Evaluation Team Report

Imperial Valley College

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A Confidential Report prepared for

The Accrediting Commission for Community and Junior Colleges

Western Association of Schools and Colleges

This report represents the findings of the evaluation team that visited Imperial Valley College from March $11-14,\,2013$

Dr. Susan B. Clifford, Team Chair

Imperial Valley College

Evaluation Team Roster

March 11 - 14, 2013

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*Note: Dr. Susan B. Clifford replaced Mr. Randall C. Lawrence (Superintendent/President, College of the Siskiyous) as chair due to a family emergency.

SUMMARY OF EVALUATION REPORT

This report represents the findings, based on a review of evidence provided by Imperial Valley College (IVC), of an accreditation team of eight members that visited the institution on March 11-14, 2013. The comprehensive evaluation visit was conducted as part of the institution's application for reaffirmation of accreditation from the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges. For this report the visiting team chose to include general observations with findings and evidence in order to make conclusions about the institution's compliance with Eligibility Requirements, Accreditation Standards and Commission policies.

The College was prepared for the visit and coordinated numerous interviews and committee meetings for team members to attend. Team members were provided evidence online and in the team room as requested. Administrators, Board members, faculty and students and community members were available for interviews. The visiting team found the members of the College community to be dedicated to providing the visiting team with the information requested and committed to the accreditation process and the purpose of the visit.

Major Findings and Recommendations of the 2013 Visit

After carefully reading the Institutional Self Evaluation Report, examining evidence, interviewing College personnel and students, and discussing the findings in light of the Accrediting Commission for Community and Junior Colleges of the Western Association of Schools and Colleges Standards, the team offers the following recommendations to Imperial Valley College.

Recommendations

Recommendation 1 In order to fully meet the Standard, the team recommends that the College consistently link the institutional goals and objectives detailed in the Educational Master Plan with operational plan goals and resource allocations, including technology resources, in order to assess progress toward meeting institutional goals. In addition, the College should establish a planning calendar that identifies all planning activities, committees, and the roles of various College plans, and includes institutional effectiveness assessment and improvement cycles. (I.B .3, II.C.1b, IV.A.5)

Recommendation 2 Given that the College has a new integrated planning model and recent growth in assessment of outcomes, the team recommends that in order to increase effectiveness the College focus its evaluation and global assessment efforts on determining how well the new model and recently collected assessments contribute to institutional improvement. In addition, the team recommends that the College 1) ground its decisions on sound data analysis; 2) evaluate its institutional quality by way of benchmarking and other

comparison data, and 3) establish minimal standards of institutional quality and goals for institutional improvement. (I.B. 5 and 7, II.A.1c, II.A.2.f)

Recommendation 3 In order to increase effectiveness, the team recommends that the College include a feedback mechanism to faculty on their assessment methods and that the College encourage use of multiple indices of assessment. (II.A.1.c)

Recommendation 4 In order to increase effectiveness, the team recommends that the College integrate the program and resource evaluation process into other planning processes of the College and complete the assessment cycle for program learning outcomes and ensure they are continually aligned with student learning outcomes and institutional learning outcomes. (II. A.2.f and i)

Recommendation 5 In order to increase effectiveness, the team recommends the College 1) provide further professional development about information literacy so that it is better understood and applied by faculty in their instruction and that information literacy is better integrated into the College's instructional planning and practices; 2) provide quality training in the effective application of its information technology to students and personnel, and 3) move forward with planning, implementing and evaluating for improvement, the professional development activities to meet the needs of its personnel. (II.C.1.b, III.A.5. a and b, III.C.1.b)

Recommendation 6 In order to increase effectiveness, the team recommends that the College establish a systematic plan for evaluation of the library and learning services, beyond student surveys that address use and access, to include evaluation of the relationship of the services to intended student learning and that it include input by faculty and staff. (II.C. 2)

Recommendation 7 In order to meet the Standard the team recommends that faculty and others directly responsible for student progress toward achieving student learning outcomes, have as a component of their evaluation, effectiveness in producing those outcomes. (III.A.1.c)

Recommendation 8 In order to meet the Standard, the team recommends the College develop a financial strategy that will result in balanced budgets that have ongoing revenues to meet or exceed its ongoing expenditures without the use of reserves; maintain the minimum prudent reserve level; and address funding for its long term financial commitments and its retiree health benefits costs. (III.D.1.a, III.D.3.a, and III.D.4, IV.B.1.c, IV.B.2.d)

Commendations

Commendation 1 There are many examples of partnerships that advance the College mission to be responsive to the community: the visioning process with the community, the Bus Transfer Terminal, and the partnership with San Diego State University, to mention a few.

- **Commendation 2** New buildings are constructed to Leadership in Environmental Engineering and Design (LEED) standards. The new Science Building has been awarded LEED Silver.
- **Commendation 3** It was clear to the visiting team that despite the fiscal challenges the College is overcoming, the central focus of the Board, administrators, faculty, staff and students is educational quality, student success and achievement. This was evident during team member interviews, observance of committee meetings, IVC educational projects and communications, e.g., the College Catalog.
- **Commendation 4** The visiting team noted that the College voluntarily invited the Fiscal and Crisis Management Assistance Team (FCMAT) when it identified fiscal issues and then immediately began a college wide dialogue communicating and working toward meeting the FCMAT recommendations.

ACCREDITATION EVALUATION REPORT

for

Imperial Valley College

Introduction

Imperial Valley College (IVC) celebrated its 50th anniversary in 2012. The opening of the IVC campus in September of 1962 was the culmination of years of hard work by visionary citizens who financed and built a freestanding community college in Imperial County.

The passage of two bond measures (in 2004 and 2010), provided funds to add facilities as IVC redefines itself as an institution committed to both sustainability and mobility for future generations.

The most significant new building in this expansion is the 2700 building. It is a 70,000 square foot, two-story, classroom and laboratory building that opened to students in January 2010. This building became the first LEED certified science building (silver) in Southern California and the first publicly-owned LEED certified building in Imperial County.

Transportation improvements have been funded in partnership with the U.S. Department of Transportation and the Imperial County Transportation Commission (ICTC). IVC and the ICTC have partnered to develop new transit centers on campus which have improved the safety and security of transit riders.

IVC is located east of the city of Imperial on a 160-acre plot next to Highway 111, the main north-south route into Mexicali, Baja California, Mexico. The campus sits at the center of

Imperial County and is within reasonable commuting distance of all communities in the Valley. The College currently does not have any off campus instructional sites.

The Imperial Community College District includes all of Imperial County except a small area in the northwest corner that is a part of the Desert Community College District. Over time, IVC has grown and adapted to meet the circumstances and challenges of a changing region. Serving the post-secondary educational needs of the community has remained the core responsibility through this half century.

IVC today serves a county of 175,000 residents over a rural, agriculture-based area comprising more than 4,600 square miles. The college enrolls approximately 8,000 students each semester, receiving graduates from seven feeder high school districts. Approximately 62 percent of the graduating seniors enroll at IVC immediately after graduation.

Over the years, IVC's mix of students has changed to reflect the demographic and economic base of its service area. Today more than 80 percent of its students are Latino, and many are first generation college students.

The economic base of Imperial County has also been in transition. Fifty years ago, Imperial County was primarily an agricultural region. While agriculture is still a significant industry, the region's top employers today are in various governmental sectors. Within the past three years, there has been a burgeoning renewable energy industry including solar, wind, and geothermal power producing plants.

Imperial Valley College plays a critical role in providing a trained workforce for an area that has been called the "Capital of the Great Recession." This region's unemployment rate has consistently been the highest in United States over the past four years, upwards of 30%.

Like most community colleges, IVC has experienced rapid growth coupled with declining fiscal resources since 2004. In 2009, a Strategic Plan was developed that prioritized short-term and long-term goals of the institution. The plan established priorities and designated resources for achieving those priorities. The strategic planning process also updated the IVC Facilities Master Plan. This all-inclusive framework enables the college to identify the most critical and campus-wide priorities and strategic goals.

As the campus community looks forward to 2013, Imperial Valley College still occupies 160 acres of former farmland that itself was reclaimed from the empty desert in the first decades of the 20th century. Today IVC is an oasis of learning, an attractive, inviting campus where students have access to cutting edge, broad-band wireless service parking lot to parking lot and cloud-based computing. Its staff works hard to bring the same inviting atmosphere into each classroom, and looks forward to celebrating another 50 years of educational leadership for Imperial County.

Evaluation of Institutional Responses to 2007 Recommendations

Recommendation 1 The team recommends the college take action to incorporate program review and comprehensive master planning (educational, facilities, technology, & resource plans) with systematic planning and budgeting processes to effectively align college resources with priority college goals. (I.B.3, II.A.2.a, II.B.4. II.C.2, III.C.2, III.D.1, III.D.1.a, IV.A, IV.A.6.)

The College has made substantial progress in implementing and assessing planning models, revising those models, and moving toward an integrated planning process. The College conducts a thorough community visioning process involving public forums and focus groups that serves as the foundation of its strategic plan. In addition, educational master planning processes are now supported by the Educational Master Planning Committee, a large and broad representative group, which is working toward uniting program review with resource allocation and institutional goals. Through the annually-updated Educational Master Plan, prioritized funding requests from Resource Plans now must align with College wide goals.

The College has partially met this recommendation. Please see the 2013 visiting team's Recommendations 1, 5 and 8.

Recommendation 2 The team recommends that college develop student learning outcomes by describing how student learning outcomes will be extended throughout the institution, developing a specific timeline for development that includes establishment of authentic assessment strategies for assessing student learning outcomes in courses, programs, and degrees, describing how resource allocation will be tied to student learning outcomes, and developing a plan for how faculty and staff will become fully engaged in student learning outcomes development. The institution must also demonstrate its effectiveness by providing evidence of achievement in student learning outcomes and evidence of institutional and program performance. (II.A, IV.A, I.B, II.B.4, I.B.5, II.C, III.A.1.c)

Imperial Valley College has developed and implemented multiple processes, activities and committees for engaging faculty and staff in the process of the development and assessment student learning outcomes. However, III.A.1.c is being carried forward as unmet by the 2013 visiting team.

The College has partially met this recommendation. Please see the 2013 visiting team's Recommendation 7.

Recommendation 3 The team recommends that college publications, including the general college catalog, be reviewed to ensure that information important to students is readily available. The college's Sexual Harassment Policy needs to be explicitly noted,

the policy for accepting transfer credit and the description of the availability of financial aid both need to be located so as to be more visible to current and prospective students. (II.B.2.a; II.B.2.c)

The 2013 visiting team commends Imperial Valley College for the clarity and accuracy of the information provided in the College catalog, as well as other communications to and for students and the public.

The College has met this recommendation.

Recommendation 4 The team recommends that the college identify and assess Student Learning Outcomes and Assessment Outcomes for all Student Services Areas to include categorically funded state and federal programs. (II.B.4)

The team reviewed the program review from each Student Services unit and found evidence, that each unit in student services assures the quality of student development and support services and demonstrates that these services, regardless of location, enhance achievement of the mission of the institution and support student learning. Every unit had identified Service Area Outcomes (SAO). The Dean and Vice President of Student Services reviewed each Program Review.

Lastly, the team found that all units conducted a survey to evaluate program services, customer satisfaction, and need for additional services. The team found that although the institution has put their distance education (DE) program on hold, when it was in existence the College had a counselor tasked with assuring that DE students had equivalent access to student services as students attending courses on campus.

The College has met this recommendation.

Recommendation 5 The team recommends the college develop a process to assess, review and modify the Technology Plan as the educational needs and programs develop in order to support a college master plan. It is also recommended that the plan be aligned with college budgeting processes and staffing. (III.C.2)(III.C.1)(III.C.1.a)(III.C.1.2)(III.D.1.a)(II.B.3)

Based on the current model, educational master planning (EMP) at the College is informed, in part, by eight resource planning committees. Resource Plans are attached to the EMP document as appendices and summarized in the main body of the EMP. However, these documents represent committee reports which summarize committee goals and prioritized resource lists. And the plans vary in quality and content. With the exception of the Comprehensive Technology Plan, no current long-term resource plans could be found, although it appears that updates to some plans are under discussion.

The College should make explicit how programs and resource plans are linked to institutional goals, how institutional goals are linked to the strategic plan, and how learning and service area outcomes inform educational master planning to achieve a more integrated planning and resource allocation model. The final goal of a comprehensive and integrated planning model should be the assessment of those goals in terms of their achievement and, ultimately, their improvement of the institution. The College should continue its work toward this ultimate aim.

The College has partially met this recommendation. The 2013 visiting team addresses the unmet items in Recommendations 1 and 8.

Recommendation 6 To enhance the effectiveness of the governance and decision-making processes, the team recommends that the college define in writing the roles of the committees and the decision making structures and processes; that the college develop a process to evaluate them and use the results of evaluation for improvement. (IV.A.2, IV.A.5)

The College describes its program review processes as evolving. In fact, the College's current processes for program review and resource allocation were adopted after the Self Evaluation Report was composed. It is clear that the College is working to adopt processes that promote institutional effectiveness. Specifically, the College, through its Annual Program Review (APR) and Comprehensive Program Review (CPR) processes, has incorporated programmatic review with the budget allocation processes. The Self Evaluation Report provided evidence of an annual form that departments use to make resource requests. Interviews and evidence provided on-site demonstrate that the College has continually reviewed and revised this process; they recently revised the program review process, changing the procedure from an alternating annual review for resource requests and a three-year program review to an integrated one-year process that evaluates both review of programs and budget resource requests.

However, these processes have not yet stabilized, lacking a full cycle of evaluation, assessment, and improvement as well as strong and consistent linkages with College wide goals and improvement plans based on student learning and service area outcomes.

The College has partially met this recommendation. Please see the 2013 visiting team Recommendation 1.

Eligibility Requirements

1. Authority

The institution is authorized or licensed to operate as an educational institution and to award degrees by an appropriate governmental organization or agency as required by each of the jurisdictions or regions in which it operates.

Imperial Valley College is a public, two-year community college operating under the authority of the State of California, the Board of Governors of the California Community Colleges, and the Board of Trustees of the Imperial Community College District. Imperial Valley College is accredited by the Accrediting Commission for Community and Junior Colleges of the Western Association of Schools and Colleges and has program approval or program accreditation by the American Welding Society, California Association of Alcohol and Drug Educators, California Board of Registered Nursing, California Board of Vocational Nurse and Psychiatric Examiners, Commission on Accreditation of Allied Health Education Programs, Commission on Peace Officers Standards and Training, California State Department of Education, and National Academy of Early Childhood Programs.

2. Mission

The institution's educational mission is clearly defined, adopted, and published by its governing board consistent with its legal authorization, and is appropriate to a degree-granting institution of higher education and the constituency it seeks to serve. The mission statement defines institutional commitment to achieving student learning.

The mission of Imperial Valley College is "to foster excellence in education that challenges students of every background to develop their intellect, character, and abilities; to assist students in achieving their educational and career goals; and to be responsive to the greater community." The mission statement is published in the General Catalog, on program review and planning documents, and on our college website. It is reviewed regularly, updated, and presented to the Board of Trustees for approval.

3. Governing Board

The institution has a functioning governing board responsible for the quality, integrity, and financial stability of the institution and for ensuring that the institution's mission is being carried out. This board is ultimately responsible for ensuring that the financial resources of the institution are used to provide a sound educational program. Its membership is sufficient in size and composition to fulfill all board responsibilities.

A seven-member Board of Trustees is elected by district, and each Board member represents one of seven high school districts within the Imperial Community College District which governs Imperial Valley College. The board is an independent, policy-making body, capable of reflecting constituent and public interest in board activities and decisions. The board members have no employment, family, or personal financial interest in the institution. A conflict-of-interest policy assures that any interests are disclosed and that they do not interfere with the impartiality of the governing body members.

4. Chief Executive Officer

The institution has a chief executive officer appointed by the governing board, whose full-time responsibility is to the institution, and who possesses the requisite authority to administer board policies. Neither the district/system chief executive officer nor the institutional chief executive officer may serve as the chair of the governing board. The institution informs the Commission immediately when there is a change in the institutional chief executive officer.

The Board selects and employs a chief executive officer through a broad-based hiring committee which screens and interviews candidates and recommends to the Board. The chief executive officer, whose primary responsibility is to the institution, possesses the authority to administer board policies. The Board appointed an Interim Superintendent/President effective July 1, 2011; he has served as Superintendent/President since July 1, 2012, and was currently serving during the time of the visit.

5. Administrative Capacity

The institution has sufficient staff, with appropriate preparation and experience to provide the administrative services necessary to support its mission and purpose.

Imperial Valley College, in its policies and procedures, has always maintained that the hiring of qualified staff with appropriate preparation and experience is of prime importance. The institution has sufficient staff to provide the administrative services necessary to support its mission and purpose.

6. Operational Status

The institution is operational, with students actively pursuing its degree programs.

Imperial Valley College has operated as an independent district continuously since 1959. Students are enrolled in a variety of courses that lead to certificates, associate degrees, and transfer. The majority of courses are transferable and the curriculum is comprehensive.

7. Degrees

A substantial portion of the institution's educational offerings are programs that lead to degrees, and a significant proportion of its students must be enrolled in them.

Imperial Valley College offers a total of 71 degree programs including 8 transfer majors, and 55 certificate programs. In 2011-2012, 76% of total students were enrolled in program applicable courses. Since academic year 2006-2007, the College has awarded 3,256 degrees and 1,340 certificates to students completing programs of study.

8. Educational Programs

The institution's principal degrees programs are congruent with its mission, are based on recognized higher education field(s) of study, are of sufficient content and length, are conducted at levels of quality and rigor appropriate to the degrees offered, and culminate in identified student outcomes. At least one degree program must be of two academic years in length.

Imperial Valley College's degree programs are congruent with its mission, are based on recognized higher education field(s) of study, are of sufficient content and length, and are conducted at levels of quality and rigor appropriate to the degrees offered. Every course outline contains course outcomes that are achieved through class content, assignments, and activities. Each degree program and certificate program has identified student learning outcomes which serve as the standard for review of student achievement.

9. Academic Credit

The institution awards academic credits based on generally accepted practices in degree granting institutions of higher education. Public institutions governed by statutory or system regulatory requirements provide appropriate information about the awarding of academic credit.

Imperial Valley College awards academic credits based on generally accepted practices in degree-granting institutions of higher education. Credit policies are published in the college catalog; credit is assigned to courses based on the "Carnegie Unit" formula which requires three hours of student work per week, either in or out of class, over an 18 week term, for three units of credit. The College Curriculum Committee reviews all courses to ensure compliance with applicable regulatory requirements.

10. Student Learning Achievement

The institution defines and publishes for each program the program's expected student learning and achievement outcomes. Through regular and systematic assessment, it

demonstrates that students who complete programs, no matter where or how they are offered, achieve these outcomes.

Every Course Outline of Record (COR) currently includes learning objectives and student learning outcomes that are assessed through a variety of methods including exams, assignments, and other instructional methodology. The department faculty, department chairperson, and division dean assure that the course outline is followed regardless of the location or method of delivery. Review of course outlines also takes place through the program review and planning process, the Curriculum Committee, and the articulation process. In addition, a systematic plan for continuous program quality improvement to assess student learning outcomes for courses and programs and service areas has been developed by the College.

11. General Education

The institution defines and incorporates into all of its degree programs a substantial component of general education designed to ensure breadth of knowledge and promote intellectual inquiry. The general education component includes demonstrated competence in writing and computational skills and an introduction to some of the major areas of knowledge. General education has comprehensive learning outcomes for the students who complete it. Degree credit for general education programs must be consistent with levels of quality and rigor appropriate to higher education See the Accreditation Standards, II.A.3. for areas of study required for general education.

Programs are designed to incorporate a substantial component of general education to ensure breadth of knowledge and to promote intellectual inquiry. The general education component includes demonstrated competence in writing and computational skills and an introduction to some of the major areas of knowledge. Degree credit for general education programs is consistent with levels of quality and rigor appropriate to higher education and is scrutinized for rigor and quality by the Curriculum Committee and the Academic Senate.

12. Academic Freedom

The institution's faculty and students are free to examine and test all knowledge appropriate to their discipline or area of major study as judged by the academic/educational community in general. Regardless of institutional affiliation or sponsorship, the institution maintains an atmosphere in which intellectual freedom and independence exist.

The institution's faculty and students are free to examine and test all knowledge appropriate to their discipline or area of major study as judged by the academic/educational community. The institution maintains an atmosphere in which intellectual freedom and independence exist.

13. Faculty

The institution has a substantial core of qualified faculty with full-time responsibility to the institution. The core is sufficient in size and experience to support all of the institution's educational programs. A clear statement of faculty responsibilities must include development and review of curriculum as well as assessment of learning.

Imperial Valley College employs a substantial core of qualified faculty with full-time responsibility to the institution that is sufficient in size and experience to support the college's educational programs. The college assures that all faculty meet minimum qualifications as defined by the California Academic Senate and California Community Colleges Chancellor's Office. Faculty responsibilities are stated in the collective bargaining agreement between the Imperial Community College District and the Imperial Valley College Chapter of the California Community College Teachers Association/National Education Association.

14. Student Services

The institution provides for all of its students appropriate student services that support student learning and development within the context of the institutional mission.

Student services are comprehensive and accessible to all students. Student needs are met through services directed by the Vice President for Student Services. Imperial Valley College acknowledges the importance of providing appropriate student services and development programs to its diverse student populations in order to facilitate student success. A significant element of the College's program development process is the anticipation of special needs of the target student population and the development of a plan to respond appropriately. These programs typically are designed based on applicable student development theory to include evaluation of program effectiveness. The services and programs are published in the college catalog and schedule of classes and are advertised to students through the website.

15. Admissions

The institution has adopted and adheres to admission policies consistent with its mission that specify the qualifications of students appropriate for its programs.

Admission to Imperial Valley College is governed by the laws of the state and such supplementary regulations as prescribed by the Board of Trustees. Every effort is made to ensure that access is facilitated in a fair and equitable manner. The admissions policies that have been adopted at Imperial Valley College are consistent with its mission and specify the qualifications of students appropriate for its programs.

16. Information and Learning Resources

The institution provides, through ownership or contractual agreement, specific longterm access to sufficient information and learning resources and services to support its mission and instructional programs in whatever format and wherever they are offered.

Imperial Valley College provides access to information about learning resources and services in order to support its mission and all of its educational programs through its library and online services. The Spencer Library Media Center provides learning resources and tutoring, research instruction, and reference services to both students and faculty. Library resources consist of print, electronic, audiovisual, and microform. Internal library records show that there are 65,411 books, 17,000 electronic books, 80 print periodical subscriptions, 27,427 electronic full-text periodicals, and 2,108 units of the *New York Times* on microfilm, in addition to a growing collection of videos and DVDs.

The Learning Services Department consists of the Reading and Writing Lab, Language Lab, and Study Skills Center. The Math Lab and Business Lab are managed separately under the direction of their respective instructional departments.

17. Financial Resources

The institution documents a funding base, financial resources, and plans for financial development adequate to support student learning programs and services, to improve institutional effectiveness, and to assure financial stability.

The Self Evaluation Report stated that the annual budget is the primary document identifying the funding base and fiscal resources for the district. Annual budgeting begins with the district's Program Review processes, which drive the resource planning documents. Each of the resource plans – student services, technology, facilities, staffing, professional development, student learning outcomes, marketing, and budget/fiscal planning – are submitted with recommendations and prioritization of needs to the College Council and/or the Academic Senate, then through the Educational Master Plan Committee to the Strategic Planning Committee. Thus, input regarding the fiscal needs for student learning and student services or support culminates with such input made available to the business office for budgeting purposes.

18. Financial Accountability

The institution annually undergoes and makes available an external financial audit by a certified public accountant or an audit by an appropriate public agency. The institution shall submit with its eligibility application a copy of the budget and institutional financial audits and management letters prepared by an outside certified public accountant or by an appropriate public agency, who has no other relationship to the

institution, for its two most recent fiscal years, including the fiscal year ending immediately prior to the date of the submission of the application. The audits must be certified and any exceptions explained. It is recommended that the auditor employ as a guide Audits of Colleges and Universities, published by the American Institute of Certified Public Accountants. An applicant institution must not show an annual or cumulative operating deficit at any time during the eligibility process. Institutions that are already Title IV eligible must demonstrate compliance with federal requirements.

Despite the challenges of the state's prolonged fiscal crisis, the College has maintained a reserve at or above 5% at all times. To ensure budget integrity in conformity with accounting principles generally accepted in the United States of America, the auditing company of Wilkinson Hadley King & Co., LLP completes its review utilizing the guide for Audits of Colleges and Universities, published by the American Institute of Certified Public Accountants. When it is presented at the Board meeting, the verbal report highlights areas of exception and includes the Statement of Net Assets, total consolidated funds, operational revenues, general fund balance, and the status of the reserve funds. Finally, copies of the budget and the audited financial statements are submitted to the Imperial County Office of Education and the California Community College Chancellor's Office.

19. Institutional Planning and Evaluation

The institution systematically evaluates and makes public how well and in what ways it is accomplishing its purposes, including assessment of student learning outcomes. The institution provides evidence of planning for improvement of institutional structures and processes, student achievement of educational goals and student learning. The institution assesses progress toward achieving its stated goals and makes decisions regarding improvement through an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation and reevaluation.

Imperial Valley College conducts a major program review and planning process every three years, and the results are published in the program review and planning documents on the accreditation website. The planning cycle begins with a visioning process in the community, and institutional goals are developed as a result of this broad-based outreach effort. All members of the College community participate in this process which documents intended improvements through stated institutional goals and objectives. Resource allocation is tied to the program review and planning process. All areas of the College community assess progress toward achieving the stated goals and objectives through an annual assessment process. The annual program reviews are also published on the accreditation website.

20. Integrity in Communication with the Public

The institution provides a print or electronic catalog for its constituents with precise, accurate, and current information concerning the following: general information,

requirements, major policies affecting students, and locations or publications where other policies may be found.

The Imperial Valley College catalog is published annually in print and electronic format on the college website and includes the general information, requirements, major policies affecting students, and other information required by the Commission. The College catalog is carefully checked for accuracy and updated on a regular basis.

21. Relations with the Accrediting Commission

The institution provides assurance that it adheres to the Eligibility Requirements and Accreditation Standards and policies of the Commission, describes itself in identical terms to all accrediting agencies, communicates any changes in its accredited status, and agrees to disclose information required by the Commission to carry out its accrediting responsibilities. The institution will comply with Commission requests, directives, decisions and policies, and will make complete, accurate, and honest disclosure. Failure to do so is sufficient reason, in and of itself, for the Commission to impose a sanction, or to deny or revoke candidacy or accreditation.

Imperial Community College District and its Board of Trustees adhere to the Eligibility Requirements, Accreditation Standards and Commission policies. The district describes itself in identical terms to all its accrediting agencies, communicates any changes in its accredited status, and agrees to disclose information required by the Commission to carry out its accrediting responsibilities.

STANDARD I

INSTITUTIONAL MISSION AND EFFECTIVENESS

The institution demonstrates strong commitment to a mission that emphasizes achievement of student learning and to communicating the mission internally and externally. The institution uses analyses of qualitative and quantitative data and analysis in an on-going and systematic cycle of evaluation, integrated planning, implementation, and re-evaluation to verify and improve the effectiveness by which the mission is accomplished.

I.A. Mission

The institution has a statement of mission that defines the institution's broad educational purposes, its intended population, and its commitment to achieving student learning.

I.A.1. The institution establishes student learning programs and services aligned with its purposes, its character, and its student population.

Findings and Evidence

The mission of Imperial Valley College is to foster excellence in education that challenges students of every background to develop their intellect, character, and abilities; to assist students in achieving their educational and career goals; and to be responsive to the greater community.

The statement of mission for Imperial Valley College defines the institution's broad educational purpose as fostering excellence in education and responsiveness to the greater community, its intended population as students of every background, its commitment to develop student intellect, character, and abilities, and to assist students in achieving their educational and career goals.

Imperial Valley College actualizes its commitment for responsiveness to the community with the tradition of convening Visioning meetings throughout the District in conjunction with regular periodic updating of the Strategic Plan. Participants are asked to provide feedback, and results are organized and categorized in a document shared with the community and the College. This resulting document contains evidence of responsiveness to the community in a section entitled College Responds to Visioning Comments. The information gathered is shared with key planning committees for the College.

The institution acknowledges that its mission statement is intentionally broad in terms of programs for students due to the large geographic service area and the diversity of the population. Service area demographics are collected from the census bureau and Imperial County Metropolitan Statistical Area.

The College analyzes enrollment data to determine course offerings and scheduling in terms of student demand including trend analysis for fill rates and number of enrolled students with different academic goals. Student learning programs rely on institutional student data provided for program review to assess and improve courses, programs, and support services.

The District provided hardcopy documentation of internal and external data. Interviews confirmed processes in place for utilizing the data as related to establishing student learning programs and services aligned with statement of mission. Evidence of responsiveness to the community and student programs in alignment with mission include the partnership with San Diego State University for university prepared students and with transit to provide bus stops and additional bus service for students from the southernmost region of the District.

I.A.2. The mission statement is approved by the governing board and published.

Findings and Evidence

The District Mission was adopted by the Board of Trustees in 2002, approved as Board Policy 1200 in 2010 and most recently taken to the Board of Trustees as a discussion item during the April 2012 board meeting. The mission statement is prominently located in the catalog, the Schedule of Classes, the College website, program review documents, and key planning documents including the Educational Master Plan and Strategic Plan.

Evidence for this Standard was found in board minutes and College documents with the most current being the 2012 board agenda item titled Affirmation of the Imperial Valley College Mission Statement.

Conclusion

The College meets the Standard.

I.A.3. Using the institution's governance and decision-making processes, the institution reviews its mission statement on a regular basis and revises it as necessary.

Findings and Evidence

The standing committee responsible for regular review of the Mission Statement is the Educational Master Planning Committee, which addresses the statement of mission in conjunction with the annual update of the Educational Master Plan. The 2012-2013 Educational Master Plan document refers to a bi-annual review of the mission statement, which was not consistent with the annual interval described during interviews; however, information that the mission statement is reviewed regularly was consistent. The prevailing opinion of individuals interviewed about the mission statement is that the educational environment on the State and local level is changing significantly and that the development of the 2014-2017 Strategic Plan will provide the impetus for revising the mission statement.

Though the mission statement has not been revised since 2002, there is evidence of regular dialog and review. Interviews with the co-chairs of the Educational Master Plan Committee confirmed that discussion of the mission statement is regularly scheduled and it is the Educational Master Plan Committee that recommends affirmation or revisions of the Mission Statement to the Superintendent/President who then takes the mission statement to the board.

Conclusion

The College meets the Standard.

I.A.4. The institution's mission is central to institutional planning and decision making.

Findings and Evidence

The statement of mission is central to the development of the Strategic Plan. Every three years, during the development of the College's next Strategic Plan, community feedback is collected through an activity called Visioning. During community Visioning meetings, the

statement of mission is presented to participants as the foundation for College planning. Imperial Valley College Visioning results are then shared internally with Strategic Planning Committee members, as well as the Educational Master Plan Committee members who are responsible for reviewing and revising the statement of mission as necessary. The Strategic Plan informs the Educational Master Plan, which informs division and department planning across the institution. Information collected in concert with the statement of mission includes external and internal data elements considered in program offerings, scheduling, and program review for instruction and student support services.

In the newly adopted Educational Master Plan Goals for 2012-2015, Goal One states that the College will maintain programs and services that focus on the mission of the College supported by data-driven assessments to measure student learning and student success. Objective 1.1 under this goal is to develop systems and procedures that establish the mission of the College as the central mechanism for planning and decision making.

The Educational Goals and objectives in the 2012-2015 Educational Master Plan reflect renewed attention to formalizing the role of the College mission. Interviews with College employees who participate in the Visioning meetings confirmed that community review of the mission statement is a regular component of the meeting and that community feedback is considered when establishing strategic goals. Interviews confirmed the use of data in enrollment management processes and documents reviewed reflect that data elements are integral to program review across the District.

The Self Evaluation Report also credits the mission statement as providing the core institutional values reflected in the Institutional Student Learning Outcomes; however, there was inadequate evidence tying the mission statement to ISLO's.

Conclusion

The statement of mission is central to the development of the Strategic Plan. To increase effectiveness, the team encourages the College to further develop systems and procedures that establish the mission of the College as the central mechanism for planning and decision making as identified as Objective 1.1 in the Educational Master Plan 2012-15.

The College meets the Standard.

I.B. Improving Institutional Effectiveness

The institution demonstrates a conscious effort to produce and support student learning, measures that learning, assesses how well learning is occurring, and makes changes to improve student learning. The institution also organizes its key processes and allocates its resources to effectively support student learning. The institution demonstrates its effectiveness by providing 1) evidence of the achievement of student learning outcomes and 2) evidence of institution and program performance. The

institution uses ongoing and systematic evaluation and planning to refine its key processes and improve student learning.

I.B.1. The institution maintains an ongoing, collegial, self-reflective dialogue about the continuous improvement of student learning and institutional processes.

Findings and Evidence

The College structures its dialogue through an extensive network of consultative, advisory, and central planning committees consisting of appropriate representative groups. In most cases, information flows between standing committees and departments, divisions, and consultative groups through their representatives in a bi-directional fashion, with committee members sharing feedback and decisions, as appropriate. Clear evidence of thoughtful dialogue about College planning processes is found in minutes of the Educational Master Plan Committee and subcommittees or associated groups.

In addition, discussions of student learning outcomes are being reported through the academic program review and verified through interviews with a selection of Department Chairs. Faculty discussed student learning outcomes and their assessment results which have led to the refining of SLO statements, refining of assessments, and changes to course content, material emphasis, or instructional approaches.

Conclusion

The College meets the Standard.

I.B.2. The institution sets goals to improve its effectiveness consistent with its stated purposes. The institution articulates its goals and states the objectives derived from them in measurable terms so that the degree to which they are achieved can be determined and widely discussed. The institutional members understand these goals and work collaboratively toward their achievement.

Findings and Evidence

The College sets institutional goals on a three-year cycle with more specific objectives linked to these goals. The College is just completing the first year of its second three-year planning cycle. Based on dialogue within the EMPC, the goals from the previous cycle were reviewed and modified for clarity and alignment with Standards for accreditation in the 2012-13 Educational Master Plan (for the 2012-15 planning cycle), with revised measurable objectives associated with each. Recommendations from each of the Resource Plans are linked to EMP goals with projected completion dates. However, resource requests listed in the EMP are not associated with these goals.

Institutional goals and objectives also are published in each Annual Program Review. However, programs did not consistently align their goals, resource requests, or process outcomes with these goals and objectives. And the new program review template does not specifically recommend it.

The EMPC conducts an internal evaluation annually which recommends improvements for the coming year. Current-year recommendations as well as the status of previous-year recommendations are detailed in the annual Educational Master Plan. These recommendations spring from discussion within the EMPC as well as from the Resource Planning Committees.

Conclusion

Alignment of institutional and program goals would strengthen the existing collaborative efforts toward achieving goals to improve. Institutional objectives derived from goals should be stated in measurable terms.

The College meets the Standard.

I.B.3. The institution assesses progress toward achieving its stated goals and makes decisions regarding the improvement of institutional effectiveness in an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, and reevaluation. Evaluation is based on analyses of both quantitative and qualitative data.

Findings and Evidence

Planning and institutional effectiveness processes are monitored by the large and broad-based Educational Master Planning Committee (EMPC) which oversees the program review process, monitors enrollment, and reviews prioritized resource allocations. The EMPC membership includes College leadership (Administrators and Deans), all department chairs and other faculty. Eight resource planning committees, including technology, staffing, budget/fiscal, SLO/SAO, and facilities, review all relevant annual program reviews and provide updates, recommendations and priority funding/action lists to the EMPC. Interviews with a broad cross-section of College employees cited an acknowledgement of some remaining planning activities conducted in isolation from institutional goals, the strategic plan, or learning/service area outcomes. However, the structure exists to support more meaningful integration of all planning processes.

While the EMPC assesses the planning process annually, institutional goals and objectives are not systematically assessed for either completion or contribution to student learning or achievement. Some resource plans, such as the Strategic Technology Plan, set goals via professional Standards or an external benchmarking system. However, even in these cases, the College does not establish linkages between institutional changes and service area outcomes, student learning and student achievement outcomes. Although the College began a new cycle of assessment last year, any progress made on the previous plan's goals and objectives was not measured and recorded.

In the 2012-13 Educational Master Plan, the Student Services Planning Committee opted to include a status report on the completion of 2011-12 goals and recommendations. This report included completion dates and status updates and was a good example of maintaining continuity across planning years. Measuring outcomes from goal implementation would strengthen this continuity and verify institutional improvement.

Finally, the Educational Master Plan includes a thoughtful and detailed Timeline of Activities for evaluation, planning and resource allocation. However, the team reviewed contradictory information regarding whether the strategic plan drove the educational planning or the reverse. Developing clear connections and directions between each of these plans and their goals should be clarified.

Conclusion

While the College now participates in broad-based planning process, the goals and objectives that serve as a foundation for that process are not assessed, making it difficult to evaluate whether College plans are helping to improve institutional effectiveness beyond anecdotal discussions.

The College does not meet the Standard.

Recommendation

Recommendation 1 In order to fully meet the Standard, the team recommends that the College consistently link the institutional goals and objectives detailed in the Educational Master Plan with operational plan goals and resource allocations, including technology resources, in order to assess progress toward those institutional goals. In addition, the College should regularize a planning calendar that identifies all planning activities, committees, and the roles of various College plans, and includes institutional effectiveness assessment and improvement cycles. (I.B. 3, II.C.1.b, IV.A.5)

I.B.4. The institution provides evidence that the planning process is broad-based, offers opportunities for input by appropriate constituencies, allocates necessary resources, and leads to improvement of institutional effectiveness.

Findings and Evidence

Prior to the 2012-13 year plan (for 2013-14 fiscal planning), the College utilized a model of three-year Comprehensive Program Reviews (CPRs) combined with Annual Program Reviews (APRs) that were more directed toward an annual budgeting schedule. Based on internal evaluative discussions as well as recommendations of the Fiscal and Crisis Management Assistance Team (FCMAT), the EMPC found that the CPRs would easily become disassociated from annual planning, and the APRs had become little more than a budgeting process without program evaluation. It was determined that a more condensed and data driven model would be adopted and be required of all programs and service units on an

annual basis. Components of the revised template include discussion of learning outcomes or service area outcomes, program health status, and analysis of data to assess effectiveness. For academic programs, the new template includes a robust data set containing longitudinal tracking of enrollment, demand/efficiency, student completion and success. It is followed by a Program Health assessment.

The new annual program template is supported widely and includes elements essential for assessing institutional effectiveness and program improvement. Across the College, reports were of inconsistent quality, especially regarding the evaluation/improvement aspects of the SLO/SAO cycle, and the use of data to evaluate the program and suggest future directions. A common feature of quality program evaluations is the publication and discussion of assessments of SLOs, SAOs, and process outcomes from the previous year. The team recommends that an evaluation of the previous cycle be incorporated into the next round of APRs.

The new APR template begins with the mission statement and the current institutional goals and objectives. However, the template does not explicitly advise reviewers to align program activities with institutional goals. In a random sample of reports reviewed, some alignment was found, but the practice was inconsistent.

The College's planning processes are broad-based with a large number of resource planning committees as well as advisory and consultative groups. Interviews with a variety of College constituents revealed concern about the large number of committees and frequency of meetings associated with the adopted planning processes.

Following implementation of a new planning process, an initial period of significant modifications and improvements to that process is expected. As the College finds a model that fits College processes on many fronts, it may be best to shift to a longer-term schedule of institutional objectives aligned with its goals and the strategic plan that could be achieved over the three-year cycle rather than replacing objectives each year. In addition, the College should settle on a model that is meaningful but sustainable over the long term.

Conclusion

The College partially meets the Standard.

Recommendation

See Recommendation 1.

I.B.5. The institution uses documented assessment results to communicate matters of quality assurance to appropriate constituencies.

Findings and Evidence

The College publishes general quantitative data about its student body and workforce via its publicly-available Institutional Research webpage. This data include demographics, enrollment, and some achievement data. However, in most cases, these reports are raw counts or rates without narrative, with very little data disaggregated by relevant subgroups. A recently-published factbook is now accessible by both the research website as well as a College "Facts" page. This factbook is a comprehensive informational booklet that includes both snapshot and longitudinal trend data accompanied by explanatory narrative. In addition, a College service area profile was developed as part of the accreditation self-evaluation and Educational Master Plan.

The College website includes a tracking system to indicate frequency of downloads by document, an important starting point to monitoring information dissemination. As the College expands the number and quality of analytical reports and data available on its website, the collection of feedback to ascertain how effectively it is conveying this information will be essential.

The College has a good understanding of the community it serves and reaches out to both campus and public communities in a variety of ways, such as public forums and visioning processes used to develop the Strategic Plan. While student and public satisfaction are essential components of institutional effectiveness, the College must also rely on empirical data for planning and institutional improvement. As evidenced in meeting minutes and interviews with College constituents, the College acknowledges its limited reliance on data in the past and its plan to improve in this area.

Conclusion

With recent changes in the Office of Institutional Research, the College is on the path toward integrating more quantitative analysis into its ongoing assessments of student achievement and institutional effectiveness.

The College partially meets the Standard.

Recommendation

Recommendation 2 Given that the College has a new integrated planning model and recent growth in assessment of outcomes, the team recommends that in order to increase effectiveness the College focus its evaluation and global assessment efforts on determining how well the new model and recently collected assessments contribute to institutional improvement. In addition, the team recommends that the College 1) ground its decisions on sound data analysis; 2) evaluate its institutional quality by way of benchmarking and other comparison data, and 3) establish minimal standards of institutional quality and goals for institutional improvement. (I.B. 5 and 7, II.A.1.c, II.A.2.f)

I.B.6. The institution assures the effectiveness of its ongoing planning and resource allocation processes by systematically reviewing and modifying, as appropriate, all parts of the cycle, including institutional and other research efforts.

Findings and Evidence

In response to previous recommendations, the College has been actively evaluating its planning and resource allocation processes in recent years. The main source of evaluation has been the broad-based Educational Master Planning Committee (EMPC) which now reviews the program review, planning and resource allocation processes on at least a yearly basis. The College Council and Academic Senate provide feedback during the annual evaluation and renewal process although this process is not as transparent as other processes described in the Educational Master Plan.

In addition to internal reflection and discussion, the College last year invited the Fiscal Crisis and Management Assistance Team (FCMAT) to provide an external evaluation of budgeting and resource allocation processes in light of recent fiscal difficulties. The College has begun discussions and prioritization of the many FCMAT recommendations. One recommendation that was immediately adopted was to incorporate a Standard data set for each program review that includes fiscal health assessments based on productivity and efficiency measures as well as student achievement rates. As stated above, the College determined that program quality could improve more by instituting this new process for all programs on an annual basis rather than on the three-year schedule of the past. Although the three-year comprehensive review has been replaced, Institutional Research still includes a three-year snapshot of student achievement trends for each program.

Finally, recent changes in personnel and leadership in Institutional Research have prompted efforts to expand the number and complexity of assessment data analyzed and reported. It is already apparent that the College is using the additional data for data-based enrollment management and will likely be used to evaluate program viability as recommended by FCMAT. In addition, the College has recently reactivated a Data Reliability Committee in which the researcher collaborates with technology staff and users to improve the validity of internally and externally reported data.

The College has modified the program evaluation, planning, and resource allocation processes broadly in response to accreditation recommendations, internal discussions, and the external FCMAT evaluation. Yet, it is not clear to what extent these new efforts have positively affected institutional improvement. The linkage of resource allocation to institutional goals and the assessment of those goals should provide more concrete evidence of institutional improvement after another cycle of the process.

Conclusion

The College meets the Standard.

I.B.7. The institution assesses its evaluation mechanisms through a systematic review of their effectiveness in improving instructional programs, student support services, and library and other learning support services.

Findings and Evidence

The College's planning process has recently replaced a three-year comprehensive planning and annual budgeting model with an annual program evaluation and resource allocation model. These changes were the result of both internal and external evaluations which determined that three-year program review goals were not connected to annual resource allocations and that fiscal implications were divorced from program plans and budgets. In addition, the number of assessments of student learning outcomes and service area outcomes has expanded in the past few years with results categorized and summarized in the annual Educational Master Plan. These were good steps that could lead to institutional improvement. However, changes have been implemented too recently and institutional outcomes measures were not tied to recent goals, so it is too soon to determine how well the resulting process changes have contributed to instructional and service improvements.

Conclusion

The team was impressed by the thoughtful evaluation process as well as the enthusiasm and confidence in the student learning outcomes and service area outcomes assessment processes that may lead to institutional improvement. However, it is too early to determine how well the new program review processes, institutional goals, and service area outcomes contribute to improvement of programs and services.

The College partially meets the Standard.

Recommendation

See Recommendation 2.

STANDARD II STUDENT LEARNING PROGRAMS AND SERVICES

The institution offers high-quality instructional programs, student support services, and library and learning support services that facilitate and demonstrate the achievement of stated student learning outcomes. The institution provides an environment that supports personal and civic responsibility as well as intellectual, aesthetic, and personal development for all its students.

II.A. Instructional Programs

The institution offers high-quality instructional programs in recognized and emerging fields of study that culminate in identified student outcomes leading to degrees, certificates, employment, or transfer to other higher education institutions or programs

consistent with its mission. Instructional programs are systematically assessed in order to assure currency, improve teaching and learning strategies, and achieve stated student learning outcomes. The provisions of this Standard are broadly applicable to all instructional activities offered in the name of the institution.

II.A.1.The institution demonstrates that all instructional programs, regardless of location or means of delivery, address and meet the mission of the institution and uphold its integrity.

Findings and Evidence

The College offers a variety of programs which address and meet the mission of the institution. In the last six years, the College was awarded grants, the ATLAS grant and Project ACCESO which enabled it to greatly improve Information Technology, including the development of the distance education program. Other examples include Project Building Green, paired English and Reading classes, NATEF certification, and the CISCO CCNA Discovery program, all of which are designed to "assist students in achieving their educational and career goals." The College has established processes that ensure high quality of programs and services. The student achievement outcomes of the institution's programs are developed, assessed and articulated through the program review process.

The Self Evaluation Report and the ACCJC College Status Report on Student Learning Outcomes Implementation provided evidence of 100% identification of SLOs in the College's 715 active courses. The College also provided evidence of its Program Review process. The Self Evaluation Report and on-site evidence substantiated the 3-year cycle of Comprehensive Program Review (CPR) and an Annual Program (APR) to allocate resources for the College's programs. The College offered ample evidence of its grant projects and new programs. The College provided evidence of a revised program review process; it is moving from the annual program review process which identifies budget requests and the programmatic 3-year cycle for the comprehensive review to an annual program review process that combines the evaluation of program and resources needs.

Conclusion

The College meets the Standard.

II.A.1.a.The institution identifies and seeks to meet the varied educational needs of its students through programs consistent with their educational preparation and the diversity, demographics, and economy of its communities. The institution relies upon research analysis to identify student learning needs and to assess progress toward achieving stated learning outcomes.

Findings and Evidence

The College collects and analyzes data from a variety of sources to address the varied educational needs of its students. The College utilizes data collected from students in the

matriculation process and data regularly collected about student demographics and economic goals to determine student learning needs. For example, the ACCUPLCER placement assessment is given to graduating seniors from high schools in the College's service area. The information collected from these assessment results, along with demographic and employment data, enable the College to assess students' educational preparedness and learning needs. The College's CPR process facilitates discovery of attainment of stated learning outcomes. Student surveys, ACCUPLACER information, CPRs, and SLO cycle assessment forms were reviewed to support the College's claims regarding this Standard.

Conclusion

The College meets the Standard.

II. A.1.b. The institution utilizes delivery systems and modes of instruction compatible with the objectives of the curriculum and appropriate to the current and future needs of its students.

Findings and Evidence

Courses are provided with several delivery systems, among them: day and evening classes, credit and non-credit, and late start. The College has suspended its online classes.

The current schedule of classes, student surveys, ACCUPLACER information, CPRs, and SLO cycle assessment forms were reviewed to support the College's claims regarding this Standard. Interviews with College personnel (e.g. the Curriculum Committee Chair, the Vice President of Instruction) reveal a proactive move to collecting and analyzing data that will inform the most effective delivery systems and modes of instruction. For example, they are reviewing trend data for class scheduling. This proactive stance was likely driven by the FCMAT report which recommended that deans and department chairs focus on enrollment management issues such as scheduling and class size, to ensure appropriate variety in their delivery systems and modes of instruction.

More broadly, the College is in the nascent stages of a pathways project for program, degree, and certificate completion. After a substantive change proposal for the Distance Education (DE) program to ACCJC resulted in a deferral, the College decided to suspend its DE program. Interviews reveal plans to revamp and resume the DE program by fall, 2013.

Conclusion

The College meets the Standard.

II.A.1.c. The institution identifies student learning outcomes for courses, programs, certificates, and degrees; assess student achievement of those outcomes; and uses assessment to make improvements.

Findings and Evidence

The College has worked diligently to identify student learning outcomes at the course, program and institutional level.

At the time of the team evaluation visit, the College had completed identification of all of its SLOs and PLOs. The ACCJC College Status Report on SLOs Implementation confirms that the College has identified SLOs for all 715 active credit courses. PLOs have also been established for the College's 128 degree and certificate programs. The College has prepared a strong foundation for SLO and PLO assessment and continuous quality improvement processes. The iterations of the Cycle of Assessment form used to assess SLOs demonstrate a commitment to continuous assessment and quality improvement. The Program Outcomes Assessment Report and Grid not only identifies and assesses the PLOs, but also maps the SLOS, PLOs and ILOs.

The College reports on the ACCJC Status Report on SLOs Implementation and Assessment that "...nearly 60% of courses have gone through an SLO assessment cycle." However, there is a grid and timeline for the assessment cycle with a departmental commitment to assess at least one SLO each semester. The assessment cycle form also provides evidence of analysis of assessment results and use for improvement of student learning. An area for improvement was noted during the review of the SLO Cycle of Assessment forms for 2009-2010 and 2010-2011. In some instances, instructors determined an outcome based on grades received by students in the class. Grades, in and of themselves, do not provide an indicator of the proficiency level of an outcome. In another instance, an indirect assessment method (i.e., a survey) was used to assess the SLOs. Again, indirect assessment methods aren't as effective at gauging the degree to which students have achieved desired levels of achievement.

Conclusion

The College partially meets the Standard.

Recommendations

See Recommendation 2.

Recommendation 3 In order to increase effectiveness, the team recommends that the College include a feedback mechanism to faculty on their assessment methods and that the College encourages use of multiple indices of assessment. (II.A.1.c)

II.A.2. The Institution assures the quality and improvement of all instructional courses and programs offered in the name of the institution, including collegiate, developmental, and pre-collegiate courses and programs, continuing and community education, study abroad, short-term training courses and programs, programs for international students, and contract or other special programs, regardless of type of credit awarded, delivery mode, or location.

II.A.2.a. The institution uses established procedures to design, identify learning outcomes for, approve, administer, deliver, and evaluate courses and programs. The institution recognizes the central role of its faculty for establishing quality and improving instructional courses and programs.

II.A.2.b. The institution relies on faculty expertise and the assistance of advisory committees when appropriate to identify competency levels and measurable student learning outcomes for courses, certificates, programs including general and vocational education, and degrees. The institution regularly assesses student progress towards achieving those outcomes.

Findings and Evidence

Faculty have a central role in identifying and measuring SLOs for all programs. Through their program evaluation processes (i.e., CPR, APR, and assessment of learning outcomes) Departmental and Advisory Committee minutes demonstrate evidence of dialog among faculty at departmental and advisory committee meetings about learning outcomes at the course, program, and institutional levels for degrees and certificates. In an interview with the Vice President of Instruction, a new project to identify pathways for each degree and certificate program was outlined. The Vice President provided evidence of some of the programs which had already been completed (e.g., Political Science and Spanish: Native Speakers AA degrees). The Course Catalog outlines these degree requirements.

Conclusion

The College meets the Standard.

II.A.2.c. High-Quality Instruction and appropriate breadth, depth, rigor, sequencing, time to completion, and synthesis of learning characterize all programs.

Findings and Evidence

The College maintains a rigorous hiring and evaluation process for faculty to ensure high quality instruction. The Curriculum Committee reviews Course Outlines of Record for depth, breadth, and rigor.

Department meeting minutes, Course Outlines of Record and cycles of assessment forms were reviewed to determine whether or not the criteria for this Standard have been met. The evidence provided demonstrated that faculty engage in ongoing dialog about courses in their department to assure high quality.

Conclusion

The College meets the Standard.

II.A.2.d. The Institution uses delivery modes and teaching methodologies that reflect the diverse needs and learning styles of its students.

Findings and Evidence

The College presented sufficient evidence of its activities to use teaching methodologies and delivery modes (although the distance education program is being revamped) that meet this Standard.

The College provided evidence that faculty use a learning style inventory – The VARK (Visual, Aural, Read/Write, Kinesthetic) questionnaire – to determine students' learning styles. The ATLAS grant project enabled the College to offer faculty a series of trainings on culturally responsive pedagogy, collaborative teaching, and social media and technology. The CORs contain a list of the most common teaching and assessment methods for each course.

Conclusion

The College meets the Standard.

II. A.2.e. The institution evaluates all courses and programs through an on-going systematic review of their relevance, appropriateness, achievement of learning outcomes, currency, and future needs and plans.

Findings and Evidence

Since the 2007 Comprehensive Evaluation Report in which the previous team recommended the College develop student learning outcomes, authentic assessment strategies, a process for tying resource allocation to SLOs, and faculty engagement in this process, the College has made significant and substantive progress towards meeting the Standard. Procedures have been designed, implemented, and revised to identify and assess SLOs and PLOs. ILOs are identified in the Course Outlines of Record and mapped to PLOs and SLOs. After several professional development opportunities, faculty embraced the concepts of this Standard and became drivers of this process through their work on the Curriculum Committee, the SLO Committee, and the Educational Master Planning Committee (EMPC). The College has developed a procedure for ongoing systematic review of courses and programs through the work of the Curriculum Committee: review of new and revised Course Outlines of Record and review and promotion of SLOs and PLOs procedures.

Value is evidenced in the faculty analysis of courses and programs on the SLO and PLO Cycle of Assessment forms. The forms contain questions which elicit information about assessment methods, alignment of SLOs and PLOs with ILOs, and how the data can be used to inform instructional improvements. This procedure lays a foundation for the ongoing systematic review of courses and programs. Review of department minutes and interviews with Department Chairs provided evidence that faculty discuss student learning outcomes on a regular basis. This Standard language especially applies to the Curriculum Committee. The

Curriculum Committee takes a prominent role in reviewing, conducting Tech Review, and approving new and updated courses in face-to-face and online formats.

Conclusion

The College meets the Standard.

II.A.2.f. The institution engages in ongoing, systematic evaluation and integrated planning to assure currency and measure achievement of its on stated student learning outcomes for courses, certificates, programs including general and vocational education, and degrees. The instruction systematically strives to improve those outcomes and makes the results available to appropriate constituencies.

Findings and Evidence

As stated in other areas of Standard IIA, the College has implemented a planning process for review of student learning outcomes. In particular, it has made great strides in identifying and assessing course student learning outcomes that align with the ILOs. Faculty have engaged in training and dialog around SLOs, PLOs, ILOs and program review. They have revised their SLO Cycle of Assessment forms and their PLO Assessment forms to ensure that they provide the best data for continuous quality improvement.

The College provided evidence of a foundational planning process for student learning outcomes. It has revised the program review process to integrate the program evaluation and budget resource allocation process. Feedback at the campus forum enabled the College to develop new course offerings in English (accelerated English courses/paired courses) and developmental math. Also, these areas were regularly discussed at faculty meetings. However, this is all new. The College has begun the process of integrating and aligning these processes, but has not fully integrated instructional planning with other areas of the College.

Conclusion

The College partially meets the Standard.

Recommendation

See Recommendation 2.

II.A.2.g. If an institution uses departmental course and/or program examinations, it validates their effectiveness in measuring student learning and minimizes test bias.

Findings and Evidence

The College has a number of examinations which it certifies to validate effectiveness and minimize test bias. The College provided evidence that it administers a number of Standardized tests for their programs (e.g., Nursing TEAS and ATI test, the Peace Officer Standards and Training (POST), the Alcohol and Drug Studies test) and all are validated.

Conclusion

The College meets the Standard.

II.A.2.h. The institution awards credit based on student achievement of the course's stated learning outcomes. Units of credit awarded are consistent with institutional policies that reflect generally accepted norms or equivalencies in higher education.

Findings and Evidence

Evidence was provided demonstrating that the Curriculum Committee reviews the credits for courses during its course review process.

Conclusion

The College meets the Standard.

II.A.2.i. The institution awards degrees and certificates based on student achievement of a program's stated learning outcomes.

Findings and Evidence

The College has identified program learning outcomes for its 128 programs. Although it has established a cycle of assessment for them, it has not completely assessed all of the PLOs. At the time the Self Evaluation Report was written, not all program PLOs had been written or assessed. The ACCJC SLO Implementation Report provides evidence that the College has identified PLOs for their programs. It has not yet concluded the assessment of all the PLOs.

Conclusion

The College partially meets the Standard.

Recommendation

Recommendation 4 In order to increase effectiveness, the team recommends that the College integrate the program and resource evaluation process into other planning processes of the College and complete the assessment cycle for program learning outcomes and ensure they are continually aligned with student learning outcomes and institutional learning outcomes. (II. A.2.f and i)

II.A.3. The institution requires of all academic and vocational degree programs a component of general education based on a carefully considered philosophy that is clearly stated in its catalogue. The institution, relying on the expertise of its faculty, determines the appropriateness of each course for inclusion in the general education curriculum by examining the state learning outcomes for the course.

indings and Evidence

Updated CORs are entered into the CurricUNET database. The College Catalog spells out the philosophy and summarizes the Learning Outcomes associated with meeting the GE requirements.

Conclusion

The College meets the Standard.

- II.A.3.a. An understanding of the basic content and methodology of the major areas of knowledge: areas include the humanities and fine arts, the natural sciences, and the social sciences.
- II.A.3.b. A capability to be a productive individual and lifelong learner: skills include oral and written communication, information competency, computer literacy, scientific and quantitative reasoning, critical analysis/logical thinking, and the ability to acquire knowledge through a variety of means
- II.A.3.c. A recognition of what it means to be an ethical human being and effective citizen: qualities include an appreciation of ethical principles; civility and interpersonal skills; respect for cultural diversity; historical and aesthetic sensitivity; and the willingness to assume civic, political, and social responsibilities locally, nationally, and globally.

Findings and Evidence

The Course Catalog contains options for all degrees in major areas of knowledge, which are part of the College's GE requirements. The Self Evaluation Report provides evidence of Curriculum Committee minutes which demonstrate review of GE requirements to ensure students' understanding of the GE content.

The College's ILOs, which are aligned with PLOs and SLOs as evidenced in program review documents, include many of the competencies for an individual and lifelong learner: Written communication, critical thinking, personal responsibility, information literacy, and global awareness.

Two of the College's ILOs, personal responsibility and global awareness, are integrated into course level SLOs. The College provided an SLO Plan for 2010-2012 with a timeline for this integration.

Conclusion

The College meets the Standard.

II.A.4. All degree programs include focused study in at least one area of inquiry or in an established interdisciplinary core.

Findings and Evidence

All of the College's 126 AS or AA degrees/certificates are in a specific core discipline, including the eight approved TMC degrees listed in the Course Catalog. The Self Evaluation Report provided evidence of several degree or certificate programs that contain an interdisciplinary core: Alcohol and Drug Studies, Allied Health, and Child Family and Consumer Studies.

Conclusion

The College meets this Standard.

II.A.5. Students completing vocational and occupational certificates and degrees demonstrate technical and professional competencies that meet employment and other applicable Standards and are prepared for external licensure and certification.

Findings and Evidence

Evidence provided in the Self Evaluation Report (the College Catalog) and during the visit (Advisory Committee minutes) confirmed that the College offers a number of apprenticeships, vocational, and associate/certificate programs that require certain competencies or external certifications and acquire reliable information about students' abilities to meet the requirements (e.g., the College does Total Program Evaluation – RN).

Conclusion

The College meets the Standard.

II.A.6. The institution assures that students and prospective students receive clear and accurate information about educational courses and programs and transfer policies. The institution describes its degrees and certificates in terms of their purpose, content, course requirements, and expected student learning outcomes. In every class section, students receive a course syllabus that specifies learning objectives consistent with those in the institution's officially approved course outline.

Findings and Evidence

The College catalog contains information referenced in the Standard. The Self Evaluation Report states that all faculty are required to include ILOs, SLOs and Learning Objectives on their syllabi. Evidence reviewed during the site visit confirmed that faculty include these pieces of information on their syllabi.

Conclusion

The College meets the Standard.

II.A.6.a. The institution makes available to its students clearly stated transfer-of-credit policies in order to facilitate the mobility of students without penalty. In accepting transfer credits to fulfill degree requirements, the institution certifies that the expected

learning outcomes for transferred courses are comparable to the learning outcomes of its own courses. Where patterns of student enrollment between institutions are identified, the institution develops articulation agreements as appropriate to its mission.

II.A.6.b. When programs are eliminated or program requirements are significantly changed, the institution makes appropriate arrangements so that enrolled students may complete their education in a timely manner with minimum disruption.

II.A.6.c. The institution presents itself clearly, accurately, and consistently to prospective and current students, the public, and its personnel through its catalogs, statements, and publications, including those presented in electronic formats. It regularly reviews institutional policies and procedures regarding publications to assure integrity in all representations about its mission, programs, and services.

Findings and Evidence

The College submitted clear evidence in the Self Evaluation Report of transfer policies being clearly articulated in the College Catalog and on the Transfer Center webpage as well as its use of Degree Works. The College's Program Discontinuance policy provides procedures for assuring this Standard is met so that students may complete their education. The policy was reviewed as part of evidence provided in the Self Evaluation Report and at the time of the visit. The College submitted evidence that publications (e.g., catalogs, schedules) are in print and electronic form and are updated regularly.

Conclusion

The College meets the Standard.

II.A.7. In order to assure the academic integrity of the teaching-learning process, the institution uses and makes public governing board-adopted policies on academic freedom and responsibility, student academic honesty, and specific institutional beliefs or world views. These policies make clear the institution's commitment to the free pursuit and dissemination of knowledge.

Findings and Evidence

The Self Evaluation Report provided evidence of board-adopted policies and of them being made public (e.g., College Wide Institutional Code of Ethics Statement, Board Policies, and Administrative procedure on Academic Freedom in General Catalog).

Conclusion

The College meets the Standard.

II.A.7.a. Faculty distinguishes between personal conviction and professionally accepted views in a discipline. They present data and information fairly and objectively.

II.A.7.b. The institution establishes and publishes clear expectations concerning student academic honesty and consequences for dishonesty.

II.A.7.c. The institutions that require conformity to specific codes of conduct of staff, faculty, administrators, or students, or that seek to instill specific beliefs or worldviews, give clear prior notice of such policies, including statements in the catalog and/or appropriate faculty or student handbooks.

Findings and Evidence

The Self Evaluation Report provided the Code of Ethics, Course Outlines of Record (CORs), and an evaluation process that documents compliance with this Standard. Evidence from the Self Evaluation report confirms that the College publishes expectations regarding academic honesty and consequences for dishonesty in the Catalog, the Student Leader Handbook, and in course syllabi; these are also reflected in Board Policies and Administrative Procedures and that the Dean of Student Affairs and Enrollment Services determines discipline practices. Anti-plagiarism software is used (e.g. TurnitIn and SafeAssign – a software within Blackboard Learn LMS.

The Self Evaluation Report confirms that the College has clear statements on codes of conduct and ethics and doesn't "champion specific beliefs or worldviews."

Conclusion

The College meets the Standard.

II.A.8. Institutions offering curricula in foreign locations to students other than U.S. nationals operate in conformity with Standards and applicable Commission policies.

Findings and Evidence

The College does not offer curriculum in foreign locations.

Conclusion

This Standard does not apply to the College.

Standard II.B. Student Support Services

The institution recruits and admits diverse students who are able to benefit from its programs, consistent with its mission. Student support services address the identified needs of students and enhance a supportive learning environment. The entire student pathway through the institutional experience is characterized by a concern for student access, progress, learning, and success. The institution systematically assesses student support services using student learning outcomes, faculty and staff input, and other appropriate measures in order to improve the effectiveness of these services.

II.B.1. The institution assures the quality of student development and support services and demonstrates that these services, regardless of location or means of delivery,

enhance achievement of the mission of the institution and support student learning.

Findings and Evidence

The institution has implemented a comprehensive student support program for all students. The programs are assessed annually through its Program Review process. The unit goals are closely aligned with the institutional goals: maintain programs and services that focus on the mission of the College supported by data-driven assessments to measure student learning and student success; maintain instructional programs and services which support student success. All units in Student Services use quantitative and qualitative data to measure the effectiveness of their services and conduct analysis yearly on the appropriateness of these services to identify ways to improve services to students.

The team found evidence, via the units Program Review that each unit in student services assures the quality of student development and support services and demonstrates that these services regardless of location enhance achievement of the mission of the institution and support student learning. The team reviewed the program review from each Student Services unit. Every unit had identified Service Area Outcomes (SAO). The Dean and Vice President of Student Services reviewed each Program Review. Lastly, the team found that all units conducted a survey to evaluate program services, customer satisfaction, and need for additional services. The team found that although the institution has put its distance education (DE) program on hold, when it was in existence the College had a counselor tasked with assuring that DE students had equivalent access to student services comparable to students attending courses on campus.

Conclusion

The College meets the Standard.

II.B.2. The institution provides a catalog for its constituencies with precise, accurate, and current information concerning the following:

a. General Information

- Official Name, Address(es), Telephone Numbers, and Website Address of the Institution
- Educational Mission
- Course, Program and Degree Offerings
- Academic Calendar and Program Length
- Academic Freedom Statement
- Available Student Financial Aid
- Available Learning Resources
- Names and Degrees of Administrators and Faculty
- Names of Governing Board Members

b. Requirements

- Admissions
- Student Fees and Other Financial Obligations

• Degrees, Certificates, Graduation and Transfer

c. Major Policies Affecting Students

- Academic Regulations, including Academic Honesty
- Nondiscrimination
- Acceptance of Transfer Credit
- Grievance and Complaint Procedures
- Sexual Harassment
- Refund of Fees

d. Locations or Publications Where Other Policies May be Found.

Findings and Evidence

The College's catalog is found online and in print and is offered in alternate formats for disabled students. Each section is reviewed prior to publication for accuracy of information by different program heads. The catalog information on the College website is identical to the print catalog. Board policies and administrative procedures are available online via Board Docs. The Instruction office maintains records of complaints for academic matters, and complaints regarding non-academic matters are maintained in the Student Affairs office.

The campus provided evidence that the catalog could be easily accessed online. The team found that the information in the hard copy catalog was identical to the printed version. The team saw evidence of how a student with a disability could access the catalog via a special reader. The team verified that the Instruction and Student Affairs offices maintained student complaint files.

Conclusion

The College meets the Standard.

II.B.3. The institution researches and identifies the learning support needs of its student population and provides appropriate services and programs to address those needs.

Findings and Evidence

The College uses various means to identify the learning needs of their students. First, the College does an assessment of all learners via placement test. Based on student test scores, counselors assist students to choose the right courses and refer them for necessary support services. Second, each student creates an educational plan; students are supported to reach the goals of their plan. Third, the unit works with all local high schools to identify College service needs of the incoming class. Lastly, programs in the unit conduct student surveys to evaluate the efficiency of their respective service area.

The team received evidence that the process to identify the learning support needs of students that was reported in the College's Self Evaluation Report was being implemented. Referrals based on student needs were being made based on a needs assessment conducted by counselors. There was proof that this assessment began in high school for many students.

Conclusion

The College meets the Standard.

II.B.3.a. The institution assures equitable access to all of its students by providing appropriate, comprehensive, and reliable services to its students regardless of service location or delivery method.

Findings and Evidence

When the College offered courses at its outreach sites and via distance education (DE) all student services were available. A counselor was assigned to each outreach site and one counselor was assigned to DE students. All student services that were available to oncampus students were available to DE students.

The team met with the DE Student Service coordinator who is now the Admissions officer at the College and one Outreach counselor. Via an interview with the prior DE Student Services coordinator and an Outreach counselor the team received evidence that equitable access to all student support services was being offered to DE and CE students. The team found evidence in previous program reviews that the College was assessing its services to DE and CE students via program review.

Conclusion

The College meets the Standard.

II.B.3.b. The institution provides an environment that encourages personal and civic responsibility, as well as intellectual, aesthetic, and personal development for all of its students.

Findings and Evidence

The College encourages personal and civic responsibility through its campus clubs, career counseling, counseling courses, athletics, music groups, and activities planned via campus hours.

The team witnessed a Student Government meeting at the College. At the meeting, student government demonstrated how the campus clubs, athletics, and student activities committees encourage personal and civic responsibility, as well as intellectual, aesthetic, and personal development. The committees reported on specific activities related to this Standard. The team reviewed the course syllabus for the two counseling classes, and it is clear from these syllabi that what is covered in these classes meets the Standard.

Conclusion

II.B.3.c. The institution designs, maintains, and evaluates counseling and/or academic advising programs to support student development and success and prepares faculty and other personnel responsible for the advising function.

Findings and Evidence

The Counseling program has gone through a yearly program review since 2009, to evaluate its services and adjust program services based on input from different constituencies. The College's 1st Step priority is a result of the development of a new program in response to the unit's evaluation process. The College provides its counseling staff with professional development workshops twice a semester. Counselors are evaluated on a regular schedule. The College provides on-line orientation and provides counseling support via telephone or email for its distance students.

The team verified that the counseling program maintains and evaluates its counseling program to support student development and success. Evidence was provided to the team that demonstrated the College's counseling goals are aligned to the College's strategic goals and mission. The team found information that the College's counseling program has conducted a comprehensive program review and uses data to evaluate and improve its services. The team reviewed documents of in-service training for counselors, their tenure review process, and counselor peer evaluations.

Conclusion

The College meets the Standard.

II.B.3.d. The institution designs and maintains appropriate programs, practices, and services that support and enhance student understanding and appreciation of diversity.

Findings and Evidence

The institution designs and maintains appropriate programs, practices, and services that support and enhance student understanding and appreciation of diversity by integrating it into its counseling courses and student government activities.

The team witnessed evidence of this Standard being met first hand as the Student Government passed a resolution to support Women's Day at the College. In the discussion of the resolution the student senators referred to other events they had sponsored like VETs day, Black History Day, and support for the LBGTQ club. The team reviewed a syllabus for the counseling course that showed a part of the class dedicated to understanding and appreciating diversity.

Conclusion

II.B.3.e. The institution regularly evaluates admissions and placement instruments and practices to validate their effectiveness while minimizing biases.

Findings and Evidence

The institution regularly evaluates admissions and placement instruments and practices to validate their effectiveness and uses the state validated and approved assessment instruments. The Enrollment Operating Committee evaluates the effectiveness of the admissions process.

Imperial Valley College shows evidence of cut score validation and disproportionate impact studies for each subject that relies on a test for placement. The College uses a reputable consulting company to recommend placement cut scores for each level of each subject using statistical analysis and consequential validity. Evaluations of Accuplacer placement tests were conducted in English and math, dated 2006. In 2009 there was an ESL validation, and in 2011 there was an evaluation for new English courses being offered at the College. In fall 2013 another validation of the cut scores will take place. The team reviewed evidence that the Enrollment Operating Committee met after each registration cycle to review the admissions practices of the College. The team interviewed members of the Enrollment Operating Committee that demonstrates the College has made changes to its registration process based on recommendations from this committee.

Conclusion

The College meets the Standard.

II.B.3.f. The institution maintains student records permanently, securely, and confidentially, with provision for secure backup of all files, regardless of the form in which those files are maintained. The institution publishes and follows established policies for release of student records.

Findings and Evidence

The College's policy governing the maintenance of student's records adheres to federal mandated criteria and Title 5 of the California Education Code. The College's Admissions and Records unit secures all student records.

The College provided evidence that student records are secure and follow its policy related to the maintenance of student records. The College is moving to an electronic system that will provide even better security for the student records. The team physically inspected where student records were being secured and was able to verify that the student records were secure. In addition the team reviewed the policy to release information and inspected the form that needs to be submitted to release student information. The team verified that the College is in compliance with its published policy for release of student records.

Conclusion

II.B.4. The institution evaluates student support services to assure their adequacy in meeting identified student needs. Evaluation of these services provides evidence that they contribute to the achievement of student learning outcomes. The institution uses the results of these evaluations as the basis for improvement.

Findings and Evidence

The institution evaluates student support services to assure their adequacy in meeting identified student needs via its Student Area Outcome (SAOs). Each units SAOs are aligned to the College mission and strategic outcome. Prior to this school year, the College did a comprehensive program review every three years and a less robust review annually. By 2009 all student service units completed a comprehensive review. Starting last year, the College began doing yearly Program Reviews. The units analyze data to make program improvement in meeting goals and improving processes to be more efficient.

The team found evidence that each Student Service unit had identified Student Area Outcomes (SAOs) for its respective area. The SAOs are a combination of process and student learning outcomes. The SAOs are aligned to the College's mission and strategic goals although some units did not explicitly state them in their review. Each unit's program review includes student outcomes data and satisfaction survey data, the units use this data to analyze program services and adjust program services as appropriate to meet unit goals.

The College has recently transitioned to yearly Program Review. In the past, the Student Service units did annual reviews and a more robust comprehensive review in the 3rd year of annual reviews. The Vice President and two deans from Student Services recommended to the Student Services Council that Student Affairs move to an Annual Program review; in conjunction with the Educational Master Plan committee, a decision was made to go to Annual Program review. It was evident from interviews conducted by the team that staff believe that these Annual Program reviews are useful in assessing how the programs are performing and the unit utilizes these robust reviews to continually improve the quality of service they are delivering to their students.

Conclusion

The College meets the Standard.

Standard II.C. Library and Learning Support Services

The library and other learning support services for students successfully support the institution's instructional programs and activities. Such services include library services and resources, tutoring, learning centers, computer laboratories, and learning technology development and training. The institution systematically assesses these services using student learning outcomes, faculty input, and other measures in order to improve the effectiveness of the services.

II.C.1. The institution supports the quality of its instructional programs by providing library and other learning support services to facilitate educational offerings, regardless of location or means of delivery.

II.C.1.a. Relying on the appropriate expertise of faculty, including librarians and other learning support services professionals, the institution selects and maintains educational equipment and materials to support student learning and enhance the achievement of the mission of the institution.

Findings and Evidence

Library: In terms of selection of library materials, the Self Evaluation Report doesn't address the matter of who is consulted about acquiring materials for the collection. Interviews with the lead librarian, the other full-time librarian, and the appropriate dean indicated that librarians are primarily responsible for developing the collection. A review of the Library's Collection Development Policy requested during the visit indicates that the dean over the area has the primary responsibility for materials acquisition. However, the librarians reported that they do reach out to faculty and have received feedback on collection needs from the ESL and Nursing departments during the last year.

Labs: The Self Evaluation Report confirmed that the College has several labs with abundant equipment and materials to support student learning: Reading, Writing, Language, Study Skills. Each lab has current hardware and software. In addition to those centralized labs, there are two departmental labs in Mathematics and Business. Interviews with the Math Coordinator and the Department Chair for Business confirmed that they acquire sufficient and relevant software to meet the needs of the students utilizing their services.

Conclusion

The College meets the Standard.

II.C.1.b. The institution provides ongoing instruction for users of library and other learning support services so that students are able to develop skills in information competency.

Findings and Evidence

Library: Information literacy (IL) is an institutional learning outcome (ILO) for the College. However, beyond the 50-minute "one-shot" library instruction sessions, there is little evidence that information literacy is being integrated fully throughout the College. The Self Evaluation Report provides a definition of Information Literacy/Competency used by the College. However, a review of Course Outlines of Record, which align SLOs with ILOs, reveals a lack of understanding of what Information Literacy/Competency is.

Information gleaned from the Self Evaluation Report and interviews on-site indicate a history of library staff shortages. It has only been in the last three years that the library has had two

full-time librarians. Currently, the staffing level is 2.5 librarians. These librarian shortages have resulted in instability in librarian staffing which has impeded service and fulfilling the ILO of information literacy. Interviews revealed that the hire of the second librarian facilitated more outreach to faculty about information literacy/competency. For example, in 2010-11, the library conducted 102 library instruction classes, reaching 2,750 students. The library does offer on-ground and electronic reference, with QuestionPoint Reference Service, which enables them to teach students one-on-one.

Labs: The Study Skills Center and the Writing Lab offer workshops on library research skills and citing sources, per the Self Evaluation Report. The other labs did not report activities which integrate into this institutional ILO.

Conclusion

The College partially meets the Standard.

Recommendation

Recommendation 5 In order to increase effectiveness, the team recommends the College 1) provide further professional development about information literacy so that it is better understood and applied by faculty in their instruction and that information literacy is better integrated into the College's instructional planning and practices; 2) provide quality training in the effective application of its information technology to students and personnel, and 3) move forward with planning, implementing and evaluating for improvement, the professional development activities to meet the needs of its personnel. (II.C.1.b, III.A.5. a and b, III.C.1.b)

II.C.1.c. The institution provides students and personnel responsible for student learning programs and services adequate access to the library and other learning support services, regardless of their location or means of delivery.

Findings and Evidence

Library and Labs: The Library and Learning Services offer access to services and programs remotely, e.g., online databases accessed remotely and QuestionPoint electronic reference service; My Reading lab available remotely via authentication. The Library and labs offer hours for day and evening students. For example, the Library is open 8am-8pm Monday through Thursday, and 8am-3pm on Fridays; The Student Center Skills Center is open 9am-5pm Monday through Thursday and 9am-3pm on Friday; and the Reading and Writing Lab, Language and Business Labs are open 8:30am-7:45pm Monday through Thursday, 8:30am-3pm Friday. The Math Lab is open 8am-9pm Monday through Thursday, 8am-5pm Friday, and 9am-1pm on Saturday.

Conclusion

II.C.1.d. The institution provides effective maintenance and security for its library and other learning support services.

Findings and Evidence

Library and Labs: Library has a gate detection system. The building that houses the labs have alarm systems.

Conclusion

The College meets the Standard.

II.C.1.e. When the institution relies on or collaborates with other institutions or other sources for library and other learning support services for its instructional programs, it documents that formal agreements exist and tht such resources and services are adequate for the institution's intended purposes, are easily accessible, and utilized. The performance of these services is evaluated on a regular basis. The institution takes responsibility for and assures the reliability of all services provided either directly or through contractual arrangement.

Findings and Evidence

Library: The Self-Study Report enumerated the Library's formal agreements for its online catalog and periodical databases. Interviews with the full-time librarians confirm that the Library collects and analyzes usage data to assess the extent to which the services are being used.

Labs: My Reading Lab, TutorTrac and other purchased software have contractual agreements that are regularly monitored and documented, per evidence provided in the Self Evaluation Report.

Conclusion

The College meets the Standard.

II.C.2. The institution evaluates library and other learning support services to assure their adequacy in meeting identified student needs. Evaluation of these services provides evidence that they contribute to the achievement of student learning outcomes. The institution uses the results of these evaluations as the basis of improvement.

Findings and Evidence

Library: The Self Evaluation Report lacked evidence of evaluation of library services. Interviews and evidence collected during the visit demonstrate that the library collects a number of statistics to measure library use: usage and circulation data to determine use of materials; reference desk and library instruction statistics to determine the number of users served. In its most recent program review, the library evaluated its service area outcomes, tracking improvement in reaching out to faculty to increase the number of library instruction

sessions taught. The Library has not conducted customer satisfaction surveys in the past two years.

Labs: Most of the labs collect student survey data to gauge customer satisfaction, per the Self Evaluation Report. The Business lab doesn't perceive the need to evaluate services as it serves only to schedule and provide access to the software for students to complete assignments.

Conclusion

There is some data collection but little of it is used for evaluation for improvement. In terms of the surveys: they only address students and do not include input from faculty and staff.

The College partially meets the Standard.

Recommendation

Recommendation 6 In order to increase effectiveness, the team recommends that the College establish a systematic plan for evaluation of the library and learning services, beyond student surveys that address use and access, to include evaluation of the relationship of the services to intended student learning and that it include input by faculty and staff. (II.C. 2)

STANDARD III Resources

Standard III.A. Human Resources

The institution employs qualified personnel to support student learning programs and services wherever offered and by whatever means delivered, and to improve institutional effectiveness. Personnel are treated equitably, are evaluated regularly and systematically, and are provided opportunities for professional development. Consistent with its mission, the institution demonstrates its commitment to the significant educational role played by persons of diverse backgrounds by making positive efforts to encourage such diversity. Human resource planning is integrated with institutional planning.

III.A.1. The institution assures the integrity and quality of its programs and services by employing personnel who are qualified by appropriate education, training, and experience to provide and support these programs and services.

III.1.a. Criteria, qualifications, and procedures for selection of personnel are clearly and publicly stated. Job descriptions are directly related to institutional mission and goals and accurately reflect position duties, responsibilities, and authority. Criteria for selection of faculty include knowledge of the subject matter or service to be performed (as determined by individuals with discipline expertise), effective teaching, scholarly, and potential to contribute to the mission of the institution. Institutional faculty and

administrators are from institutions accredited by recognized U.S. accrediting agencies. Degrees from non-U.S. institutions are recognized only if equivalence has been established.

Findings and Evidence

The College has consistent practices and procedures in place to assure the qualifications of personnel. Prior to posting vacancy announcements, position descriptions are reviewed with department and divisions and as revised as necessary. Required and preferred educational level and experience is a part of the review. During the hiring process, minimum qualifications are triple checked, as verified and documented by the hiring committee chair, the Human Resources Analyst and the Associate Dean of Human Resources/EEO. Faculty minimum qualifications are followed as set by the Chancellor's Office. Candidates requesting equivalency review are forwarded to the IVC Equivalency Committee. Once hired, faculty are evaluated through the tenure process as defined by the faculty union contract. Classified and management employees are evaluated twice during their probationary period.

Applicants with degrees from non-U.S. institutions are instructed by the Human Resources Office that foreign transcripts must include an evaluation by a United States Clearing House and provides candidates with contact information for those agencies.

Program Review provides another level of quality assessment in terms of program effectiveness and staffing patterns. On a more global level, the Staffing Committee includes District wide representation and identifies in its scope of duties the analysis and planning of District staffing needs, the classification and reclassification of District staff, and organizational structure and function.

The Human Resources Office employees have substantial hard copy documentation of the procedures in place to assure consistent practices that support the employment of personnel who are qualified by appropriate education, training, and experience. Interviews with staff confirmed their proficiency with and knowledge of those procedures.

Conclusion

The College meets the Standard.

III.A.1.b. The institution assures the effectiveness of its human resources by evaluating all personnel systematically and at stated intervals. The institution establishes written criteria for evaluating all personnel, including performance of assigned duties and participation in institutional responsibilities and other activities appropriate to their expertise. Evaluation processes seek to assess effectiveness of personnel and encourage improvement. Actions taken following evaluations are formal, timely, and documented.

The tenure review process for Imperial Valley College faculty has received recent attention. The California Teachers Association (CTA) ratified Article 11 of the 2012-2013 contract in August 2012. Article 11 is devoted to tenure review and outlines evaluation criteria including students, professional responsibilities, classroom teaching responsibilities and non-classroom faculty duties. Article 11 goes on to outline the evaluation process and timelines. All actions related to the granting of a first and second year contract in tenure review are formal, timely and documented, as required by the CTA agreement.

Timely evaluation of part-time and tenured faculty is described as substantially improved by Human Resources staff, administrators, and the faculty union president. The improvement is attributed to centralizing the record keeping of faculty evaluations with the Vice President of Academic Services Office and the designation of a staff person in that office whose responsibility it is to track the timely completion of faculty evaluations. 2012-13 is described as a 'catch-up' year for all part-time faculty evaluations.

The Human Resources Office provides easy access to personnel forms on their website including the performance appraisal forms for probationary and permanent classified and management employees. The timely completion of employee evaluations is tracked electronically by the Human Resources Office. Reports are generated for managers listing all employees due for evaluation through a Performance Appraisal Report. Evaluations are performed twice during the probationary period and every two years thereafter for permanent employees and are conducted between February and April, due April 30th each year. Follow-up is provided by the Human Resources Office.

The CTA contract provides clear language regarding the expectations for tenure track faculty and the process for tenure review. All forms housed in the Human Resources Office are accessible on their department website including forms related to performance evaluation.

Conclusion

The College meets the Standard.

III. A.1.c. Faculty and others directly responsible for student progress toward achieving stated student learning outcomes have, as a component of their evaluation, effectiveness in producing those learning outcomes.

Findings and Evidence

The institution states in the Self Evaluation Report that Imperial Valley College partially meets this Standard because "faculty regularly evaluate SLOs and use that data to improve institutional effectiveness through discussion and revision." However there is the upfront acknowledgement that the College does not link SLOs specifically with the evaluation of faculty. The team found multiple examples of institutional expectations for faculty performance related to Student Learning Outcomes. The President of the Academic Senate

shared during an interview the expectation that all faculty include program outcomes and student learning outcomes on their syllabus. Confirmation of this practice was mentioned during an interview with the Associated Student Government President who shared that faculty review the syllabus during the first day of class in all of her classes and that they explain Student Learning Outcomes and Institutional Student Learning Outcomes. The Chair of the Curriculum Committee confirmed that Student Learning Outcomes are required on course outlines of record and that the SLOs are cross referenced with Institutional Student Learning Outcomes. A 2008 memorandum of understanding (MOU) between the District and faculty union states, under 15.1 Primary Workload Function, that the workload for members of the bargaining unit shall include the primary function of developing, assessing, and evaluating student learning outcomes. It was confirmed with the faculty union president that the 2008 MOU is still in place, yet the College offers no evidence that SLOs and assessment are part of the evaluation process for faculty.

Conclusion

It is evident to the team that Student Learning Outcomes and Institutional Learning Outcomes have been adopted by faculty, as documented in Program Review and confirmed in interviews. The element of Student Learning Outcomes as a component of faculty evaluation remains unresolved from the 2007 ACCJC Evaluation Report, Recommendation 2.

The College does not meet the Standard.

Recommendation

Recommendation 7 In order to meet the Standard the team recommends that faculty and others directly responsible for student progress toward achieving student learning outcomes, have as a component of their evaluation, effectiveness in producing those outcomes. (III.A.1.c)

III.A.1.d. The institution upholds a written code of professional ethics for all of its personnel.

Findings and Evidence

Administrative Policy 3050, Institutional Code of Ethics, was taken to the board in the form of Resolution 13937 in 2007. The Resolution put forth that the Code of Ethics embraces all employees and that the Academic Senate Code of Ethics Statement approved previously by the board, was used by College Council as the model for the College wide statement. The Code of Ethics is reinforced in reference to ethical standards in Tenure Review Article 11, Professional Responsibilities, for faculty which states that a contract employee who merits tenure maintains ethical standards. It was affirmed during interviews that the Code of Ethics is upheld in the sense that employee personnel actions have been taken with individuals whose behavior was inconsistent with the code. The Institutional Code of Ethics is posted on the College website.

The evidence provided with the Self Evaluation Report and during the visit added to content gained in interviews confirmed that the College upholds a written code of professional ethics for all personnel.

Conclusion

The College meets the Standard.

III.A.2. The institution maintains a sufficient number of qualified faculty with full-time responsibility to the institution. The institution has a sufficient number of staff and administrators with appropriate preparation and expertise to provide the administrative services necessary to support the institution's mission and purposes.

III.A.6. Human resources planning is integrated with institutional planning.

Findings and Evidence

The topic of staffing patterns has gained heightened awareness with the December 2012 release of Financial Crisis and Management Assistance Team (FCMAT) Management Review as contracted by Imperial Valley College. Assessment of what is and will be considered sufficient number of staff and administrators is underway as the recommendations related to staffing in the FCMAT report all lead the College toward reducing staff cost. The findings of the FCMAT team support the premise that there are currently a sufficient number of faculty, staff and administrators and provide recommendations for staffing reductions. Two recommendations address lowering the number of Vice Presidents and restructuring department chairs. The IVC Full-Time Faculty Obligation (FON) for fall 2012 is well above the required level as defined by the Chancellor's Office. A corresponding FCMAT recommendation is to consider reducing the number of funded full-time faculty positions over time through attrition or other means.

Approximately 30% of the FCMAT recommendations related to staffing are contract related and deemed negotiable with the faculty and classified unions. The remaining recommendations are being addressed by the Staffing Committee. The Staffing Committee evolved to a standing committee, from a sub-committee of the Educational Master Plan Committee, and includes District wide representation. The committee identifies its scope of duties as the analysis and planning of District staffing needs, the classification and reclassification of District staff, and organizational structure and function.

As a means of identifying and prioritizing needed College positions, divisions and departments submit personnel requests on Request for Resources forms in conjunction with completing the annual Program Review. Based on District-wide requests, the Curriculum Committee in consultation with Academic Senate ranks new faculty hires and the Staffing Committee ranks other positions. These ranking recommendations are then taken to the

Educational Master Planning Committee for review and recommendation to the Superintendent/President.

Qualifications of faculty, staff and administrators are assured during the hiring process through review and updating of position descriptions and corresponding minimum qualifications and the screening of specific candidate qualifications.

The FCMAT Report provides in-depth detail and comparative analysis of staffing levels with four comparative Colleges. Additionally, the Staffing Plan Committee Report provides criteria and ranking of non-faculty staffing requests and faculty position requests as identified by divisions and departments through Program Review. These requests are forwarded to the Educational Master Plan Committee. The minutes of the Staffing Committee are strong evidence that processes are in place for assessment of staffing levels at the College and that human resource planning is integrated with institutional planning, as are the minutes of the Educational Master Planning Committee and Academic Senate.

Conclusion

The College meets the Standard.

- III. A.3. The institution systematically develops personnel policies and procedures that are available for informational review. Such policies and procedures are equitably and consistently administered.
- III.A.3.a. The institution establishes and adheres to written policies ensuring fairness in all employment procedures.
- III.A.3.b. The institution makes provision for the security and confidentiality of personnel records. Each employee has access to his/her personnel records in accordance with the law.

Findings and Evidence

Demonstration of fair, equitable and consistent practices in Human Resources is evident from the time an individual applies for a position with Imperial Valley College, to their permanent and on-going employment. To minimize subjectivity and bias, applicants for all positions are blind screened based on responses to supplemental questions, without identifying candidate information. All members of a hiring committee receive the document, <u>Guidelines on Interview and Employment Application Questions</u>, with information on lawful Equal Employment Opportunity hiring practices.

An example of fairness in employment procedures is the Employee Conflict Resolution Process. The Employee Conflict Resolution Form and description of the process are both found on the Human Resources website. The purpose of the procedure is to establish a process for employees to express and work toward resolving issues in a fair and timely manner. The employee form specifies a sequence of steps toward resolution with a corresponding timeline.

The EEO Plan, as well as board polices and administrative procedures addressing equity and diversity, demonstrating the expectation for integrity in the treatment of personnel are readily available in one centralized College website. Board policies are created and/or reviewed and revised as prompted by Community College League of California board policy updates.

The College follows procedures as outlined in AP 7145, Personnel Files and described in the Self Evaluation Report. For the purposes of record security and accountability, the Human Resources Office is now the official repository of record for faculty and houses the tenured faculty records as well as the classified and management files.

Conclusion

The College meets the Standard.

- III.A.4. The institution demonstrates through policies and procedures an appropriate understanding of and concern for issues of equity and diversity.
- III.A.4.a. The institution creates and maintains appropriate programs, practices, and services that support its diverse personnel.
- III.A.4.b. The institution regularly assesses that its employment equity and diversity is consistent with its mission.
- III.A.4.c. The institution subscribes to, advocates for, and demonstrates integrity in the treatment of its administration, faculty, staff, and students.

Findings and Evidence

Imperial Valley College demonstrates understanding and implementation of policies, procedures and practices that support equity and diversity. Faculty evaluation sets the tone with tenure review policy that states in Board Policy 11.2.1 that an employee who merits tenure is responsive to the educational and individual needs of students by exhibiting awareness of, and sensitivity to, the diversity of cultural backgrounds, lifestyles, learning styles, and goals of students, as well as gender and age differences. Prominently available on the Human Resources website are employee forms available for down load including an ADA Accommodation Request and an Unlawful Discrimination Complaint Form. Harassment and discrimination prevention training has been mandated for all employees and is available online for non-supervisory employees.

Board policies BP3410 Nondiscrimination and BP3420 Equal Employment Opportunity are in place in addition to administrative procedures AP3410 Nondiscrimination, AP3420 Equal Employment Opportunity, AP3430 Prohibition of Harassment and AP7100 Commitment to Diversity. The charge of the newly formed standing committee, the Staffing Committee, includes review of the EEO Plan and associated employment equity and diversity. Employee demographics including ethnicity, gender, and age are cited in the IMV Fact Book 2011-2012 along with the same data for enrolled students. During an interview with the Associated Student Government president, it was shared that Institutional Student Learning

Outcome, Global Awareness, has been consistently addressed by ASG through diversity activities throughout the years and that staff and faculty have actively engaged and supported students with these events.

The College's assertion that all three Standards are met was verified and augmented through review of physical evidence and interviews. The Human Resources website provides easy access to diversity related employee materials. Board policies have been in place since 2004. A review of Staffing Committee description, minutes and an interview with the committee members revealed that discussion and assessment of employment equity and diversity has taken place and is scheduled for on-going dialog, assessment and related recommendations.

The Self Evaluation Report states that the Standard is met because policies are applied equitably and consistently without providing substantive evidence. However, interviews with employees and additional hardcopy evidence provided during the visit did substantiate that appropriate policies and procedures are in place. Both the classified employee and faculty union presidents expressed the sentiment that HR policies are fairly and consistently administered.

Conclusion

The College meets the Standard.

III.A.5. The institution provides all personnel with appropriate opportunities for continued professional development, consistent with the institutional mission and based on identified teaching and learning needs.

III.A.5.a. The institution plans professional development activities to meet the needs of its personnel.

III.A.5.b. With the assistance of the participants, the institution systematically evaluates professional development programs and uses the results of these evaluations as the basis for improvement.

Findings and Evidence

The District has struggled with providing professional development opportunities to meet the needs of its personnel. In the words of the Self Evaluation Report, "...there seems to be no clear path for moving forward." As recently as January 2011, the College held a successful Professional Development Day. Surveying the participants lead to the recommendation that additional flex days be added for professional development and that a faculty coordinator for professional development be created. At the time of the visit, neither proposal was in place.

In spite of the challenges, the College does offer professional development opportunities. The Student Learning Outcomes Coordinator provides training to faculty and to all departments across the District. Project ATLAS established training for faculty to develop and deliver instruction infused with technology. The grant provides funding for training in culturally responsive teaching, collaborative and contextualized learning, and technology and

social media. Faculty interested in teaching via distance education are offered a four week course on Blackboard. The Human Resources Office regularly offers management training through Liebert Cassidy Whitmore.

During the team visit, College Council was debating whether to support the continuance of College Hour. The concept of College Hour originated in Academic Senate, with professional development in mind and has been enthusiastically supported by Student Government who has used the unscheduled class hour on Tuesdays and Thursdays for student driven social and cultural activities. After much discussion, College Council voted to support continuing College Hour.

Interviewees confirmed that there is limited travel and conference funding in department budgets and that faculty and some staff and managers attend off campus workshops and conferences. There is, however, no assessment of those activities in terms of determining whether they meet the needs of personnel.

The District has identified an Actionable Improvement Plan for this Standard: "In order to ensure that the needs of all personnel are met, the College will review the recently implemented College Hour, assess the current reassigned time for faculty coordinators of Professional Development activities, and conduct staff surveys related to staff development needs."

Conclusion

The institution lacks systematic evaluation of professional development activities. No evidence was found that assessment and improvement of professional development is in place.

The College partially meets the Standard.

Recommendation

See Recommendation 5.

Standard III.B. Physical Resources

Physical resources, which include facilities, equipment, land, and other assets, support student learning programs and services and improve institutional effectiveness. Physical resource planning is integrated with institutional planning.

III.B.1.a. The institution plans, builds, maintains, and upgrades or replaces its physical resources in a manner that assures effective utilization and the continuing quality necessary to support its programs and services.

Findings and Evidence

The institution has relied primarily upon the Facility Master Plan that was created in 2006 for guidance in the development of its facilities.

The College greatly enhanced its ability to support student learning programs and services and improve institutional effectiveness with the passage of its two Proposition 39 General Obligation Bond Measures. In 2004 Measure L was passed in the amount of \$58.6 million and in 2010 Measure J was passed for \$80 million.

In accordance with the provisions of Proposition 39 requirements, a Citizens' Bond Oversight Committee was formed to oversee the expenditure of the general obligation bond funds. This committee is charged with overseeing the expenditure of bond proceeds and ensuring that the proceeds are expended only for the purposes set forth in Measure L and Measure J.

The Ten Year Master Site Plan was created and reflects the expected construction projects that these monies will be utilized to fund. IVC has decided to construct its new buildings to Leadership in Environmental Engineering and Design (LEED) Standards and the Science Building (building 2700) that was completed in January 2010 became the first LEED certified Science Building (silver) in Southern California.

Ongoing facility needs of the College are identified each year in the Five Year Plan that is sent to the California Community Colleges State Chancellors Office.

The College has been relying upon its original Facility Master Plan that was created in 2006. The College is encouraged to provide regular updates to its Facility Master Plan. The College provides many opportunities for staff input during the planning and development stages of new facilities, and the renovation of its existing facilities.

Conclusion

The College meets the Standard.

III.B.1.b. The institution assures that physical resources at all locations where it offers courses, programs, and services are constructed and maintained to assure access, safety, security, and a healthful learning and working environment.

Findings and Evidence

The College utilizes the services of consultants provided through its Insurance Providers with expertise in the areas of safety and training to assure that physical resources are constructed and maintained to offer access, safety, security, and a healthful learning and working environment.

The Safety Committee has members representing all constituent groups and meets at least quarterly. Safety inspections are regularly performed by personnel from the Maintenance Department, Safety and Security Department, local Joint Powers Authority, County Fire Department, and the County Health Department. Annual safety inspections are performed by independent consultants. These independent consultants also provide specialized training to College staff on safety as well as appropriate operation of equipment.

The College currently does not have any off campus instructional sites.

Conclusion

The College meets the Standard.

III.B.2. To assure the feasibility and effectiveness of physical resources in supporting institutional programs and services, the institution plans and evaluates its facilities and equipment on a regular basis, taking utilization and other relevant data into account.

Findings and Evidence

Workers Compensation and Property and Liability carriers conduct periodic site reviews and formulate recommendations relative to acquisition of equipment. The College plans and evaluates its facilities and equipment on a regular basis, taking utilization and other relevant data into account and assures the feasibility and effectiveness of physical resources in supporting institutional programs and services.

Conclusion

The College meets the Standard.

III.B.2.a. Long-range capital plans support institutional improvement goals and reflect projections of the total cost of ownership of new facilities and equipment.

Findings and Evidence

Currently the College relies primarily on its Five Year Plan for Construction for its long-range capital plans to support institutional improvement goals and reflect projections of the total cost of ownership of new facilities and equipment.

Conclusion

The College meets the Standard.

III.B.2.b. Physical resource planning is integrated with institutional planning. The institution systematically assesses the effective use of physical resources and uses the results of the evaluation as the basis for improvement.

Findings and Evidence

Physical resource planning is integrated with institutional planning. The linkage between the Educational Master Plan and physical resource planning allows the institution to ensure that its physical resources planning is thoroughly incorporated into its institutional planning. This linkage contributes to the institution's accomplishment of its identified student learning outcomes and allows the institution to systematically assess the effective use of physical resources and use the results of that evaluation as the basis for improvement.

An electronic work order system has been implemented by the maintenance department. This system provides online capabilities for maintenance department employees in managing work order requests that relate to its facilities. This program provides for the automatically assignment of work orders to specific staff in the maintenance department, the ability to electronically monitor the status of requests received as well as the final disposition of all physical plant work orders received. In addition, College employees have online access to learn the status of work orders that have been submitted.

Overall, it is readily apparent that the College provides safe and sufficient physical resources that support and assure the integrity and quality of its programs and services.

Conclusion

The College meets the Standard.

Standard III.C Technology Resources

Technology resources are used to support student learning programs and services and to improve institutional effectiveness. Technology planning is integrated with institutional planning.

- III.C.1. The institution assures that any technology support it provides is designed to meet the needs of learning, teaching, College-wide communications, research, and operational systems.
- III.C.1.a. Technology services, professional support, facilities, hardware, and software are designed to enhance the operation and effectiveness of the institution.
- III.C.1.b. The institution provides quality training in the effective application of its information technology to students and personnel.
- III.C.1.c. The institution systematically plans, acquires, maintains, and upgrades or replaces technology infrastructure and equipment to meet institutional needs.
- III.C.1.d. The distribution and utilization of technology resources support the development, maintenance, and enhancement of its programs and services.
- III.C.2. Technology planning is integrated with institutional planning. The institution systematically assesses the effective use of technology resources and uses the results of evaluation as the basis for improvement.

Findings and Evidence

Imperial Valley College has demonstrated a widespread awareness of technology challenges and the need to meet them in a timely manner. The institution has included technology access and its use in support of teaching, learning, communications, research, and operations.

Based on the evidence provided, including the Technology Plan, Imperial Valley College has committed to provide a full range of technology resources in support of its instructional

programs, student services, and administrative operations. This College wide commitment is especially apparent from numerous interviews with management, staff, and faculty members themselves. Clearly, this effective operational technology continues to be a major and distinctive characteristic at Imperial Valley College. Some of the technology infrastructure has been implemented by funding from the ATLAS Grant and bond monies.

Technology needs and support services are formulated through numerous committees like the Technology Planning Committee, Facilities & Environmental Improvement Committee and the program review process. Student input to the technology needs of the campus is submitted via the Student Technology Advisory Committee, which has a sitting member on the Technology Planning Committee.

Even though the ATLAS Grant provides funds for professional development and training, these opportunities are not as developed or as widespread when compared to the amount of technology being implemented at the College. This is especially true in regards to faculty and student development in using these new technologies for distance education.

The College implemented a moratorium on distance education for the 2012/2013 academic year. During interviews with staff and faculty, it was explained to the visiting team that the hiatus of DE courses was to allow the implementation of a new Learning Management System – BlackBoard 9 and the retraining of the distance education (DE) faculty.

The year without DE courses will allow the College to slowly reintroduce DE courses in Fall 2013 with faculty that have been trained in the new BlackBoard 9 system and in best practices for delivering DE courses.

Conclusions

Since the last accreditation visit, Imperial Valley College has worked systematically on improving institutional planning and resource allocations incorporating technology resources. In addition to inclusion in the main Educational Master Plan, individual planning documents, such as the Strategic Technology Plan 2011-2015 and Strategic Technology Plan, Updated, 1/12/12, outline infrastructure and services that support teaching with student learning with the ultimate goal of improving institutional effectiveness.

Even though the ATLAS Grant provides funds for professional development and training, these opportunities are not as developed and or as widespread when compared to the amount of technology being implemented at the College. This is especially true in regards to faculty and student development in using these new technologies for distance education.

The College partially meets the Standard.

Recommendations

See Recommendations 1 and 5.

Standard III.D Financial Resources

Financial resources are sufficient to support student learning programs and services and to improve institutional effectiveness. The distribution of resources supports the development, maintenance, and enhancement of programs and services. The institution plans and manages its financial affairs with integrity and in a manner that ensures financial stability. The level of financial resources provides a reasonable expectation of both short-term and long-term financial solvency.

III.D.1.a. Financial planning is integrated with and supports all institutional planning.

Findings and Evidence

Like many California community colleges and other institutions in the ACCJC/WASC region, Imperial Valley College has labored under insufficient budgets for many years. It has been successful in acquiring external funding for facilities and equipment improvements through bond measures, grants, and has developed new program directions through industry partnerships.

The College has also been very effective in its efforts to convey to its employees an accurate perception of its current financial position using the Fiscal Crisis & Management Assistance Team (FCMAT) Report that was received in December 2012. The team consistently heard comments expressing the awareness that the specific recommendations contained in the FCMAT report need to be seriously considered, pursued, and implemented.

The College is currently in a very tight budget year and realizes that next year will be even more challenging unless significant changes to its financial situation occur. The common theme that is also conveyed is that all employees and groups have input into the budgeting process and that the administration is sensitive to their individual and area needs. The President of Imperial Valley College and the Board of Trustees are fully engaged in pursuing the many recommendations provided in the FCMAT Report.

The College has implemented a large number of individual plans that address many facets of the organization. The Budget and Fiscal Planning Committee is composed of members from all constituent groups of the College. It meets the fourth Wednesday of each month during the Fall and Spring Semesters and is the venue for ongoing analysis of the financial health of the College. Minutes from these meetings reflect ongoing discussions on the current financial situation of the College and the need to implement recommendations from the FCMAT report in order for the institution to avoid insolvency.

A Strategic Transition Action Response Team (START) was established during the Fall of 2012 with members from the Executive Council, administration, faculty, and classified employee groups to act as a recommending body to the Board of Trustees and the College president and to facilitate the transition from recommendations to implementation.

The College is very effective in determining and sharing information relative to conveying both its short-range and long-range financial priorities. Monthly Financial Statements to the Board of Trustees as well as the Quarterly Financial Statements are very comprehensive. However, the

institution still faces the challenge of integrating its financial planning with the other individual plans that are developed within the College.

Conclusion

The College partially meets the Standard.

Recommendation

Recommendation 8 In order to meet the Standard, the team recommends the College develop a financial strategy that will result in balanced budgets that have ongoing revenues to meet or exceed its ongoing expenditures without the use of reserves; maintain the minimum prudent reserve level; and address funding for its long term financial commitments and its retiree health benefits costs. (III.D.1.a, III.D.3.a, III.D.4, IV.B.1.c, IV.B.2.d)

III.D.1.b. Institutional planning reflects realistic assessment of financial resource availability, development of financial resources, partnerships, and expenditure requirements.

Findings and Evidence

The College has been very diligent in pursuing financial resources from a wide variety of sources. Its successful Bond efforts of 2004 and 2010 have provided \$138.6 million dollars to the College, in addition to state and private funding procurement.

The team notes that the district has made improvements in its construction management processes and has been seeking to incorporate the Total Costs of Ownership in its planning for new buildings. The team also noted that important partnerships with industry are underway that support new program developments, such as in the Bus Transfer Terminal and the Red Cross Shelter Agreement further maximizing resources.

Conclusion

The College meets the Standard.

III.D.1.c. When making short-range financial plans, the institution considers its long-range financial priorities to assure financial stability. The institution clearly identifies and plans for payment of liabilities and future obligations.

Findings and Evidence

College staff are monitoring the discussions occurring at the State level relative to the Current FY 2012-2013 and developing FY 2013-2014 State Budgets. The College anticipates ending FY 2012-2013 with the six percent board recommended reserve. Long-term liabilities and obligations are identified and planned for the district level. The district tracks GASB 45 post employment retirement benefits liability. Building maintenance, insurance, and debt expenses are identified during program review and planning occurs with respect to funding these obligations.

Conclusion

III.D.1.d. The institution clearly defines and follows its guidelines and processes for financial planning and budget development, with all constituencies having appropriate opportunities to participate in the development of institutional plans and budgets.

Findings and Evidence

The budget development procedures and timelines are readily available on the College website, distributed directly through the email system, and handed out as hard copy at meetings and campus town hall gatherings. The Budget and Fiscal Planning Committee has representatives from all constituent groups of the College. The College is considering several strategies to address this long-term financial need during its planning for the next fiscal year.

Conclusion

The College meets the Standard.

III.D.2.To assure the financial integrity of the institution and responsible use of financial resources, the financial management system has appropriate control mechanisms and widely disseminates dependable and timely information for sound financial decision-making.

III.D.2.a. Financial documents, including the budget and independent audit, have a high degree of credibility and accuracy, and reflect appropriate allocation and use of financial resources to support student learning programs and services.

Findings and Evidence

The institution manages its finances in accordance with accepted practices and provides the necessary oversight for its funds and processes. The College maintains a regular schedule of audits, extends its oversight to auxiliary and fund-raising functions, manages contracts in accordance with accreditation and administrative Standards, and provides broad information about its financial planning and processes.

The College contracts with an independent auditing firm for its annual audit. Annual independent performance audits and financial audits are performed as required for the Colleges general obligation bonds. In addition numerous reviews of financial management records for categorically funded programs occur throughout each year relative to its categorically funded programs to ensure compliance with state and federal requirements.

As it has for several years, the College again received an unqualified audit with no findings in its Annual Audit for FY 2011-2012.

Conclusion

III.D.2.b. Institutional responses to external audit finding are comprehensive, timely, and communicated appropriately.

Findings and Evidence

As it has for several years, the College again received an unqualified Annual Audit for FY 2011-2012 with no findings.

Conclusion

The College meets the Standard.

III.D.2.c. Appropriate financial information is provided throughout the institution in a timely manner.

Findings and Evidence

Financial information is provided at monthly Board of Trustee meetings. Monthly updates by the Administrative Services on the financial status of the College, Quarterly 311 reports, a tentative budget and the final annual budgets are provided to the Board of Trustees. This information is also made available on the College's website.

Budget information is available through Banner to all administrators, faculty and classified staff. Formal financial discussions take place in both Executive Council and Budget and Planning meetings. The College President has also held Townhall meetings to both circulate financial information and facilitate budget discussions among the various stakeholders groups.

Conclusion

The College meets the Standard.

III.D.2.d. All financial resources, including short and long term debt instruments (such as bonds and Certificates of Participation), auxiliary activities, fundraising efforts, and grants are used with integrity in a manner consistent with intended purpose of the funding source.

Findings and Evidence

The College pursues appropriate strategies for risk management through participation in several JPA's with other institutions of higher education. The institution has sufficient cash flow to maintain stability and strategies for appropriate risk management. The financial resources from the College's auxiliary activities and from fundraising efforts and grants are used with integrity and in a manner consistent with the College mission and goals. These organizations are included in the district annual independent audit report.

The College has appropriate checks and balances in place to ensure that all grant applications are approved at the appropriate level of the College prior to grant applications being submitted to funding sources.

As it has for several years, the College again received an unqualified audit with no findings in its Annual Audit for FY 2011-2012.

Conclusion

The College meets the Standard.

III.D.2.e. The institution's internal control systems are evaluated and assessed for validity and effectiveness and the results of this assessment are used for improvement.

Findings and Evidence

The College has appropriate internal control systems in place. Annual audits are performed by an independent auditing firm and the College has received unqualified audits with no findings for the past several years.

Conclusion

The College meets the Standard.

III.D.3. The institution has policies and procedures to ensure sound financial practices and financial stability.

III.D.3.a. The institution has sufficient cash flow and reserves to maintain stability, strategies for appropriate risk management, and realistic plans to meet financial emergencies and unforeseen occurrences.

Findings and Evidence

The budgetary constraints that the College has recently faced have caused the institution to attend even more closely to issues of financial management. The College's budgetary pressures have resulted in the institution utilizing funds from its reserves in its annual budgets for several years and resulted in a significant decrease in its reserves. In order to accomplish a break-even budget the College contributed funds to its annual operating budget from its reserves for four of the most recent years. While this is occasionally utilizing reserves as part of the annual budget is the purpose for which an institution has reserves, the continual use of reserves in annual financial budgets as has taken place at IVC is a serious concern. The current projected IVC ending reserve amount for FY 2012-2013 is 6%. This is down from a reserve of 27.20% at the beginning of FY 2007-2008.

Having realized that the minimum 5% reserve required by the California Community Colleges State Chancellors Office is in reality an exceptionally low number, the College is in the process of identifying what this minimum reserve amount should be and anticipates taking this number to the IVC Board of Trustees for their approval in the very near future.

Financial resource planning is only partially integrated with institutional planning.

Conclusion

The College partially meets this Standard.

Recommendation

See Recommendation 8.

III.D.3.b. The institution practices effective oversight of finances, including the management of financial aid, grants, externally funded programs, contractual relationships, auxiliary organizations or foundations, and institutional investments and assets.

Findings and Evidence

The college and Foundation audits provide evidence of effective oversight of finances. Audits include an analysis of financial aid, grants, externally funded programs, contractual relationships, auxiliary organizations, and foundations. The staffing in the fiscal area is experienced and provide appropriate services for oversight and acceptable accounting practices.

The College's Vice President for Business Services or designee is in charge of maintaining and monitoring the district's finances, financial aid, grants, externally funded programs, contractual relationships, auxiliary organizations, and assets. All investments are handled by the Imperial County Treasurer as part of the county-wide pool.

Revenues and expenses are coded appropriately for ease of reporting and tracking. Management has online access to all of accounting and budget information. Budget management is in accordance with Administrative Procedure 6250, Budget Management.

Quarterly reports (CCFS 311Q) are presented to the board showing the financial and budgetary conditions of the district. The quarterly reports are posted on-line with the Board of Trustees agendas and are also available on the college website.

The management of financial aid at Imperial Valley College separates the functions of awarding from disbursement. Over 90% of the financial aid disbursement is accomplished via the IVC Debit Card.

The College manages all of it federal, state and local grants and externally funded programs effectively.

The district's auxiliary organizations include a cafeteria and a bookstore. Both services are provided by independent contractors.

The Imperial Valley College Foundation is a 501(c)3 non-profit organization with its own executive director and board. The Foundation board has its own investment policy. The college's Vice President for Business Services and the Director of Fiscal Services sign all checks for the Foundation.

The College maintains all funds with the Imperial County Treasurer and all investments are part of the county pool.

The College contracts with Asset Works to maintain the college wide inventory and capitalization of fixed assets. The Director of Purchasing and Accounting compiles annual updates of the college wide inventory and a report is generated by Asset Works as required by GASB 34/35.

Conclusion

The College meets the Standard.

III.D.3.c. The institution plans for and allocates appropriate resources for the payment of liabilities and future obligations, including Other Post-Employment Benefits (OPEB), compensated absences, and other employee related obligations.

Findings and Evidence

The College has been having actuarial studies on its retiree health benefits program accomplished every two years as required by law. These studies determine the amount needed to fully fund the retiree health benefits plan. The most recent study was accomplished in the fall of 2011. IVC has been paying only the "pay as you go" plan and the total cost to completely fund this program is of great concern to the College leadership. Imperial Valley College faces a major challenge regarding the long-term liability caused by retiree health benefits.

Conclusion

The College partially meets the Standard.

Recommendation

See Recommendation 8.

III.D.3.d.The actuarial study to determine Other Post-Employment Benefits (OPEB) liability is prepared, as required by appropriate accounting standards.

Findings and Evidence

The College has been having actuarial studies on its retiree health benefits program accomplished every two years as required by law. These studies determine the amount needed to fully fund the retiree health benefits plan. The most recent study was accomplished in the fall of 2011.

Conclusion

The College meets the Standard.

III.D.3.e. On an annual basis, the institution assesses and allocates resources for the repayment of any locally incurred debt instruments that can affect the financial condition of the institution.

Due to the State of California's cash flow problems, Imperial Valley College, like many of the other California Community Colleges, has had to consistently borrow funds in order to be able to pay its financial obligations in a timely manner. The College utilizes Tax Revenue Anticipation Notes (TRANS) to insure the availability of funds to pay its financial obligations in a timely manner. This is the mechanism that most California Community Colleges utilize for this purpose. This results in an interest expense of \$155,000 each year to the College.

Conclusion

The College meets the Standard.

III.D.3.f. Institutions monitor and manage student loan default rates, revenue streams, and assets to ensure compliance with federal requirements.

Findings and Evidence

The College does not participate in the Student Loan Programs.

Conclusion

The College meets the Standard.

III.D.3.g. Contractual agreements with external entities are consistent with the mission and goals of the intuition, governed by institutional policies and contract appropriate provisions to maintain the integrity of the institution.

Findings and Evidence

All Imperial Valley College contracts with outside agencies are consistent with the mission and goals of the institution. All contracts and agreements are reviewed for scope of service and binding legal requirements. All contracts and agreements are reviewed by the area vice-presidents and president and also by legal counsel as appropriate. All contracts are approved by the board of trustees.

Conclusion

The College meets the Standard.

III.D.3.h. The institution regularly evaluates its financial management processes, and the results of the evaluation are used to improve internal control structures.

Findings and Evidence

The College has an annual audit by an independent accounting firm. Results are reviewed by the administration as well as the Board of Trustees. The College assesses the use of financial resources though monthly reports to the Board of Trustees, quarterly (CCSF 311 –Q) reports to the Board of Trustees and the State Chancellors Office, and through its program review process

Imperial Valley College also employed the services of the Fiscal Crisis Management and Assessment Team (FCMAT) during the Spring of 2012 and received the final report from FCMAT

in December 2012. The College is in the process of analyzing and implementing the 74 recommendations listed in the FCMAT report.

Conclusion

The College meets the Standard.

III.D.4. Financial resource planning is integrated with institutional planning. The institution systematically assesses the effective use of financial resources and uses the results of the evaluation as the basis for improvement of the institution.

Findings and Evidence

The FCMAT report that was received in December 2012 provides significant analysis of the fiscal situation that IVC is currently in. Data analysis points to many serious concerns such as the fact that the institution currently expends approximately 92 percent of its budget on salaries and fringe benefits. This and other imbalances will be a significant deterrent as the College efforts to reduce operational expenses to be in line with the amount of revenue that the College receives. There is great awareness of this problem throughout the institution. The institution is to be commended that in tight budget times its employees agreed to furloughs and a freeze in the salary steps for two years. This reflects a dedication to the College by its employees that is very rare.

Overall, Imperial Valley College is facing multiple financial challenges due to underfunding, the impending impact of a long-term financial liability, its recent trend of using reserves to balance annual budgets, and the high proportion of personnel costs within its overall budget. In order to prepare for the future and ensure the institution's financial stability, the College leadership will need to develop new plans and strategies through a process that has already been initiated by the President of IVC which is utilizing the 74 recommendations in the December 2012 FCMAT report in efforts to stabilize the financial situation of the College.

Conclusion

The College partially meets this Standard. The 2013 visiting team notes that the institution only partially meets Standard III.D.1.a, III.D.3.a., and Standard III.D.4. The visiting accreditation team in 2007 found the institution did not meet Standard III.D.1.a.

Recommendation

See Recommendation 8.

Standard IV Leadership and Governance

Standard IV.A. Decision-Making Roles and Process

The institution recognizes and utilizes the contributions of leadership throughout the organization for continuous improvement of the institution. Governance roles are designed to facilitate decisions that support student learning programs and services and improve institutional effectiveness, while acknowledging the designated responsibilities of the governing board and the chief administrator.

IV.A.1. Institutional leaders create an environment for empowerment, innovation, and institutional excellence. They encourage staff, faculty, administrators, and students, no matter what their official titles, to take initiative in improving the practices, programs, and services in which they are involved. When ideas for improvement have policy or significant institution-wide implications, systematic participative process are used to assure effective discussion, planning, and implementation.

Findings and Evidence

Imperial Valley College has been quite diligent in developing policies, processes and committees to ensure well-defined governance roles, participation by campus and community, and ways of assessing institutional excellence. The concern for lack of participation expressed in the 2007 team visit appears to have improved, especially in the last two years.

Conclusion

Both campus interviews during the visit and the written evidence from the Self Evaluation Report confirm that all campus constituent groups are encouraged to take initiative in improving programs and services in which they are involved, as well as providing ideas for campus wide improvement. As this was a recommendation in 2007, it is an important accomplishment.

The College meets the Standard.

IV.A.2. The institution establishes and implements a written policy providing for faculty, staff, administrator, and student participation in decision-making processes. The policy specifies the manner in which individuals bring forward ideas from their constituencies and work together on appropriate policy, planning and special purpose bodies.

Findings and Evidence

All the required policies for decision-making are in place. They include several bodies, including the Academic Senate, College Council, Educational Master Plan Committee, Continuous Accreditation Readiness Team (CART), and many more committees, ad hoc committees, and forums that allow a place for anyone to comment and provide input.

Conclusion

The College meets the Standard.

IV.A.2.a. Faculty and administrators have a substantive and clearly defined role in institutional governance and exercise a substantial voice in institutional policies, planning, and budget that relate to their areas of responsibility and expertise. Students

and staff also have established mechanisms or organizations for providing input into institutional decisions.

Findings and Evidence

While the Self Evaluation Report outlines the significant role faculty play in governance, other than College Council, there was no defined role for administrators in this process. The exception to this was stated to be the Superintendent/President who is the recommender to the Board of Trustees according to the Report. However, on site interviews with academic administrators and others verified that there is a substantial administrative voice in institutional policies, planning, and budget relating to their areas of responsibility and expertise. In addition, interviews with students and the Associated Student Group (ASG) President confirmed students have a significant voice and role in decision-making and governance. An ASG member sits on each College committee. There is also a recently developed Student Technology Advisory Committee (STAC).

Conclusion

Processes and numerous opportunities exist for providing input into institutional decisions (ad hoc committees, committees, organizations, and forums). However, it was not clear what the calendar was for the established mechanisms.

The College meets the Standard.

IV.A.2.b. The institution relies on faculty, its academic senate or other appropriate faculty structures, the curriculum committee, and academic administrators for recommendations about student learning programs and services.

Findings and Evidence

Once again, the faculty role in making recommendations about student learning and support was very well detailed in the Self Evaluation Report, but not the academic administrators' role. On site interviews with academic administrators confirmed that there are appropriate avenues for both faculty and academic administrators to provide input about student learning programs and services.

Conclusion

The College meets the Standard.

IV.A.3. Through established governance structures, processes and practices, the governing board, administrators, faculty, staff and students work together for the good of the institution. These processes facilitate discussion of ideas and effective communication among the institution's constituencies.

There are many policies, processes and committees to ensure that all groups are working together. On site evidence and interviews confirmed there is broad participation in these opportunities for input.

Conclusion

The College meets the Standard.

IV.A.4. The institution advocates and demonstrates honesty and integrity in its relationships with external agencies. It agrees to comply with Accrediting Commission standards, policies, and guidelines, and Commission requirements for public disclosure, self-study and other reports, team visits and prior approval of substantive changes. The institution moves expeditiously to respond to recommendations made by the Commission.

Findings and Evidence

All materials related to accreditation are easily accessible on the website. Evidence from the College demonstrated compliance with accreditation requirements (substantive changes, midterm and focused reports) as well as U.S. Department of Education requirements. College staff, faculty, and administrators participate in the CART committee, and the ASG started accreditation forums held during the College Hours (Tuesday and Thursday at 12:00 pm), along with other topics such as global awareness and diversity.

Conclusion

The College meets the Standard.

IV.A.5. The role of leadership and the institution's governance and decision-making structures and processes are regularly evaluated to assure their integrity and effectiveness.

Findings and Evidence

There is a great deal of evidence of evaluation of the decision-making structures. The only item that is not clear is if there is a systematic and regular schedule of evaluation. The team suggests it would be helpful to have this kind of schedule on a grid so that it is clear that none of the decision-making entities are being overlooked. A special note should be made of the College's voluntary request for a FCMAT study that has been widely distributed.

Conclusion

The College partially meets the Standard.

Recommendation

See Recommendation 1.

IV.B. Board and Administrative Organization

In addition to the leadership of individuals and constituencies, institutions recognize the designated responsibilities of the governing board for setting policies and of the chief administrator for the effective operation of the institution. Multi-College districts/systems clearly define the organizational roles of the district/system and the Colleges.

IV.B.1. The institution has a governing board that is responsible for establishing policies to assure the quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution. The governing board adheres to a clearly defined policy for selecting and evaluating the chief administrator for the College or the district/system.

Findings and Evidence

The policies of the College provide for an appropriate definition of roles for the Board and the CEO. The Board's authority for policy regarding student learning, fiscal stability, and hiring/evaluating the CEO is clearly defined in policy and in practice.

Conclusion

The College meets the Standard.

IV.B.1.a. The governing board is an independent policy-making body that reflects the public interest in board activities and decisions. Once the board reaches a decision, it acts as a whole. It advocates for and defends the institution and protects it from undue influence or pressure.

Findings and Evidence

The Board takes their role in setting policy seriously. They also define proper behavior for speaking with one voice, conflict of interest, and representing the College in the community.

Conclusion

The College meets the Standard.

IV.B.1.b. The governing board establishes policies consistent with the mission statement to ensure the quality, integrity, and improvement of student learning programs and services and the resources necessary to support them.

Findings and Evidence

It is clear from the policies examined, minutes of meetings, and budget process that the Board has worked to ensure successful instruction to students and appropriate support. Evidence demonstrated that policies are evaluated and improved as needed.

Conclusion

The College meets the Standard.

IV.B.1.c. The governing board has ultimate responsibility for educational quality, legal matters and financial integrity.

Findings and Evidence

Once again, the Board has established policies in all these areas. As to monitoring "success and effectiveness" through presentations at Board meetings, the Board is actively participating in the discussions relating to the recommendations in the Fiscal Crisis and Management Assistance Team (FCMAT) report. However, the Board has the responsibility for fiscal stewardship and integrity.

Conclusion

The College partially meets the Standard.

Recommendation

See Recommendation 8.

IV.B.1.d. The institution or the governing board publishes the board bylaws and policies specifying the board's size, duties, responsibilities, structure, and operating procedures.

Findings and Evidence

The Board self-evaluation process is clearly set in policy. Minutes indicate these policies are carried out regularly.

Conclusion

The College meets the Standard.

IV.B.1.e. The governing board acts in a manner consistent with its policies and bylaws. The board regularly evaluates its policies and practices and revises them as necessary.

Findings and Evidence

On site interviews with Board members provided evidence that the Board revises its policies regularly, and most recently in 2012.

Conclusion

The College meets the Standard.

IV.B.1.f. The governing board has a program for board development and new member orientation. It has a mechanism for providing continuity of board membership and staggered terms of office.

The Board has a system of new member orientation that makes use of both local and Community College League of California (CCLC) resources.

Conclusion

The College meets the Standard.

IV.B.1.g. The governing board's self-evaluation processes for assessing board performance are clearly defined, implemented, and published in its policies or bylaws.

Findings and Evidence

The policies are in place for Board evaluation, and minutes confirm that it is happening.

Conclusion

The College meets the Standard.

IV.B.1.h. The governing board has a code of ethics that includes a clearly defined policy for dealing with behavior that violates its code.

Findings and Evidence

There is policy that contains the Board's Code of Ethics and what actions are taken should that Code be violated by any member. The policy was reviewed as recently as 2012.

Conclusion

The College meets the Standard.

IV.B.1.i. The governing board is informed and involved in the accreditation process.

Findings and Evidence

The Board has involved itself thoroughly with all aspects of accreditation as the team observed clearly from Board Minutes.

Conclusion

The College meets the Standard.

IV.B.1.j. The governing board has the responsibility for selecting and evaluating the district/system chief administrator. The governing board delegates full responsibility and authority to him/her to implement and administer board policies without board interference and holds him/her accountable for the operation of the district/system or College, respectively.

The Board policies clearly give the Board the authority to hire and evaluate the President/CEO. It also gives the CEO full delegation for the operations of the College without Board interference.

Conclusion

The College meets the Standard.

IV.B.2. The President has primary responsibility for the quality of the institution he/she leads. He/she provides effective leadership in planning, organizing, budgeting, selecting and developing personnel, and assessing institutional effectiveness.

Findings and Evidence

College planning documents as well as policy shows the President's responsibility for leadership in all the areas of this Standard. From minutes it is clear that the President exerts this authority.

Conclusion

The College meets the Standard.

IV.B.2.a. The President plans, oversees, and evaluates an administrative structure organized and staffed to reflect the institution's purposes, size and complexity. He/she delegates authority to administrators and others consistent with their responsibilities, as appropriate.

Findings and Evidence

Since the President came into office, less than one year ago, there has been a major reorganization that illustrates the authority to determine the structure of the College and delegate authority to his administrators.

Conclusion

The College meets the Standard.

IV.B.2.b. The president guides institutional improvement of the teaching and learning environment by the following: establishing a collegial process that sets values, goals, and priorities; ensuring that evaluation and planning rely on high quality research and analysis on external and internal conditions; ensuring that educational planning is integrated with resource planning, and distribution to achieve student learning outcomes; and establishing procedures to evaluate all institutional planning and implementation efforts.

Interviews with IVC Board members, administrators, faculty, staff and students verified that the President guides institutional improvement, establishes a collegial environment, relies on research to guide institutional planning and advances the College mission in outreaching to the community.

Conclusion

The College meets the Standard.

IV.B.2.c. The President assures the implementation of statutes, regulations, and governing board policies and assures that institutional practices are consistent with institutional mission and policies.

Findings and Evidence

The President assures that administrator's work is consistent with State laws, statutes and regulations and is consistent with the mission and policies of the College. This was verified by on campus interviews.

Conclusion

The College meets the Standard.

IV.B.2.d. The President effectively controls budget and expenditures.

Findings and Evidence

The fiscal situation that IVC and current College President finds itself in was created by the previous president/administration. Requesting the FCMAT report demonstrated leadership in correcting the situation. The evidence provided demonstrated that the current President is providing the leadership for correcting the financial deficiencies. The FCMAT Report is located on the College website and the discussions are transparent and productive.

Conclusion

The College partially meets the Standard.

Recommendation

See Recommendation 8.

IV.B.2.e. The President works and communicates effectively with the communities served by the institution.

Findings and Evidence

The College President is actively involved with the educational community including the high schools and universities, in particular San Diego State University (SDSU). The latter has formed a partnership with IVC titled the Imperial Valley University Program. There are

102 students in the first cohort who have taken their general education at IVC and will continue their sophomore year at SDSU in Calexico.

The President works closely with civic, business and industry organizations. IVC is the only opportunity for higher education for 120 miles in all directions, and the community values the education it provides to a multiplicity of backgrounds, many of whom have not had access or success in higher education. The business community is especially involved with IVC as it supports the critical need for development of skilled employees in the Imperial Valley.

Interviews with community leaders confirm the involvement and leadership of the President in promoting the institution, garnering financial support, and developing relationships that benefit students, the College, and the community.

Conclusion

The College substantially meets the Standard.

IV.B.3.a-g. In multi-college districts or systems, the district/system provides primary leadership in setting and communicating expectations of educational excellence and integrity throughout the district/system and assures support for the effective operation of the colleges.

Findings and Evidence, Conclusion

This Standard does not apply to Imperial Valley College as it is a single campus district.

Glossary of Frequently Used Acronyms

APR	Annual Program Review	ILOs	Institutional Learning Outcomes
COR	Course Outline of Record	PLOs	Program Learning Outcomes
CPR	Comprehensive Program Review	SLOs	Student Learning Outcomes
FCMAT	Fiscal Crisis Management & Assessment Team	STAC	Student Technology Advisory Committee