.B.4)

The board delegates authority to the president to ensure compliance with laws and regulations by taking the appropriate administrative actions (BP 2430). The president ensures that the college maintains institutional practices that are consistent with its mission and policies by program evaluation that occurs through its program review process and through evaluation of its processes and procedures (program review reports). College council reviews college policies and procedures with input from appropriate committees and external advisory groups such as the Community College League of California (CCLC). Board policy ensures that each year the president develops a budget that meets regulations and has a timeline for review by the board (BP 6200). Administrative leadership provides for control of the budget and expenditures (organization chart).   The oversight provided by the Budget Committee, the president, and the board ensures effectiveness. Resource allocation is tied to program review which requires programs to align with the institutional mission and policies (program review reports). (IV.B.5)

The president's goals show a commitment to work with the community the college serves. The president makes a blog available to the public on the college webpage that communicates to the public current events at the college. The blog includes acknowledgement of current issues for students and the community, board meeting updates, and items such as the Redwoods Athletic Spring 2017 Honor Roll. The president participates in the work of community organizations in the community and the CEO meets with

educational leaders from the different educational segments to work on issues of mutual concern. (IV.B.6)

Conclusion

The College meets this Standard.

Standard IV.C: Governing Board

General Observations
The Governing Board consists of eight members and one student member. Through extensive involvement in activities at the local, regional, and state level, the Governing Board stays informed about concerns and issues relevant to governing College of the Redwoods. This involvement enhances Governing Board members' understanding of education policy and practice.

Through establishing policies aligned with the College's mission statement, the Governing Board has ultimate authority for educational quality, legal matters, and financial integrity. The Governing Board assures the quality, integrity and effectiveness of student learning programs and services by publishing its policies, protocols, and code of ethics; participating in professional development; assessing its own performance, staying informed and involved with accreditation, and selecting and evaluating the superintendent/president.

The superintendent/president reports directly to the Governing Board and has delegated authority to implement and administer board policies. The superintendent/president is held accountable for the operations of the College through regular performance evaluations.

Findings and Evidence
BP 2200: Board Duties and Responsibilities, established that the Governing Board has 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. Additionally, BP 2510; Shared Governance outlines the Boards commitment to participatory governance.   Evidence of the Governing Board's authority and responsibility is found in meeting calendars, meeting agendas, supporting documents, reports, and meeting minutes. (IV.C.1)

BP 2715: Governing Board Code of Ethics/Standards of Practice requires Board members to "abide by and uphold the final majority decision of the Board" and to "understand and remember that individual Board members have no legal authority to represent the College outside of Board meetings." BP 2715 outlines a method of censuring board members for misconduct if needed, however the team found no evidence that an individual Governing Board member did not support a decision of the Governing Board. A review of Board meeting minutes reveals a united board that frequently votes unanimously on key issues. (IV.C.2)

BP 2200: Board Duties and Responsibilities, authorized the Governing Board to select, appoint, and evaluate the superintendent/president of the College. The process for the evaluation of the superintendent/president is prescribed in the superintendent/presidents employment contract. The process calls for constituent group feedback that is reviewed and discussed by the Board. (IV.C.3)

BP 2208: Board Duties and Responsibilities sets forth the responsibility of the Governing Board to advocate for and defend the institution, protecting it from undue influence or

political pressure. The Board has demonstrated that it is an independent, policy-making body that reflects the public interest in the institution's educational quality. The role of the Governing Board as an independent policy-making body is consistently demonstrated through review, development, and approval of new and revised district policies. It advocates for and defends the institution and protects it from undue influence or political pressure. BP 2715: Code of Ethics/Standards of Practice calls on each Board member to "resist every pressure and temptation to use their position as a Board member to benefit either themselves or any individual or agency apart from the welfare of the college district." (IV.C.4).

BP 2410: Board Policies and Administrative Procedures establish the process for review, development, and approval of BP's and AR's. The governing board establishes policies consistent with the college mission statement to ensure the quality, integrity, and improvement of student learning programs and services and the resources necessary to support them. (IV.C.5)

Several policies specify the Governing Board's size, duties, responsibilities, structure, and operating procedures. These policies are published on the College's web site under Chapter 2 – Board of Trustees. (IV.C.6)

Governing Board policies and administrative procedures are developed, reviewed, and/or modified through the process outlined in BP/AP 2410: Board Policy and Administrative Procedures. The College subscribed to the board policies and procedures service offered by the California Community College League (CCLC) to have access to sample policies with legally recommended language since 2005. The team found no inconsistency between Governing Board actions and its policies. (IV.C.7)

The Board is made aware of and reviews the key indicators of student learning and achievement annually through presentations on the California Community Colleges' Scorecard as well as other presentations on establishes student success measures. The board is being kept appraised of ongoing progress through regular presentations from Institutional Research. (IV.C.8)

BP 2740: Board of Trustees Professional Development establishes policy for ongoing professional development of Governing Board Members including orientation for new members.

BP 2100: Board Elections and EXH 2100 Map of Trustees Districts, and BP 2200 Board Duties and Responsibilities establishes policies for insuring continuity of board membership and staggered terms of office. (IV.C.9)

BP 2745: Board Self Evaluation clearly defines the Board's self-evaluation process for assessing the board's effectiveness. The process provides for an evaluation every year. The Boards self-evaluation results in the development of goals, objective and identification of professional development needs. The results of the Governing Boards self-evaluation are made public. The Board is involved in ongoing training through the Community College League of California.   (IV.C.10)

BP 2715 Code of Ethics provides a code of ethics for the Governing Board and includes a clearly defined process for handling violations of the code. BP 2710: Conflict of Interest, establishes a conflict of interest policy. The team found no evidence of any violations of the code of ethics or the conflict of interest policy. (IV.C.11)

B P 2430: Delegation of Authority to President/Superintendent delegates full responsibility and authority to implement policies and is accountable for the operations of the College. BP 2435 Evaluation of President/Superintendent provides for holding the superintendent/president accountable by the Governing Board through regular performance evaluations and the establishment of goals related to the operation of the College to the superintendent/president as the chief executive officer of the institution. (IV.C.12)

The Board has demonstrated engagement with accreditation through receiving regular reports about accreditation progress, participating in the institutional self-evaluation for Standard IV and participating in training workshops related to accreditation. The Governing Board reviews and approves the Institutional Self Evaluation Report, and substantive change proposals. The Board's self-evaluation included items related to its roles and functions in the accreditation process. (IV.C.13)

Conclusion
The College meets the Standard and related Eligibility Requirements.

Redwoods Community College District
Quality Focus Essay Feedback

The college has determined two areas of need that the institution will be working on with a targeted improvement plan. The college determined there was a need to address a shortfall in student transfers to four-year institutions that was revealed through the institutional effectiveness data. The pattern of decreasing transfers was observed started from 2015 and declining below the institution set standard in 2016-2017. Faculty and staff have investigated potential reasons for the decline in transfer numbers and identified potential contributing factors such as the decline in enrollment at the institution overall. The dialogue about the declining transfer numbers produced a number of suggestions and actions the institution could implement to reverse the trend. The college convened the Transfer Task Force to monitor the progress of the initiatives.

The initiatives that were implemented include curriculum alignment meetings, visits from Humboldt State University (HSU) faculty to College of the Redwoods classes, visits to Humboldt, and the development of materials to promote the Associate Degrees for Transfer. The success of these initiatives will be monitored by the Transfer Task Force and further data analysis and research will be used to identify impactful actions to be implemented in the 2018-2019 school year. An additional aspect of the improvement plan will be to strengthen the Transfer Center through additional resources so that effective actions can be sustained. An update on the progress of the plan that was provided during the site visit indicated that HSU had decided to fund a position that would be responsible for monitoring and administering the actions taken to increase transfers to HSU. The position work location would be at the College of the Redwoods main campus; this represents evidence of the collaborative work that began as a result of the institutional effectiveness process at the college. The project is well aligned with the college mission and values by using assessment to promote student learning.

The second area of need that the institution has identified is in supporting its commitment to diversity. In order to nurture the importance of "Multicultural Understanding", a general education area was developed in 2014-2015 and in 2017 the updated Equal Employment Opportunity Plan included 4 actions that would be taken to address increasing diversity in hiring outcomes, screening committees, training for faculty and staff, and increasing representation of underrepresented groups for the faculty and staff at the institution. The institutional effectiveness data (student scorecard) has also identified areas where actions should be taken to address achievement gaps or access for students coming from different demographic subgroups.

The college implemented action plans that were identified through the student equity plan that have helped to address the achievement gaps. Examples of the actions include increasing outreach activities in the Del Norte service area, the Cap and Gown program that serves student athletes that represent larger numbers of underrepresented students, and the creation of a Multicultural Center. The institution has further actions to implement from the 2015-2018 Student Equity Plan. The college recognizes that progress has been made in shrinking the achievement gaps but despite the efforts taken the gaps persist.

The institution would like to ensure further support of the actions that will be taken to address persistent achievement gaps by increasing integration among the existing plans of the college where the goal or potential for supporting student equity already exists. Increasing integration among the groups and committees where responsibility for such plans resides and where resources are allocated in support of increasing student equity is the approach the college will take to address this area of need. The college has a plan to determine the structure that will ensure the integration of ongoing planning, identify where plans overlap, find gaps in the plans for addressing student equity, expand on actions within the plans to target student equity, and ultimately incorporate the expanded plan into the annual planning process. These actions are scheduled to take place beginning in 2017 and work will continue through 2019. The college has identified there is a disconnect between course offering that meet the general education area designed to address multicultural understanding and will be working on alignment of curriculum offerings with that area. The student equity work that the college has proposed demonstrates the commitment to diversity that is part of the mission and planning goals of the college.