EXTERNAL EVALUATION REPORT

Rio Hondo College
3600 Workman Mill Road
Whittier, CA 90601

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 External Evaluation Team that visited
College September 29 – October 2, 2014

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List of Team Members

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Ms. Ahn Fielding
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Summary of the Report

INSTITUTION: Rio Hondo College

DATES OF VISIT: September 29 – October 2, 2014

TEAM CHAIR: Dr. Willard Lewallen

An eleven member accreditation team visited College (RHC) September 29 – October 2, 2014 for the purpose of determining whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and USDE regulations. The team evaluated how well the College is achieving its stated purposes, providing recommendations for quality assurance and institutional improvement, and submitting recommendations to the Accrediting Commission for Community and Junior Colleges (ACCJC) regarding the accredited status of the College.

In preparation for the visit, the team chair attended a team chair training workshop on July 17, 2014 and conducted a pre-visit to the campus on August 27, 2014. During this visit, the chair met with campus leadership and key personnel involved in the self-evaluation preparation process. The entire external evaluation team received team training provided by staff from ACCJC on September 11, 2014.

The evaluation team received the institution’s self-evaluation document several weeks prior to the site visit, and team members found it to be a comprehensive, well written document detailing the processes used by the institution to address Recommendations from the Previous External Evaluation Team, Eligibility Requirements, Commission Standards, and Commission Policies. The team confirmed that the self-evaluation report was compiled through broad participation by the entire College community including faculty, staff, students, and administration. The team found that the College reported only two self-identified planning agendas for institutional improvement. Although the team concluded that RHC has made tremendous progress related to meeting all aspects of accreditation, the team was concerned that the institution did not identify additional areas for improving institutional effectiveness.

On Monday morning September 29, team members visited RHC’s other campus locations - South Whittier Educational Center (SWEC), El Monte Educational Center (EMEC), and Santa Fe Springs Regional Training Center (SFSRTC). Upon arrival to RHC on Monday afternoon, September 29, the team was provided with a tour of the campus. On Tuesday morning, the team was introduced to the College community at a reception held for the team.

During the evaluation visit, team members conducted close to 100 meetings, interviews, and observations involving College staff, students, and board members. There were numerous impromptu conversations and two opportunities for the College community and members of the RHC community to meet with members of the evaluation team in open forums. Class sessions were observed and team members visited key operational departments of RHC.
The team reviewed numerous materials supporting the self-evaluation report in the team room and electronically, which included documents and evidence supporting the standards and eligibility requirements. Evidence reviewed by the team included documents such as institutional plans, program review procedures and reports, student learning outcomes evidence, College policies and procedures, enrollment information, committee minutes and materials, and College governance manuals. The team viewed evidence and documentation also through the College’s intranet and electronic copies stored on a flash drive.

The team greatly appreciated the enthusiasm and support from College employees throughout the visit. The team appreciated the cooperation of key staff members to assist with requests for individual meetings and other needs throughout the evaluation process. Campus staff members met every request for documentation and meetings with individual members and groups of the College community.

The team assessed the College’s responses to the 2008 recommendations and found that the College has completely resolved all of the deficiencies. The team found the College to be in compliance with all Eligibility Requirements, Commission Policies, and USDE regulations (with a few exceptions related to effective student contact in online courses and institution-set achievement standards at the program level). The team found a number of innovative and effective practices and programs and issued a number of commendations to recognize this. The team found the College satisfies the vast majority of the Standards, but issued some recommendations to increase effectiveness and/or meet some of the Standards.
Introduction

Rio Hondo Community College District is a single-college district encompassing 65.5 square miles in southeastern Los Angeles County. The District contains nine cities, in whole or part, four distinct unincorporated communities, and a portion of another unincorporated community of Los Angeles County within the district boundaries. The cities include El Monte, South El Monte, Pico Rivera, Santa Fe Springs, and Whittier, as well as portions of Norwalk, Downey, La Mirada, and the City of Industry. The unincorporated communities include Los Nietos, East Whittier, South Whittier, West Whittier, and a portion of Avocado Heights.

The establishment of a Whittier-area junior college district was approved by voters through an election on 25 October 1960. At that time and because the geographical boundaries of then temporarily named Whittier Junior College District were identical to those of Whittier Union High School District (WUHSD), oversight of the College District was managed by the high school Board of Trustees. In 1962 the voters elected the first Governing Board for a separate community college district. In 1963 the Governing Board selected the current site for the College and changed the name from Whittier Junior College to Rio Hondo College. The College offered classes at a variety of high schools and the present campus opened in 1966 with an enrollment of 3,363 day and 2,682 evening students. Today, the College enrolls close to 20,000 students.

In 1997, acquisition of the Rio Hondo College Regional Fire Technology Training Center, located in Santa Fe Springs, provided a primary site of instruction for the academies and programs in fire technology, wildland fire, and emergency medical technician. In March 2004, District voters approved a $245 million construction and renovation bond initiative, resulting in renovations to the main campus and new construction projects both on- and off-campus. The South Whittier Educational Center (SWEC) and El Monte Educational Center (EMEC) are direct results of bond funding. In addition, with bond funds, The College has recently opened a new Learning Resource Center (LRC), Administration of Justice Building, Student Services/Student Union Complex, and a Physical Education Complex—all on the main campus. Renovations to existing campus buildings, sports fields, and parking lots will continue.

During the 2012-2013 academic year, Rio Hondo College had a fall headcount of 18,069, and an unduplicated annual headcount of 27,416, with a Full-Time Equivalent Students (FTES) of 13,207. This number has decreased since 2008-2009, when FTES totaled 16,067. Likely explanations may be rooted in the national economic downturn and subsequent decline in state allocations for community colleges, as well as declining numbers of public and nonpublic high school graduates in the U.S. since 2010. During the five-year period 2008-2013, the averages at Rio Hondo College average enrollments have been 20,630 for fall headcount, 33,590 for annual headcount, and 14,317 for FTES.

The demographic profile of the College has remained relatively stable, despite the recent decline in enrollment. In 2012-2013, 55.8% of the students were male, 43.6% were female, and .6% did not declare gender. These figures are similar to the five-year (2008-2013) averages of 58.1%, 41.5%, and .4%, respectively. The percentage of Hispanic/Latino students increased nearly 20% over a five-year period. However, this increase is misleading because nearly 30% of students
had “unknown” ethnicities in 2008-09. After this adjustment the percentage of unknown remains about 10%. The racial/ethnic composition has remained about the same over a five-year period with the exception of a small increase in the representation of Asian-American students.

Team members found the Institutional Self-Evaluation Report visually appealing, well written, and complete. Overall, the report presents a fair and accurate portrait of the institution. The report includes all required sections, including college history, demographic information, achievement data, overview of the self-evaluation process, educational programs and delivery modes, and compliance with Eligibility Requirements, policies, and practices. However, team members found a number of instances in which evaluation sections seem to lead to actionable improvement plans that are missing. The report contained only two self-identified planning agendas for institutional improvement.

Team members greatly appreciated the availability of most evidence online, via a flash drive and direct web links embedded in the electronic version of the document and found this helpful in preparing for the visit. Evidence in the team room was well organized, and team members were able to locate needed data through a combination of the team room collection, the flash drive and web links, and requests to college staff.

The College was well prepared for the team visit. Both the informal opening reception and the exit report were well attended, and team members found faculty, staff, and students who were interviewed or whose classes, sites, or offices were visited to be knowledgeable about the accreditation process. The visiting team was warmly received by the College, and college faculty and staff responded graciously and efficiently to requests for interviews, additional data, and transportation. Throughout the visit, the team encountered in the college community a sense of pride with an ongoing commitment to institutional effectiveness and student learning.

As a result of a comprehensive accreditation evaluation visit in October 2008, the Commission imposed warning on the College and required the submission of a follow-up report in October 2009. As a result of the follow-up report and visit, the Commission removed warning and reaffirmed the College’s accreditation at its meeting in January 2010. The Commission required the College to submit another follow-up report in October 2010. The Commission accepted the second follow-up report at its January 2011 meeting. The College submitted its Midterm Report in October 2011 and the Commission reviewed the Midterm Report at its January 2012 meeting. In July 2014 the College submitted its self-evaluation report to the Commission in support of the October 2014 external evaluation visit.

As a result of its comprehensive review and evaluation, the team reports the following major findings and recommendations.

**Major Findings and Recommendations of the 2014 External Evaluation Team**

**Team Commendations**
During the visit the team recognized several aspects of the institution worthy of commendations.
The team commends the College for exhibiting a student-centered approach to learning and to serving students. There is collegial spirit along with an enthusiasm for and commitment to student success that shines through in all endeavors, actions, and activities.

The team commends the College for developing partnerships and relationships with a number of agencies, organizations, and institutions that leverage resources in support of student learning and student success.

The team commends the facilities and maintenance staff for its efforts in maintaining a beautiful campus physical plant that supports a quality learning environment for the students and a quality working environment for the staff.

The team commends the College for designing and constructing exceptional new facilities that support student learning and student success.

The team commends the college for considering equity and access in naming its innovative service to students “Express Counseling” rather than “walk-in” counseling, demonstrating sensitivity to diversity and inclusion.

The team commends the College for its innovative use of technology in effectively managing and coordinating important institutional processes (e.g., SLOlutions and PlanBuilder).

The team commends the College for its statewide and nationally recognized Homeland Security, Law Enforcement, and Firefighting Programs that provide pathways to educational attainment and employment.

The team commends the College for its quality publications that celebrate diversity, arts, and culture.

The team commends the College for its commitment to support and promote professional development among all employees.

The College has demonstrated sound financial effectiveness for its yearly operations. This fiscal stewardship is an especially noteworthy accomplishment in light of the substantial multi-year economic challenges California's community colleges have faced.

**Team Recommendations**

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

**Recommendation 1**

In order to meet standards, and to meet USDE regulations, the team recommends that the College set standards of satisfactory performance for student achievement, and evaluate itself against those standards, at the programmatic level (not just at the institutional level). (I.B, USDE Regulation 602.17 (f))
Recommendation 2
In order to increase effectiveness, the team recommends that the College create a process to ensure that all goals and/or objectives at every level of planning (program, unit, area, and institution) are written in measurable terms so that the degree to which they are achieved can be determined. (I.B.2)

Recommendation 3
In order to meet standards and comply with USDE regulations, the team recommends that the College develop a process to ensure faculty initiate regular and substantive interaction with students in Distance Education courses. (Standards II.A.1; II.A.2; USDE Regulation 602.17(g))

Recommendation 4
In order to meet Standards, the team recommends that the College develop procedures that outline how students will complete a program of study (other than CTE) when the program is discontinued. (II.A.6.b)

Recommendation 5
In order to meet Standards, the team recommends the College:
  a. continue its work to fully connect program SLOs to the courses where SLOs are achieved, including for General Education. This should be made fully transparent in SLOlutions or future software to manage College SLOs.
  b. continue to track and monitor the assessment of course SLOs to ensure that a course SLO is assessed every semester the course is offered (per the College’s own plans) and that all SLOs are assessed within a six-year program review cycle.
  c. develop a process for ensuring that course SLOs are included in the syllabi provided to students for every class section offered.
  d. implement SLOs for non-credit and community education courses.
(II.A.1.a, II.A.1.c, II.A.2.a, II.A.2.e; II.A.3.a; II.A.6)

Recommendation 6
In order to increase effectiveness, the team recommends that the College develop a plan for improving the effectiveness of library services at satellite campuses. (II.C.1.e)

Recommendation 7
In order to meet standards, the team recommends all evaluations for 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. (III.A.1.c)

Recommendation 8
In order to increase effectiveness, and to address the finding from the assessment of governance effectiveness, the team recommends that the College develop and implement a plan for improving communications within and among governance groups. (IV.A.3, IV.A.5)
Responses to Recommendations of the Previous Evaluation Team (2008)

Recommendation 1: Institutional Effectiveness
Develop and implement an institutional planning process that includes: measurable institutional goals and objectives with a timeline for the implementation and achievement of these goals, and a schedule for when the achievement of these will be assessed; more clearly defined links between the College’s program review, unit planning and resource allocation processes as parts of an integrated process for continuous improvement; communication more broadly across the campus of the purposes and intended outcomes of each component of the planning process as well as the integrated planning process as a whole; an examination of institutional effectiveness through a broad-based dialogue that centers around clearly defined measures of effectiveness and the assessment of the effective use of resources; the opportunity for members from all constituency groups to fully participate in the process at all levels; a staff development program that permeates the institution to promote the effective use of data, including identification of where data are available; and clearly defined processes for assessing the effectiveness of the planning process as a whole, as well as each of the components, that includes timelines for evaluation, assigned responsibilities, and expected outcomes (Standards IB.1, IB.2, IB.3, IB.4, IB.5, IB.6, IB.7, IIA.2, IIIA.6, IIID.1.a, IIID.3).

After reviewing documents and interviewing faculty and staff, the team confirmed that the College has met this recommendation. The College has established a robust planning process that is supported by data on student achievement and learning, and is integrated with resource allocation. The process has succeeded in facilitating dialogue among a broad base of College constituents to increase institutional effectiveness. As the planning process continues to be refined, the team recommends that the College work towards having all objectives stated in measurable terms so the degree to which they are achieved can be determined.

The team found that the College has satisfactorily addressed this recommendation.

Recommendation 2: Student Learning Outcomes
The College is at the developmental level on the ACCJC rubric for student learning outcomes and has established an initial framework and assessment strategy at the course level. In order to meet the ACCJC standard of proficiency of student learning outcomes by 2012, the College needs to: create an implementation timeline; regularly evaluate the effectiveness of the SLO assessment process; facilitate College wide discussions; develop and implement training for all constituencies integrating College wide efforts between Instruction and Student Services; create a special emphasis on identifying valid and reliable data and use of authentic assessment; and implement a system of quality control to ensure meaningful and accurate assessment of student learning throughout the College (Standards IIA.1, 2, 3).

The Self-Evaluation emphasizes that course SLO assessment now occurs on a yearly basis as a part of annual program plans or the more rigorous program review (every six years). Not all SLOs for each course are assessed each year, but all SLOs for each course are assessed during each six-year program review cycle. “Active” course SLOs are those that are being assessed in any given semester. The College has implemented a software system to store SLOs and assessments called SLOlutions. A checklist guides the development of SLOs that are measurable
and with benchmarks for assessment, and the SLO Committee reviews course SLOs and provides feedback on their development. SLOolutions is accessible online.

Based on a review of evidence provided in the Self-Evaluation, the College has made good progress with this recommendation. The checklist provides standards for development and assessment of SLOs. There is a centralized system to store SLOs and assessments. “Active” course SLOs, which are SLOs being assessed in the current term, are highlighted in yellow in the system. The Self-Evaluation indicates that all course SLOs will be reviewed within a six-year program review cycle, and the SLO Chair does an annual report to check on the status of SLO assessments and communicates with Deans and faculty.

The team found that the College has satisfactorily addressed this recommendation.

Recommendation 3: Student Support Services

*The team recommends that the catalog include the College’s official web site address, the current academic calendar, the program length for the academic year the catalog covers, and a clear communication of the educational cost for non-resident students (Standard II.B.2.b).*

The web site and hardcopy versions of the College Catalog were examined.

The team found that the College has satisfactorily addressed this recommendation.

Recommendation 4: Human Resources

*The team recommends the College develop and approve a code of ethics for all employees (Standard III.A.1.d).*

The College created an Institutional Code of Ethics statement in 2009; however, to further strengthen the institution’s commitment to fostering a healthy and ethical environment, the institution adopted Board Policy (BP) 3050, Institutional Code of Ethics.

The team found that the College has satisfactorily addressed this recommendation.

Recommendation 5: Leadership

*The College should employ methods to assess campus climate across all constituencies, leading to the continual improvement of communications and programs that promote empowerment, trust, and innovation. (Standard IV.A.3).*

The College has provided a response to this recommendation in the 2009 Follow-Up Report and has continued to update its recommendation response within the “Progress Made Since 2009” description provided in the 2014 Self-Evaluation Report.

The immediate response was developed through the College’s use of a Campus Climate Survey developed and implemented annually. The survey includes items designed to assess the
institution on a variety of campus topics and it is distributed to a random sample of students and staff. Student topics center on areas specific to student areas of concern and improvement, and staff member topics include areas of concern and improvement specific to institutional staff roles and needs. The results from surveys are disseminated on an annual basis to the College through campus presentations, Governing Board presentations, and the Institutional Planning Retreat. The results are posted on the College website.

The College implemented a number of initiatives and strategies aimed at improving campus climate: weekly updates and messages from the Office of the President; review and update of college goals at an Institutional Planning Retreat; stakeholder meetings on communications and working relationships. Additionally, the College has added a fifth value to its value statements, Integrity and Civility.

The team found that the College has satisfactorily addressed this recommendation.

Recommendation 6: Governance

The team recommends the College develop a formal and cyclical review of governance committees and processes to ensure integrity and effectiveness, and communicate the results as a basis for improvement of campus decision-making; the College administration develop a plan to clarify the reporting pathways for the various governance bodies exemplifying the linkages between the unit plans, program review, and the resource allocation process. (I.B.6. IV.A.5); the Board of Trustees participate immediately in professional development that introduces Board members to best practices regarding board/campus relations, ethics, trusteeship, accreditation process, and strategic planning; the Boards review and, if necessary, revise the Presidential hiring process established in 2002 to prevent potential disagreements with future Presidential search committees (Standards IV.B.1, IV.B.1.f, IV.B.1.i, IV.B.1.j); and the College and the Board of Trustees immediately reach agreement on policies and practices that govern the development of accreditation materials. (Standards IV.A.4, IV.B.1.i).

On 9 October 2013, the Board of Trustees reviewed the proposed Governance Committee Review process, to be implemented in evaluating the governance and decision-making entities of the College (IV.A.028: Board of Trustee Minutes, 10-9-13). This culminated a year-long deliberative review process among all constituency groups that resulted in assessing and formalizing the governance process. This process culminated in the development of the Organizational Structure and Governance Manual which defines and explains the structure, communications, reporting pathways, participants, councils and committees, and the procedures for evaluating the effectiveness of the governance systems. Additionally, the following key policies and procedures were reviewed and updated.

BP/AP 2510 – Participation in Local Decision-making
BP/AP 2410 – Policy and Administrative Procedure

Professional development for Governing Board members has included participation in numerous workshops, conferences, seminars, and orientations, along with study sessions retreats focused on selected topics. The Governing Board has established "ensuring professional board
development” among its self-identified goals. Through these professional development activities the Governing board has focused on best practices for board/campus relations, ethics, trustee roles, accreditation, and planning.

The Governing Board approved AP 2431 in October 2009 establishing procedures for hiring the superintendent/president. BP and AP 2431 were used 2012-13 to conduct a successful search for the current superintendent/president.

BP 3200 was adopted in October 2009 outlining the Governing Board’s involvement in the accreditation process. Regular accreditation updates are included as agenda items at regular Governing Board meetings.

The team found that the College has satisfactorily addressed this recommendation.
Eligibility Requirements

1. Authority
The team confirmed that 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 Rio Hondo Community College District. College is accredited by the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges.

2. Mission
The team confirmed the College mission statement was revised in a process beginning in April 2013 at the College’s annual Institutional Planning Retreat and adopted by the Board of Trustees on November 18, 2013. The mission statement clearly defines the educational mission of College and its institutional commitment to achieving student learning. The mission statement is published widely throughout the College, including the College’s web page and the College Catalog.

3. Governing Board
The team confirmed the Rio Hondo CCD is governed by a five-member Board of Trustees elected by District areas. Each Governing Board member serves a four-year term with elections held in odd-numbered years. The student trustee is elected to a one-year term by popular vote of the students.

The team confirmed the Governing Board establishes, maintains, and revises policies to assure the quality, integrity, and effectiveness of student learning programs and services, and financial stability. The Governing Board has established BP 2710, Conflict of Interest to assure that Governing Board members do not have employment, family, ownership, or other personal interest in the institution. BP 2710 assures that these interests are disclosed and that they do not interfere with the impartiality of Governing Board members.

4. Chief Executive Officer
The team confirmed the Superintendent/President of College is the Chief Executive Officer hired by the Board of Trustees with primary authority and responsibility for leadership and management of all programs and services provided by the College.

5. Administrative Capacity
The team confirmed the College has sufficient administrative staff with appropriate preparation, qualifications, and experience to operate the College.

6. Operational Status
The team confirmed the College is operational and actively serves students through a variety of programs leading to certificate and degree completion.

7. Degrees
The team confirmed the College offers 66 total associate degrees, 18 associate degrees for transfer, 43 certificates of achievement, five skills proficiency certificates, and six career certificates.

8. Educational Programs
The team confirmed the College degree programs are congruent with its mission, are based on recognized higher education fields of study, are of sufficient content and length, and are conducted at levels of quality and rigor appropriate to the degrees offered.

9. Academic Credit
The team confirmed the College offers courses and programs of high quality and appropriate depth, breadth, rigor, sequencing, time to completion, and synthesis of learning. The College uses the Carnegie formula and clearly distinguishes between degree applicable and non-degree applicable courses.

10. Student Learning and Achievement
The team confirmed the College defines expected student learning and achievement outcomes, assesses the outcomes, and engages in meaningful dialogue contributing to continuous quality improvement.

11. General Education
The team confirmed the College defines and incorporates into all of its degree programs a substantial component of general education that ensures breadth of knowledge and promotes intellectual inquiry. The general education component includes demonstrated competence in writing and computational skills and serves as an introduction to major areas of knowledge.

12. Academic Freedom
The team confirmed the College has adopted an Academic Freedom Statement through Board Policy 4030, Academic Freedom, to ensure 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.

13. Faculty
The team confirmed the College has a sufficient number of qualified faculty members, anchored with 178 full-time faculty members. Faculty members have sufficient educational background and experience to support all of the institution’s educational programs. A clear statement of faculty responsibilities, including the development and review of curriculum and learning assessment, is included in faculty job descriptions and the Faculty Handbook.

14. Student Services
The team confirmed the College ensures that students receive all appropriate student services that support learning and development based on the College’s mission. Services are delivered through multiple formats to meet the needs of a diverse student population.

15. Admissions
The team confirmed the College admissions policies are clear, accessible, consistent, and well-publicized on the College web site, in the College catalog, in the schedule of classes, and in board policy.

16. Information and Learning Resources
The team confirmed the College provides sufficient library and learning support services for its students and faculty. These resources support the mission and the educational programs. They are readily available and accessible to students and delivered in a variety of formats, by a variety of disciplines and departments. Most information and learning resources are concentrated in and administered by the Library and Learning Resource Center.

17. Financial Resources
The team confirmed the College has financial resources sufficient to support student learning programs and services and to improve institutional effectiveness. Financial resource planning, integrated with institutional planning, provides for effective utilization of resources. A review of budgets and audit reports provide evidence of financial resources and financial stability.

18. Financial Accountability
The team confirmed the College undergoes an annual, independent external audit of the accounts of the College. Further, audits are conducted in accordance with Generally Accepted Accounting Standards applicable to financial audits contained in Government Auditing Standards. The College has a history of receiving unqualified audit reports, which means there have been no material weaknesses or reportable conditions identified during the audits.

19. Institutional Planning and Evaluation
The team confirmed the College the College engages in an institutional planning process through a cycle of evaluation, integrated planning, resource allocation, implementation, and re-evaluation. The College uses results from student learning outcomes and student achievement in its planning and resource allocation processes. The Educational Master Plan includes College goals and initiatives.

20. Integrity in Communication with the Public
The team confirmed the College publishes a print and electronic version of its College Catalog with precise, accurate, and current information. The following are contained in the catalog: mission and purposes; course, program, and degree offerings; admissions requirements, fees and refund policies; requirements for degrees, certificates, graduation, and transfer; academic credentials of faculty and administrators; names of Governing Board members; key policies affecting students.

21. Integrity in Relations with the Accrediting Commission
The team confirmed the College adheres to the Eligibility Requirements, Accreditation Standards, and policies of the Accrediting Commission and describes itself in identical terms to all other external accrediting agencies. The College complies with all requests, directives, decisions, and policies of the Commission. The College has made complete, accurate, and honest disclosures regarding its accredited status.
Compliance with Commission Policies and Federal Regulations

Policy on Distance Education and on Correspondence Education
Administrative Procedure 4105, Distance Education, outlines the procedure for DE delivery at Rio Hondo College. The procedure states, “The same standards of course quality shall be applied to the distance education courses as are applied to traditional classroom courses.” The same evaluation standards are also applied to DE courses and on-ground courses. Faculty members, administrators, and classified staff serve on the Distance Education Committee (DEC), which is chaired by the faculty Distance Education Coordinator. Recently, the faculty Coordinator and DEC members developed new guidelines for faculty to effectively teach DE courses at Rio Hondo. The DEC is also developing an online teaching certification program for all online instructors at the College, to be implemented fall 2015.

Students in online classes have a secure student login and password that serves as a form of student identity verification and, at the same time, protects student privacy. The login and password are based on the student’s information and can be changed by the student. Others do not have access to this information. In addition, on the login page of Blackboard, students encounter a statement by which they affirm their identity as the person enrolled in the class.

The College needs to develop a process to ensure faculty initiate regular and substantive interaction with students in Distance Education courses.

The College offers no correspondence courses.

The College is primarily in compliance with the Policy on Distance Education and on Correspondence Education with the exception noted above.

Policy on Compliance with Title IV
The College policies and financial aid information is provided to students and employees and updated with any new regulation changes. The College delivers comprehensive financial aid services to students.

The College is in compliance with the Policy on Institutional Compliance with Title IV.

Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status
The team found evidence of advertising, student recruitment and representation in print and electronic forms. The College, through its catalog and other publications, provides information sufficient to allow students to enroll in the college, to obtain information on college policies and procedures, and to obtain information on educational programs and services. The college’s accreditation status is published on the web site and in the College Catalog.

The College is in compliance with the Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status.
Policy on Institutional Degrees and Credits
BP/AP 4020, Program, Curriculum and Course Development, provide policies and procedures that ensure degrees, certificates, and credit are awarded according to generally accepted higher education practices for content, breadth, and length; appropriate levels of rigor; statements of expected student learning outcomes; and assessment results demonstrating students are achieving key institutional and program learning outcomes.

The College is in compliance with the Policy on Institutional Degrees and Award of Credit.

Policy on Institutional Integrity and Ethics
The team found that the College has goals consistent with its stated purpose. The College complies with required reporting to the Commission and responds to requests from the Commission in a timely manner. Board policies and administrative procedures are established for ethical conduct and academic freedom.

The College is in compliance with the Policy on Institutional Integrity and Ethics.

Policy on Contractual Relationships with Non-Regionally Accredited Organizations
The team did not identify any contractual relationships with non-regionally accredited organizations.

Policy on Student and Public Complaints against Institutions
AP 5530, Student Rights and Grievances, provides the procedures for students to submit complaints/grievances and provides a process for the resolution of complaints/grievances.

The College is in compliance with the Policy on Student and Public Complaints against Institutions.
Checklist for External Evaluation Teams Evaluating Compliance with Federal Regulations and Commission Policies

Public Notification of an Evaluation Visit and Third Party Comment

__X__ The institution has made an appropriate and timely effort to solicit third party comment in advance of a comprehensive evaluation visit.

__X__ The institution cooperates with the evaluation team in any necessary follow-up related to the third party comment.

__X__ The institution demonstrates compliance with the Commission Policy on Rights and Responsibilities of the Commission and Member Institutions as to third party comment.

Regulation citation: 602.23(b).

Conclusion Check-Off (mark one):

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

________ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

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

Comments:
None

Standards and Performance with Respect to Student Achievement

__X__ The institution has defined elements of student achievement performance across the institution, and has identified the expected measure of performance within each defined element. Course completion is included as one of these elements of student achievement. Other elements of student achievement performance for measurement have been determined as appropriate to the institution’s mission.

__NO__ The institution has defined elements of student achievement performance within each instructional program, and has identified the expected measure of performance within each defined element. The defined elements include, but are not limited to, job placement rates for program completers, and for programs in fields where licensure is required, the licensure examination passage rates for program completers.

__X__ The institution-set standards for programs and across the institution are relevant to guide self-evaluation and institutional improvement; the defined elements and expected performance levels are appropriate within higher education; the results are reported regularly across the campus; and the definition of elements and results are used in program-level and institution-wide planning to evaluate how well the institution fulfills its mission, to determine needed changes, to allocating resources, and to make improvements.
The institution analyzes its performance as to the institution-set standards and as to student achievement, and takes appropriate measures in areas where its performance is not at the expected level.

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

Conclusion Check-Off (mark one):

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

Comments:
The College has established institution-set standards at the institution level, but not at the program level.

**Credits, Program Length, and Tuition**

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

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

Conclusion Check-Off (mark one):

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.
_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.
_____ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.
Comments:
None

Transfer Policies

___X___ Transfer policies are appropriately disclosed to students and to the public.
___X___ Policies contain information about the criteria the institution uses to accept credits for transfer.

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

Conclusion Check-Off (mark one):

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

Comments:
None

Distance Education and Correspondence Education

___X___ The institution has policies and procedures for defining and classifying a course as offered by distance education or correspondence education, in alignment with USDE definitions.
___ NO ___ There is an accurate and consistent application of the policies and procedures for determining if a course is offered by distance education (with regular and substantive interaction with the instructor, initiated by the instructor, and online activities are included as part of a student’s grade) or correspondence education (online activities are primarily “paperwork related,” including reading posted materials, posting homework and completing examinations, and interaction with the instructor is initiated by the student as needed).
___X___ The institution has appropriate means and consistently applies those means for verifying the identity of a student who participates in a distance education or correspondence education course or program, and for ensuring that student information is protected.
___X___ The technology infrastructure is sufficient to maintain and sustain the distance education and correspondence education offerings.
___X___ The institution demonstrates compliance with the Commission Policy on Distance Education and Correspondence Education.

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

Conclusion Check-Off (mark one):
The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

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

Comments:
The College needs to develop a process to ensure faculty initiate regular and substantive interaction with students in Distance Education courses.

**Student Complaints**

The institution has clear policies and procedures for handling student complaints, and the current policies and procedures are accessible to students in the college catalog and online.

The student complaint files for the previous six years (since the last comprehensive evaluation) are available; the files demonstrate accurate implementation of the complaint policies and procedures.

The team analysis of the student complaint files identifies any issues that may be indicative of the institution’s noncompliance with any Accreditation Standards.

The institution posts on its website the names of associations, agencies and govern mental bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints with such entities.

The institution demonstrates compliance with the Commission Policy on Representation of Accredited Status and the Policy on Student and Public Complaints Against Institutions.

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

Conclusion Check-Off (mark one):

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

The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

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

Comments:
None

**Institutional Disclosure and Advertising and Recruitment Materials**

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

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

Conclusion Check-Off (mark one):

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

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

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

Comments:
None

**Title IV Compliance**

_X_ The institution has presented evidence on the required components of the Title IV Program, including findings from any audits and program or other review activities by the USDE.

_X_ The institution has addressed any issues raised by the USDE as to financial responsibility requirements, program record-keeping, etc. If issues were not timely addressed, the institution demonstrates it has the fiscal and administrative capacity to timely address issues in the future and to retain compliance with Title IV program requirements.

_X_ The institution’s student loan default rates are within the acceptable range defined by the USDE. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range.

_X_ Contractual relationships of the institution to offer or receive educational, library, and support services meet the Accreditation Standards and have been approved by the Commission through substantive change if required.

_X_ The institution demonstrates compliance with the Commission Policy on Contractual Relationships with Non-Regionally Accredited Organizations and the Policy on Institutional Compliance with Title IV.

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

Conclusion Check-Off:

_X_ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.
The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

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

Comments:
None
STANDARD I
Institutional Mission and Effectiveness

Standard I.A: Institutional Mission

General Observations

The 2008 mission statement was revised in 2013 under the auspices of the Planning and Fiscal Council using its participatory decision-making process. The revision process was agreed upon in April 2013 at the Institutional Planning Retreat and a month later the Planning and Fiscal Committee (PFC) formed a 12 member task force composed of representatives of all institutional stakeholders. This group developed a timeline and then produced drafts that were discussed in the various governance bodies during fall 2014. In November 2014 the Board of Trustees approved the revised mission statement. The 2014 mission statement explicitly reflects the programs and services offered by the College and is a reflection of the institution’s commitment to student learning and achievement.

The mission statement identifies six educational pathways leading to completion or college readiness (associate degrees, certificates, transfer, career and technical education, and basic skills), and it explicitly addresses lifelong learning. The College schedules courses in these programs on the main campus, at its three satellite locations and outreach locations in addition to enhancing access by offering some courses through online delivery. Student support services that facilitate learning and engagement also support the mission statement. The College offers 66 total associate degrees, 18 associate degrees for transfer, 43 certificates of achievement, five skills proficiency certificates, and six career certificates. While the College has established an institution-set standard for each component of the mission statement, there is no metric by which to assess quality and effectiveness of the College’s efforts in addressing lifelong learning.

Student data regarding educational goals, enrollment patterns, achievement, and learning are gathered and assessed and demonstrate the degree of institutional effectiveness in addressing students’ needs as framed by the mission statement. The mission statement is posted on the College web site, published in the College catalog, and ubiquitously displayed campus wide. Central planning and governance documents, such as the Program Builder software and the Organizational Structure and Governance Manual, are framed by the mission statement and make it central to program planning and resource allocation processes, and the foundation of the operating agreements for College committees.

Findings and Evidence

As stated in its mission statement, the College’s mission is broad in scope, appropriate to an institution of post-secondary education, and emphasizes the College’s commitment to student learning and student achievement. Courses are offered that address the educational needs of the students the College serves and programs, except for lifelong learning, are evaluated against institution-set standards that provide metrics by which the College can measure its effectiveness and the quality of its programs. (I.A.1)
The mission statement was reviewed and revised through a comprehensive planning process involving all constituent groups. A Mission Statement Task Force convened, revised, and developed a new mission statement and it was vetted through all constituent groups before consideration by the Board of Trustees. The mission statement will be reviewed on a regular basis in alignment with the reviews of the Educational Master Plan (I.A.3)

The mission statement was approved by the Board of Trustees in November 2013. The mission statement is published on the home page of the web site, in the 2014-2015 Catalog, in the Educational Master Plan, and in all major college publications. Additionally, the mission statement is posted in each classroom, major office, and conference room. (I.A.2)

The College has made its mission central to institutional planning and decision-making. The College provided evidence in planning documents and processes of a deliberate consideration of its mission statement. (I.A.4)

**Conclusions**

The mission statement is approved by the Governing Board and published widely. The College reviews its mission statement regularly and revises it as necessary.

The College meets the Standard

**Recommendations**

None.
Standard 1.B: Improving Institutional Effectiveness

General Observations

In 2008, the College was cited as being deficient in all areas of Standard 1B. Since that time, the College has established a robust planning process that is widely embraced by faculty and staff, is integrated with resource allocation, and has led to continuous improvements in student learning and institutional processes. While there is some inconsistency in the quality of measurable goals and objectives among programs, the overall effectiveness of the process is nevertheless thorough, comprehensive, and effective.

Findings and Evidence

The Team found evidence of collegial self-reflective dialogue about the continuous improvement of student learning and institutional processes. The annual planning and SLO processes require documentation of department level discussion of student learning and overall effectiveness, as evidenced by reviewing a random sample of annual plans, program reviews, and assessment reports. Discussions with a randomly selected group of employees corroborated the dialogue documented in the planning documents, as each employee was able to provide specific instances where they were involved in dialogue about student learning and institutional processes. (I.B.1) The team found evidence that the institution sets goals to improve its effectiveness, as detailed in the Institutional Goals and Objectives. The goals and objectives are created through a bottom-up process, whereby departments create department level goals, which are then filtered up into unit goals, then area goals, and finally into institutional level goals. Using PlanBuilder software, the institution has created a robust process for establishing goals across all areas of the College. Interviews with faculty and staff, along with survey responses to the institutional planning survey, provided evidence of broad participation among all constituents throughout the entire planning cycle. However, while reviewing the various goals and objectives for the College, the team found a number of goals lacking in measurable terms. For example, Institutional Goal 4b states that the “College will work with its AB86 partners to create a dynamic, regional approach to adult education”. Similar types of objectives appear throughout other planning documents—particularly at the department level for annual plans. Evidence was provided that goals without measurable terms do receive feedback throughout the planning process, such as direct feedback from peers during program review, from deans for annual department plans, and from IRP for institutional goals during the Institutional Planning Retreat. However, beyond providing collegial feedback, it appears the College has not stated several objectives in measurable terms. Based on conversations with staff, the College has been mindful to not be overly forceful in dictating how objectives should be written so as not to derail the culture of broad participation and buy-in from various constituencies involved in crafting these goals. (I.B.2) Throughout the planning cycle, faculty and staff review various quantitative data including measures of student achievement and learning, as well as qualitative data such as student and employee surveys. The team found most of the data to be adequate for planning purposes, and narrative analyses of the data within annual plans and program reviews evidenced that College employees are effectively reviewing data to identify trends and areas for improvement. Although the College has established institution-set standards at the institution level and uses the assessment of performance against those standards in its planning process, it has not established
those same institution-set standards at the program level. Therefore programs do not have this information available when conducting their program reviews and planning processes. Based on interviews with faculty and staff, the team found that the office of IRP provides effective support to employees requesting additional data for planning, as well as help in analyzing the data. In recent months, the College has started to review data disaggregated by various demographic categories as part of a state-mandated equity planning process. Since ensuring the success of its diverse students is part of the College’s mission, the institution should also consider expanding the analysis of disaggregated data down to the program level. Once goals and objectives are established, requests for resources identified in the planning process are filtered through various leadership and resource allocation committees, who then prioritize the resource requests in rank order. Based on interviews with employees, most faculty and staff find the resource allocation process to be relatively fair—even if their requests are not funded. However, some faculty did express a need for clearer metrics for determining which faculty positions should be prioritized. (I.B.3)

Overall, the majority of employees were satisfied with the planning and resource allocation process, with only about 20% of employees stating that they were dissatisfied with the process according to the Institutional Planning Process Survey. This planning process survey, along with other feedback from faculty and staff, have enabled the College to continuously evaluate the effectiveness of its planning process and make ongoing improvements. For example, based on feedback, the planning process was recently revised to incorporate SLO-related questions in the annual plan template so that resource requests related to SLO findings could be integrated in the overall planning process. As reviewed earlier, the team found evidence of broad based participation throughout the entire planning process, and that the planning process has led to improvements in institutional effectiveness. A randomly selected group of employees was interviewed throughout the visit, and each employee was able to state specific ways that they had made improvements to their respective programs as a result of the planning process. A review of goals and objectives accomplished over past few years provided sufficient evidence that the process of planning and evaluation has led to substantive improvements in instructional programs, student support services, and library and other learning support services. (I.B.4; I.B.6)

The College uses a variety of methods and data sources to gather evidence about the effectiveness of its programs and services. These include local and statewide sources of student learning and achievement data, campus-wide surveys, narrative reports from program managers and staff, program specific surveys and focus groups, post-session assessments of staff development activities, and program-level tracking procedures. The results from evaluation processes are used to make improvements in programs and services. (I.B.7)

To communicate matters of quality to internal and external constituents, the institution uses several types of publications, including annual reports, newsletters, and executives summaries of program review findings. In addition to these publications, the president delivers an annual state of the District presentation to the campus, as well as to city councils within the District. Additional presentations are made in public sessions to the board of trustees, including communicating outcomes from the student success scorecard. Over the past year, the institution underwent a process to establish institution-set standards. However these standards were only established at the institutional level. Based on a review of the data provided, the standards
appear reasonable, and longitudinal data examined on student achievement appear relatively stable over the past five years. However, to fully comply with the Department of Education regulations, the institution will need to expand institution-set standards down to the program level. (I.B.5)

Conclusions

The College has created a robust integrated planning process. Throughout the process, the institution has examined and analyzed data on various measures of performance, including student achievement and learning, and has used that data to create targeted goals and objectives for increasing institutional effectiveness. While some goals and objectives are lacking in measurability, there is evidence of substantial participation and buy-in into the planning process across the institution. The institution has effective mechanisms in place to ensure the planning process is reviewed annually and is continuously updated. The College has established institution level standards of achievement, but needs to establish institution set standards at the program level. The College has established evaluation mechanisms for assessing the effectiveness of programs and services and uses results to make improvements.

The College substantially meets the Standard.

Recommendations

Recommendation 1
In order to meet Standards, and to meet USDE regulations, the team recommends the College establish institution-set standards for student achievement, and evaluate itself against those standards, at the program level (and not just at the institutional level). (I.B, I.B.3, USDE Regulation 602.17 (f))

Recommendation 2
In order to increase effectiveness, the team recommends that the College create a process to ensure that all goals and/or objectives at every level of planning (program, unit, area, and institution) are written in measurable terms so that the degree to which they are achieved can be determined. (I.B.2)
STANDARD II
Student Learning Programs and Services

Standard II.A: Instructional Programs

General Observations

The College’s programs are aligned with the mission of the College, especially with regard to degrees, certificates, and transfer. Institutional standards related to the mission have been established (Institutional Data F). Course requirements for degrees, certificate, and transfer are detailed in the College Catalog. Program SLOs are also detailed in a separate section of the Catalog as of 2014-2015. The College’s institutional planning process was revised in 2008-2009 following upon the last accreditation review.

Distance education (DE) and on-ground courses are evaluated using the same criteria. The Distance Education Committee (DEC) was spun off from the Instructional Technology Committee in 2013 to focus on DE issues such as effective contact for online courses.

The College began its first assessment of course SLOs in 2005. Using that date, the College should have completed a full cycle of course SLO assessment by 2013. Program SLOs were revised to focus on degree/certificate SLOs in 2009-2010. The College uses a checklist to standardize the quality of SLOs, and all course-level SLOs were reviewed in 2012-2013. The faculty SLO Coordinator developed a software solution to house course/program SLOs and assessments, which is called SLOutions. SLO assessments were explicitly linked to resource requests in 2013 through modifications to the program review software PlanBuilder. SLO information for online sections of a course began to be pulled out separately in 2013.

The quality of courses is overseen by the approval processes of the Curriculum Committee, including non-credit courses offered through the Office of Continuing Education. The College acknowledges that curriculum development is the responsibility of faculty. The College used its new institutional planning process to link program review to resource allocation, resulting in the funding of two new programs in animation and heavy equipment maintenance. The Office of Continuing Education works with the College to fulfill the lifelong learning focus of the mission, including through the offering of community service offerings. The College participates in a consortium (The Southern California Foothills Consortium) to offer study abroad programs.

The College has clear policies in place with regards to Academic Freedom for faculty and Academic Integrity for students, including the consequences of dishonesty in academic performance. The College has a Code of Ethics for all who participate in the academic community.

The College has a fire technology program at an auxiliary site in Santa Fe Springs. The Police Academy has resumed after a test security breach and is again offering courses in fall 2014.
Findings and Evidence

A review of the offerings and programs in the College catalog, confirmed by conversations with College faculty and administration, makes clear that the College’s degrees, certificates, and general education are aligned with the College’s mission. (II.A.1) This is also supported by the institutional data. Degree programs are comprised of a minimum of 18 units in a major, and the awarding of an associate degree also requires the completion of a general education pattern (II.A.3) as well as elective coursework to reach a total of 60 units. (II.A.4) Based on a review of selected courses, course credit is awarded using accepted norms in higher education including conformity with the appropriate amount of work for the Carnegie Unit. (II.A.2.c; II.A.2.h; USDE CFR §34 §602.16(a)(1)(viii); 602.24(e); 602.24(f)) The 2014-2015 Catalog now includes program SLOs in a separate section. (II.A.6; II.A.6.c) A review of the course schedule for fall 2014 shows courses delivered at different times of day, days of the week, on-ground and fully online. There is a separate schedule for courses offered through Continuing Education. Non-credit ESL courses are advertised in the Continuing Education schedule, while all other non-credit courses are advertised in the general schedule. This suggests that there is some disconnect between non-credit ESL courses and the ENLA (credit ESL) courses, and this was confirmed by conversations with those involved in basic skills at the College. The College uses enrollment data through Enrollment Strategies System (ESS) to determine how and when to offer courses. Decisions about modes of instruction are made through the curriculum review and approval processes. Decisions about instructional delivery systems (e.g., learning management system) are made through review and recommendation by faculty. (II.A.1.a; II.A.1.b; II.A.2; II.A.2.d) Administrative Procedure 4021 is in place to ensure that students are able to complete a program in the event of the discontinuance of a Career Technical Education program (II.A.6.b), and the College began working in fall 2013 to expand that procedure to cover non-CTE programs.

Coursework completed at other institutions may be accepted towards the fulfillment of program requirements, and the Catalog makes clear the documentation needed. (II.A.6.a)

The College has in place rigorous processes for the development and ongoing assessment of courses and programs, including both credit and non-credit courses. This can be seen in the minutes from the Curriculum Committee, minutes from program advisory committees, Program Plans and Reviews in Plan Builder, and the course assessments in SLOolutions. (II.A.2.b) The Curriculum Committee plays a central role in the curriculum development/revision process (II.A.2) and its work affirms the central role of faculty in curriculum development. (II.A.2.a) Review of, tracking of, and assistance in producing course, program, and GE SLOs is the work of the SLO Committee. SLOs are reviewed by the SLO Committee against a rubric to ensure that SLOs are concise and measurable. SLOs are housed in SLOolutions, along with assessments of those SLOs. Currently, SLOs are not required for non-credit courses or community education courses. SLO Assessment reports include data to show student achievement of SLO benchmarks along with proposed actions to improve the level of achievement. Some SLO assessment reports include the names of faculty involved in the SLO assessment. SLOutions also houses program, student services (Service Area Outcomes) and GE SLOs. (II.A.2.b; II.A.1.c; II.A.2.f; II.A.2.i) SLO assessment reports are completed each spring and feed into Program Plans/Program Review, which are completed each fall.

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While the College began its work on SLOs more than six years ago, its current cycle of course SLO assessment and the connection of program SLOs to course SLOs only began two years ago. As clarified by conversations with the SLO Committee, this was the result of a College reassessment of how it was handling SLOs and SLO assessment. Under the current process, the expectation is that every course offered will have an active SLO for assessment each semester, which SLOlutions highlights in yellow. The SLO Committee Chair monitors assessments each semester and communicates with deans and faculty about the status of assessments. Furthermore, the current process assumes that all SLOs for all courses are assessed at least once every six years, and the SLO Committee has stated that the College is on track to meet this expectation. (II.A.1.c; II.A.2.c; II.A.2.f) According to the SLO Committee, SLOlutions affords the SLO Committee Chair the ability to generate reports to show the status of SLO assessments, but the SLO Committee was unable to articulate a definite plan to achieve a complete cycle of SLO assessment for all courses. SLOlutions also enabled the SLO Committee to conduct its review of all course SLOs in 2012-2013. The College considers that student completion of individual courses reflects attainment of course SLOs, and, by extension, completion of program SLOs is achieved through successful completion of individual courses. Currently, not all programs have completed the process of linking courses to each Program SLO in SLOlutions. However, a sampling of SLOs in SLOlutions shows that some of this linking is indicated in comments rather than through the program’s linking function. The process of making sure that Program SLOs are linked to courses is underway and on-going. There is an expectation that course syllabi make SLOs clear to students, but there is no current mechanism to ensure that SLOs are included on course syllabi and not all course syllabi include SLOs. (II.A.6) The College tasked itself through an Actionable Improvement Plan to disseminate course SLOs to students. A follow-up conversation with the Vice President Academic Affairs confirms that this has yet to be addressed due to the changeover in leadership of the SLO Committee.

The College uses departmental exams for two reading classes. There are multiple equivalent versions of the final exam that target course exiting skills. Validity procedures are in place to ensure selections appropriately reflect the levels of the courses and to minimize bias. Exams are administered in the Reading Lab according to procedures outlined in the Guidelines for Administering the Reading Common Final. (II.A.2.g)

The College has in place a Distance Education Committee (DEC), which split off from the Instructional Technology Committee (ITC) in the fall of 2013, that focuses on pedagogical issues particular to DE courses. While the Curriculum Committee reviews the overall quality of courses, regardless of mode of delivery, the DEC is concerned also with issues such as effective contact. Administrative Procedure 4105 delineates how DE courses foster effective student/instructor contact. (II.A.1.b) The DEC approves an addendum for offering a course online, which is then forwarded to the Curriculum Committee with the course application. To ensure that the quality of DE courses is comparable to courses offered on-ground, the College began to disaggregate SLO data by mode of delivery for the purposes of analysis and comparison. (II.A.1.a) The Request to Offer a Course via Distance Education requires an instructor to attest to the Curriculum Committee how this contact will be demonstrated for each course taught. The College showed evidence of assessment and data-driven decision making when an ad hoc retreat regarding DE courses recommended a reduction in DE basic skills and short-term courses based on analysis of student success data. The College does not currently
have a mechanism to monitor courses for faculty-initiated regular and substantial contact with students. It has, however, taken steps towards this goal. Discussions with the DEC Committee Chair and others revealed that starting this fall, all instructors must complete a Course Expectations Letter that is made available to students before enrolling in an online course. In addition to detailing the work that online students should expect, the letter also details how the instructor plans to maintain regular and substantial contact with the students in the course. Furthermore, the College has negotiated a provision in the faculty contract which will require faculty teaching online to have certification to teach online by fall 2015. The program leading to certification is still being developed, but it will be required for all online instructors, even those who are already teaching online. Student identity verification is handled via a student-controlled password (Commission Policies, p40).

PlanBuilder is the software program used by the College to create Program Reviews, Program Plans, Unit Plans, and Area Plans, including questions to help with the analyses of SLO assessment data (II.A.1.a). Goals from these plans are then linked to resource allocation requests, where appropriate, as they move up from program to unit to area. (I.B.3) Evidence was provided from program reviews that detailed the use of data and assessment of SLOs in the planning for program objectives and resource requests and through a demonstration of the functionality of PlanBuilder.

The Catalog details the requirements for the three General Education patterns (Associates, CSU, IGETC) that can be used to complete a degree. Criteria and philosophy for general education are established through BP and AP 4025. The GE pattern covers the subject areas of the humanities, fine arts, natural sciences, and social sciences. The courses in the pattern also map to oral and written communication skills, information competency, critical thinking, and quantitative reasoning, as well as what it means to be an ethical human being and effective citizen. The College has established General Education program SLOs. These are accessible from the public SLOutions website and published in the Catalog (as of 2014-2015). At the current time, the SLO Chair is working to link GE program SLOs with the courses in which those SLOs are achieved. (II.A.3; II.A.3.a; II.A.3.b; II.A.3.c; II.A.6.c)

Minutes from advisory committee meetings demonstrate that CTE programs regularly review graduate employment and curriculum to ensure that CTE programs are relevant and prepare students for current jobs. (II.A.5)

The College has identified an improvement plan for the Academic Senate and senior administrators to develop a mechanism using the College’s website and email system to disseminate information regarding SLOs on course syllabi, academic honesty and DSPS accommodations to students. (II.A.6)

The College is staffed by 178 full-time faculty members. The College demonstrates its commitment to the free pursuit and dissemination of knowledge through BP 4030 on academic freedom, which is easily accessed on the College’s website. (II.A.7) An excerpt of this policy appears in the Faculty Handbook, but even in the full policy there does not appear to be a statement that emphasizes the need for faculty to distinguish between personal conviction and professionally accepted views in a discipline. (II.A.7.a) It is suggested that the College clarify
the distinction in appropriate documents. The College makes clear its expectations regarding academic honesty and student conduct through BP/AP 5500, Standards of Student Conduct. Procedures for handling violations of student conduct are established in AP 5520, Student Conduct Procedures. All are found on the College website, and information regarding student conduct is also found in the College catalog. The College does not seek to instill specific beliefs or world views on any constituencies. (II.A.6.c; II.A.7.b; II.A.7.c)

The college does not currently offer courses or programs to students in foreign locations. (Standard II.A.8).

Conclusions

The College demonstrated that all instructional programs are aligned with the mission of the College.

The College demonstrated that it utilizes assessment, research, and analysis to determine student learning needs and delivers instructional programs and services consistent with the diversity of its students. The College has established student learning outcomes for credit courses, programs, and degrees and uses assessment results to make improvements. The College needs to link program SLOs to the courses where SLOs are achieved, including for general education. The College needs to implement SLOs for non-credit and community education courses.

The College has in place comprehensive and effective planning processes for the development and ongoing assessment of courses and programs, including both credit and non-credit courses. Faculty members have a central role in all activities related to establishing and improving the quality of instructional courses and programs. Advisory committees are utilized where appropriate for career technical education programs. Course credit is awarded for achievement of learning outcomes and the awarding of credit is consistent with College’s policies.

A general education philosophy is clearly stated in the College Catalog and courses are included in the general education curriculum through an assessment of their appropriateness by faculty. Board policy and administrative procedure establish criteria and philosophy for general education.

Degree programs have a focused area of inquiry and career technical education programs include demonstrated competencies and/or preparation for licensure/certification.

Through publications, policies, and documents, students and prospective students receive accurate information about courses, programs, transfer policies, and student learning outcomes. The College needs to ensure that each course syllabus includes the stated student learning outcomes for the course.

For CTE programs that are discontinued a procedure exists so that students can complete the program. However, a procedure does not exist for programs outside of CTE.
Academic freedom/responsibility and student academic honesty are clearly established and managed through Governing Board policies and administrative procedures.

The College substantially meets the Standard.

Recommendations

Recommendation 3
In order to meet Standards and comply with USDE regulations, the team recommends that the College develop a process to ensure faculty initiate regular and substantive interaction with students in Distance Education courses. (Standards II.A.1; II.A.2; USDE Regulation 602.17(g))

Recommendation 4
In order to meet Standards, the team recommends that the College develop procedures that outline how students will complete a program of study (other than CTE) when the program is discontinued. (II.A.6.b)

Recommendation 5
In order to meet Standards, the team recommends the College:
   a. continue its work to fully connect program SLOs to the courses where SLOs are achieved, including for General Education. This should be made fully transparent in SLOlutions or future software to manage College SLOs.
   b. continue to track and monitor the assessment of course SLOs to ensure that a course SLO is assessed every semester the course is offered (per the College’s own plans) and that all SLOs are assessed within a six-year program review cycle.
   c. develop a process for ensuring that course SLOs are included in the syllabi provided to students for every class section offered.
   d. implement SLOs for non-credit and community education courses. (II.A.1.a, II.A.1.c, II.A.2.a, II.A.2.e; II.A.3.a; II.A.6)
Standard II.B: Student Support Services

General Observations

The College has a fully integrated presence in the community and on the campus which is echoed throughout Student Services. The student population is representative of the community and throughout the year, the College maintains an aggressive outreach plan and access and opportunities are made available to students beginning in middle school to their first semester and beyond. The administration and staff in the Office of Student Services provide comparable services to all students on site and in other locations, including evenings and online. Students have access to counseling services, assistance from administration, tutoring and other support needs. There is strong evidence that the institution systematically assesses student support services on a regular basis and uses this data to make program improvements.

Findings and Evidence

Rio Hondo ensures that comprehensive services are provided and made available to all students in all locations and online. These services include, but are not limited to admission and records, assessment, counseling, tutoring, bookstore service and categorical programs serving distinct populations. In addition, during the day and evening hours, at each site and online, there are one or more administrators available to support College students, faculty, staff and College operations. For online support, students can link to a Division Dean electronically as well as request counseling services. Students are able to access an up-to-date catalog at all college locations, in both hard copy and electronic format, that provides accurate and complete general college information, college requirements, and major policies affecting students. Board policies and administrative procedures are available on the college website. Any changes to the catalogue are documented through addendums. (II.B.1; II.B.2.a-d; II.B.3.a)

Student Services Programs have developed Student Learning Outcomes/Service Area Outcomes (SLO/SAO) for programs in this area. As with other campus areas, the Student Services Division utilizes the SLOlutions Software to document and track SLO/SAO progress. Additionally, there is clear evidence that the Division of Student Services participates in the program review process, utilizes data to make program decisions, requests resources and makes adjustments to support students. One such example is the Outreach Program Review where data was reviewed regarding contacts for outreach at the local high schools and the College going rate. Program opportunities were identified along with a strategic direction. One area targeted was Pre-College Support Activities. The College identified the high schools with the lowest College going rate and targeted interventions, specifically, the Early College Academy, which prepares high school students for College. (II.B.3; II.B.4)

In addition, through the program review process, the College evaluated counseling needs and determined an increase need for counseling at off-campus locations. As a result, each off-campus site has dedicated counseling hours for students. The student services staff meets regularly to review program goals and progress towards goals and any changes. The counseling faculty also has a solid presence on the Academic Senate where dialogue occurs regarding student success initiatives and how to improve services to students, both face to face, and online. One such
example includes psychology faculty that identified tutoring supports students needed. The faculty members then researched with other faculty and counseling staff ways to support students. The result was referrals to the Math and Science Tutoring Center and dialogue with the Office of Student Success which resulted in faculty providing electronic and paper practice tests and examples for students to use. (II.B.3.c)

The College outreaches to the community throughout the year and in multiple ways. In addition to traditional high school visits, the staff also present in the evenings and on the school campuses in the communities they serve. Students have an opportunity to connect to the College as early as middle school through the Career Technical Education Academy and the Early College Academy for high school students.

There is strong evidence that demonstrates the collaboration with the local high schools, the College and four year institutions. Through this collaboration, campus discussions, and program review data and analysis, the College has increased outreach activities, created a Summer Bridge Program, Freshman Success Center, and a student compact towards College completion. To support students through these pathways, the College supports students with the application process, placement testing, orientation, student educational plan, Transition 2Rio, Counseling 105 classes, and “mandatory” financial aid training. (II.B.3)

Throughout the year, the campus provides a multitude of activities and events that encourages civic engagement and personal responsibility. In addition to student governance, student participation is seen in the governance process. Students have access to a number of clubs and organizations on campus including academic clubs (e.g., American Society of Engineers and Architects and Phi Beta Lambda), cultural clubs (e.g., Creative Writing Club, French Club of Rio Hondo, and the Art Guild), and department and program based clubs (e.g. Forensics, Puente and Veterans). In addition, the campus hosts a number of support events such as Denim Day, Support Violence Against Women, to Safe Zone Training, as well as the unconscious bias program/cultural competency and cultural fluency. The College also has a number of recognition events for student interests such as the Honors Programs, Academic Achievement and Recognition event and the Transfer Recognition Ceremony. (II.B.3.b; II.B.3.d; II.B.3.e)

The College utilizes CCCApply which is the online admission application available to California Community Colleges and is used throughout the system. The director of admissions served on the statewide advisory team for evaluating the CCCApply application. As a result of this work, the statewide application for admission was updated to "Open CCCApply" which the college now uses for admission. For course placement, the college utilizes ACCUPLACER for English, reading, and English as a New Language. For math, the college uses the Mathematics Diagnostics Testing Project (MDPT) for course placement. Cut scores for both English, reading, and math were recently reevaluated and the college utilizes multiple measures for course placement. The college is also one of twelve colleges statewide participating in the Common Assessment Initiative, which will expand the analysis of assessment measurements for student placement in English and math classes. (II.B.3.e)

The College complies with federal and state laws and regulations in the protection of student records. Hard copies of records are stored in vaults accessible only to the Director of Coordinators of Admissions and Records. Banner, was adopted as the MIS system of the
College in 2010 and have back-up files located in two locations, one 80 miles away and the other out-of-state. (II.B.3.f)

Conclusions

The College demonstrated that it assesses and identifies the learning support needs of its students and develops and implements support programs and services that address these needs. Concern for student growth, development, progress, learning, and success are demonstrated through comprehensive and diverse support services that support the student throughout the college experience including, but not limited to assessment, orientation, counseling/advising, and follow-up services. Support services programs are provided for student with special learning needs or characteristics. Students are provided support services at all college locations.

The College catalog and other publications provide students with current and accurate information about the College, programs, services, requirements, policies, and procedures.

Student education records are appropriately stored, maintained, and secured. Policies and administrative procedures are established for the release of student education records consistent with laws and regulations.

The College assesses the effectiveness of student support services through program review and assessment of student learning outcomes. The results of these evaluations are used to make improvements for student support services.

The College meets the standard.

Recommendations

None.
Standard II.C: Library and Learning Support Services

General Observations

The College’s Library and other learning support services for students on the main campus are sufficient to support the institution’s instructional programs and intellectual, aesthetic and cultural activities in whatever format and wherever they are offered. The College has five full-time librarians with several part-time librarians and support staff.

The College constructed a new Learning Resource Center on the main campus in 2009. The Library and several student support labs were moved to the new building. The Library occupies the second floor and the expansion of space provides an increase in services for students on the main campus.

There are three dedicated computer labs; one on the main campus and one at each of the two educational centers (SWEC and EMEC). The Santa Fe Springs Fire Technology Training Center also has a computer lab which students may access outside of scheduled class time.

The librarians and other learning support services professionals select and maintain educational equipment and materials to support student learning. The College’s book collection seems adequate in terms of quantity, but it is not as current as it should be.

Discussions are currently taking place to expand information competency instruction to students and to increase library support for satellite locations.

Findings and Evidence

Overall, the College provides sufficient library and learning support services for its students and faculty. The mission of the College Library is to support college goals by “providing instruction and services that introduce students to the depth and breadth of information sources available to them in an academic library, encourage the development of critical thinking about information and its use, and highlight the ‘lifelong learning’ aspect of the College Mission Statement.”

In 2009, the College opened a new Learning Resource Center. The Center houses learning labs and the Library. The College also provides services to all faculty and students at its satellite locations. A review of services was confirmed through the College catalog, website and visitations. (II.C.1)

Librarians and instructional faculty are responsible for selecting and maintaining the Library collection. Librarians maintain the collection based on input from instructional faculty, which includes surveys, attending Curriculum Committee meetings and reviewing course outlines of record, and attending division and department meetings. Librarians evaluate available resources and make recommendations which will aid students in course assignments. Instructional faculty members make recommendations for library materials as part of the curriculum development and approval processes. A librarian attends curriculum committee meetings to ensure that the Library supports new and/or revised curriculum (II.C.1.a). Faculty surveys are gathered and
statistical reports are analyzed to further assist the Librarians in meeting the needs of students and faculty. Survey results indicate that the services are adequate. There were some comments that the collection could be more current and the Collection Age Report would indicate that the collection could be more current. (II.C.1.a, II.C.2)

Librarians are available to teach information competency skills to classes and/or one-on-one sessions with students. Library orientations, which include an introduction to the Library, review of assistance available, utilizing the Library catalog and databases, etc. are tailored to specific research topics or resources relevant to a particular class. Upon completion of the orientation student learning has been or will be assessed. The Library is currently developing a series of informational literacy tutorial modules for on-line learning. (II.C.1.b.)

The Library is open 68 hours/week. All on-line resources are available 24 hours/day. The Library has adequate computers for student use. There are no Librarians at the satellite locations. The College is currently developing a plan to increase the support for the satellite educational centers. (II.C.1.c.)

The College has provided security and maintenance for its Library and the educational centers. All books contain a 3M security strip and the security gates will signal an alarm if materials have not been properly checked out. Maintenance of the facilities is completed daily. (II.C.1.d)

The Library maintains contractual agreements for several support systems and services. These services are evaluated regularly for volume of use, need and reliability. Currently the Librarians are evaluating a new system for printing. This system would allow students to photocopy and print and also to make computer reservations. (II.C.1.e)

Librarians are constantly reviewing their resources to improve services. This was evident through an on-site Accreditation Survey – Employees General 2013 and Accreditation Survey – Students 201). However, according to the Accreditation Survey Results – Employees General 2013, only 32% of faculty teaching at satellite campuses agreed or strongly agreed that the Library resources provided adequate support their teaching. As a result of this finding the College plans to increase outreach to faculty teaching at satellite campuses, but the College provided no actionable improvement plan for how this will be accomplished. (II.C.1.c, II.C.2)

The Library has also developed Student Learning Outcomes and Service Area Outcomes. Two outcomes are assessed through multiple measures. Outcomes are available in SLOlutions and the Library Program Plan in Planbuilder, but there was no evidence that there had been broad-based discussion on the findings or action steps taken for closing the loop on the outcomes. (II.C.2)

**Conclusions**

The College demonstrated that it provides sufficient library and other learning support services for students to support the College’s educational programs and mission. The College provides access and training to students so that students are able to effectively utilize library and other learning support services. The College regularly evaluates library and other learning support services and uses assessment results to improve the effectiveness of these services. Results from
a recent evaluation found that improvements were needed for services at satellite campus locations.

The College substantially meets the Standard.

**Recommendations**

**Recommendation 6**
In order to increase effectiveness, the team recommends that the College develop a plan for improving the effectiveness of library services at satellite campuses. (II.C.1.e)
STANDARD III
Resources

Standard III.A: Human Resources

General Observations

The College employs a Human Resources Director who is a member of the President’s Cabinet and reports directly to the Superintendent/President. The director has been in her current position for approximately 10 years. The department’s program statement is as follows:

College is committed to employing qualified administrators, faculty and staff members who are dedicated to student success. The Board recognizes that diversity in the academic environment fosters cultural awareness, promotes mutual understanding and respect, and provides suitable role models for all students. The Board is committed to hiring and staff development processes that support the goals of equal opportunity and diversity, and provide equal consideration for all qualified candidates.

Since the accreditation evaluation in 2008, the College has implemented an institutional code of ethics, redeveloped and improved the faculty and administrative evaluation criteria and process, and strengthened its professional development program.

The department is in the process of implementing a web-based software program to improve communication with applicants and data management of applicant information, as well as streamline the overall hiring process.

Findings and Evidence

The College follows Governing Board policies and administrative procedures to assure integrity and quality in employing qualified personnel to develop, implement, and support programs and services. (III.A.1.a)

BP 7120, Recruitment and Selection
BP 7217, Faculty, Employment Contract
AP 5030, Classified and Confidential Employees, Employment of
AP 5025, Employment Procedures for Administrators

The College complies with board policy, administrative procedures, and collective bargaining agreements related to how evaluations are conducted. There is evidence to verify the institution is assuring personnel are being evaluated systematically and at stated intervals. The Office of Human Resources, in cooperation with the faculty, has conducted a full-scale review of minimum qualifications, equivalencies, and faculty service areas for currency to ensure all faculty members continue to meet eligibility standards. (III.A.1.b)

The self-evaluation cites the May 16, 2014 faculty association (RHCFA) and District tentative agreement as stating “Faculty evaluations may be based, in part, on whether a unit member
provides assessment data,” and that “Part-time faculty can participate in the SLO process on a voluntary basis. Part-time faculty members are not required to participate in the development of student learning outcomes, but they are required to conduct assessments and participate in the review of the outcomes as evidenced by the inclusion of an item on the evaluation form for faculty. The evaluation item states “Provides SLO assessment data and participates in its review.” The form has been approved by the Rio Hondo College Faculty Association and the District.

The team is concerned, however, that the College has not included SLOs as a component in evaluations for “others directly responsible for student progress toward achieving stated student learning outcomes.” An additional concern is that tenured faculty under standard review (every 3 years) are evaluated through a peer process with a peer review form that omits the inclusion of SLOs as part of the evaluation criteria. (III.A.1.c)

In response to Recommendation 4 from the 2008 self-evaluation, the College implemented a statement of professional ethics in 2009, added “integrity and civility” as an essential component to the overall ethics philosophy in BP 1200 (District Vision, Mission, Values Statement), and adopted a board policy on institutional ethics (BP 3050) in September, 2014. (III.A.1.d)

The College has a sufficient number of faculty with full-time responsibility, experience, and credentials necessary to deliver effective programs and services. Staffing considerations are evaluated through the planning process, as evidenced through The Planning Process Handbook and related program and unit plans provided by the Office of Human Resources and minutes of Staffing Committee meetings. The College recently filled the only vacant cabinet-level position, ensuring a fully staffed senior administrative structure. The Superintendent/President meets with the Administrative Counsel and the Planning and Fiscal Counsel at regularly scheduled meetings to facilitate communication, planning, and collaboration. (IIIA.2)

Personnel policies and procedures are developed and updated through a process which includes all constituency groups, including administrators, faculty, staff, students, and board members. The College subscribes to the Community College League of California (CCLC) Policy and Procedure service, which provides “legal updates to policies and procedures based on changes in law, statutes, or codes.” The CCLC service also provides legally compliant policy and procedure templates for Colleges to customize for its respective needs. The College has a review and revision process for all policies and procedures through BP and AP 2410. The College maintains current and relevant policies and procedures to ensure fairness in all employment procedures (BP 7100, Commitment to Diversity; BP 3410, Nondiscrimination; BP 3420, Equal Employment Opportunity; and BP 7120, Recruitment and Selection). As evidenced by Governing Board policies and orientation meetings for selection committee members, the College has appropriate Equal Employment Opportunity (EEO) practices, including training for selection committee members, monitoring interview questions to ensure fairness and compliance, and by providing an EEO monitor to all recruitment processes to monitor confidentiality and consistency throughout the recruitment process. (IIIA.3, IIIA.3.a, IIIA.4)

In discussion with Human Resources office staff and through a tour of the Human Resources office, it was confirmed that the storage and security of personnel documents are managed
appropriately. Files are maintained in locked cabinets with access limited to Human Resource office staff only. (IIIA.3.b)

The College has provided evidence through diversity staffing data that it has a diverse workforce, and maintains a commitment through policies and procedures that it will continue to strive for equal employment opportunity. (IIIA.4)

Rio Hondo’s Staff Development Program and Cultural Diversity Committee have provided a wide variety of professional growth opportunities to support its diverse personnel, as evidenced by samples of diversity training and announcements. The Staff Development Committee regularly surveys faculty for training needs. (IIIA.4.a; IIIA.5.a)

The Office of Human Resources has established an annual process to assess the College’s record in employment equity and diversity. Demographic data on the existing workforce, as well as applicants, is tracked and assessed each February. Assessment results are reported to the Board of Trustees. Based on diversity data, recruitment efforts are targeted to reach underrepresented populations. Equal Employment Opportunity (EEO) trainings are provided to selection committees, an employment ethnicity questionnaire is administered to applicants, and an EEO monitor oversees each recruitment process. (IIIA.4.b)

The College provides new employees with notice of its anti-harassment and discrimination policies, as well as provides all employees and students said statements on an annual basis. All administrators participate in mandated sexual harassment training on required timelines. The College also has considerable policies and procedures in place to advocate and demonstrate integrity in the treatment of all employees and students. (IIIA.4.c)

Through policies and practices the College demonstrates a commitment to professional development. The College assesses training and professional development needs through surveys of faculty and classified staff. While not comprehensive across all professional development activities, the College evaluates the effectiveness of many activities by asking participants to provide feedback on their experiences. Additionally, the Staff Development team has conducted SWOT analyses to assess the overall effectiveness of professional development efforts. These evaluations and assessments are used to improve the effectiveness of professional development opportunities. (IIIA.5.b)

The effective use of human resources is managed through program review and annual planning. The allocation of resources for replacement positions or new positions is the result of the institutional planning/review process. For resource allocation purposes, human resources requests must be included and justified in program review documents and program plans. This consists of a comprehensive evaluation of programs and identified areas of improvement. Requests must be aligned with the mission and goals of the College. (IIIA.6)

Conclusions
The College employs personnel who are qualified by appropriate education, training, and experience to assure integrity and quality of its programs and services. The College maintains an adequate number of qualified faculty, staff, and administrators with appropriate preparation and experience to provide services necessary to support the institution’s mission and purposes. Personnel policies and procedures are available for information and review and are equitably and consistently administered. Understanding of and concern for issues of equity and diversity are demonstrated through policies and practices. Professional development opportunities are available for all employees. Human resource planning is integrated with institutional planning through program review and resource allocation procedures. The effective use of human resources is assessed and the results of the evaluation are used for improvement. The team found that some personnel directly responsible for student progress toward achieving stated student learning outcomes do not have as a component of their evaluation, effectiveness in producing learning outcomes. Of particular concern was the absence of this component for the tenured faculty evaluation process.

The College substantially meets the Standard.

**Recommendations**

**Recommendation 7**
In order to meet Standards, the team recommends all evaluations for 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. (III.A.1.c)
Standard III.B: Physical Resources

General Observations

The College has adequate and sufficient physical structures to support the institution both on the main campus and at satellite locations. The College recognizes that due to the many hills, the geographic terrain on the campus is difficult to navigate. Therefore, it has an extensive handicap accessible shuttle service which is available to everyone from the early morning to late at night. The campus is essentially on three levels. Depending on the entry point, one will enter on one of those levels. The Office of Disabled Students Program and Services is located on the third level. While this seems an inconvenient location for this office, it is actually ideal since nearly all campus services are on the third level, such as student services, student center, and nearly all major classrooms. Additionally once students enter on the third level, they have convenient access to elevators to the second and first levels of the campus. In the event of an emergency, “man lifts” are available throughout the campus.

Findings and Evidence

The College was successful in passing a general obligation bond measure, Measure A, in 2004. Measure A provided funding to address needed new construction and building renovations along with campus modifications. As part of this measure, the institution built a massive metal bridge which connects the largest parking lot to the third level of the campus, which again is the main level. In addition, the College closed the street that went directly through the main part of the campus. This modification keeps vehicles off the main part of the campus, making the campus more open, aesthetically pleasing, and accessible. This structural change allowed students to sit on the lawns and other areas without having to worry about traffic. This redesigned campus increases student safety, ensures more student interaction, and makes way for a number of cultural events, student experiences, activities, and interactions. Also, the space has created opportunities to enrich campus life. (III.B.1; II.B.1.a)

The College has sufficient dedicated physical space and has added computer labs to all satellite locations, making for sufficient labs and physical resources for students. In addition, other support staff, such as custodial services, provides services to each facility. Any maintenance request is routed to the department director, who then forwards it to the facilities secretary who inputs the work order. (III.B.1.a)

The College uses SchoolDude database management software to manage service requests which are routed through the maintenance secretary. A review of service logs shows requests are addressed in a timely manner. Requests for building modifications are managed through the institutional program review, documented, and tracked the Facilities Modifications Request Application. All such requests are cycled back through the facilities and technology master plans, monitored and tracked. (III.B.1.b)

Safety training and emergency preparedness drills occur on both the main campus and at the satellite campuses. The drills are coordinated and facilitated by campus Building Emergency Coordinators (BEC’s) and Building Emergency Leaders (BEL’s). In addition, the campus has
Blue Safety lights throughout the campus which are powered by solar energy and connect to Emergency 911. In the event of an emergency, the on-call administrator executes his/her authority as was in the case when the electricity was cut off on the main campus and the Vice President of Student Services had to make a decision regarding whether or not to cancel classes due to safety. (III.B.1.b)

The College utilizes its Five Year Capital Outlay Plan, Facilities Master Plan, Educational Master Plan, division program plan, space utilization reports, Scheduled Maintenance Plan, and other critical documents to identify campus needs at all sites. These plans outline the project lists and are aligned to the budget plan through PlanBuilder software. PlanBuilder is used campus wide to develop, monitor and connect the program plans to overall College planning. These plans are also monitored, tracked, and have fiscal resources identified to ensure completion. (III.B.2; III.B.2.a, III.B.2.b)

Conclusions

The College's physical resources are designed to support student learning programs and services, regardless of location or means of delivery. The needs of programs and services are assessed when planning new buildings, scheduling maintenance, and implementing modernizations.

Planning processes for physical resources ensure that program and service needs determine equipment replacement and maintenance to ensure effective utilization of resources and to ensure continuing quality of those programs and services. Facilities projects are linked to institutional planning through the Five-Year Construction Plan, the Facilities Master Plan, the Educational Master Plan, and the Technology Plan. Physical resources are also maintained in a manner that assures the safety and security of college personnel and students.

The College meets the Standard.

Recommendations

None.
STANDARD III.C: Technology Resources

General Observations

College has provided ample evidence that it has developed a thoughtful and comprehensive technology planning process which is well designed to meet the technology needs of students, faculty and staff, especially in the past few years. Since 2006, the College has been engaged with strategic and long-term technology planning in the form of a Technology Master Plan. This plan is revisited and evaluated annually through the planning/review process and is linked to budget decisions. Also, the Technology Master Plan responds to external initiatives at the state level which will require the use of various technologies. In the past few years, and particularly in the past year, the College has developed technology committees on campus which identify and prioritize the technology needs of faculty and staff. However, the College has yet to close the cycle in the planning process and evaluate the effectiveness of its technology decisions and allocations. On campus, the College has many computer labs and wireless services for students, allowing them to access the internet, check email, register and pay for classes. Infrastructure is also in place for faculty and staff as they manage online courses, and other teaching and service related issues. The College has provided many resources to support students and faculty with technology and online issues, including hardware, software, training opportunities, and staff support. The College provides various professional development opportunities for technology related training.

Findings and Evidence

The College has sixteen locations for students to access computer labs and provides unsecured wireless access throughout campus and at its three educational satellite locations. Students use AccessRio to access email and register for classes; the College subscribes to Blackboard, a learning management system; and the College provides GIS and CAD access to students as well as a tablet/smart phone app called Rio Hondo iOS App. The College uses Banner as its primary information system for college operations. The College provides ample hardware, software, networking and support services to students, faculty and staff in order to meet the mission and goals of the College. (III.C.1.a)

The College provides technology training through videos, in-person workshops. The IT department also works with the Staff Development Committee to offer training opportunities for faculty and staff. The College employs a full-time technology trainer who is a member of the Staff Development Committee. The College also has two support staff members for the Virtual College, who assist faculty and staff involved with online learning. In 2014, the College approved an online teaching certification process, which will be required of all faculty members teaching online beginning fall 2015. (III.C.1.b)

The College does provide evidence that it systematically maintains and upgrades technology infrastructure and utilizes technology to support its programs and services. The Office of Instructional Technology Services maintains an equipment inventory of all equipment throughout the College's main campus and educational centers. The College provides nearly 850 machines to students on its main campus and educational sites. The College uses Blackboard as a
course management system, and offers about 115 online courses. Machines are secured with Deep Freeze and the College network is protected by a Fortinet firewall. As evidenced by random classroom visits, classrooms are equipped with technology systems to support instruction and learning. (III.C.1.c, III.C.1.d)

The College has a comprehensive technology planning process in place, which is part of the College’s larger strategic planning process. The first long-term technology plan was created in 2006, and updated in 2010. The current Technology Master Plan was developed in 2013 and approved in fall 2014. This long-term planning occurs in a five-year cycle and technology issues are evaluated annually as part of the annual planning/review process. The College also has three standing committees for technology planning and evaluation - Distance Education Committee (DEC), Enterprise Systems Advisory Committee (ESAC), and the Instructional Technology Committee (ITC). Programs identify technology needs in the annual planning/review process, and those needs are incorporated into unit and area plans. Resource allocation plans are prioritized by the Technology Committee, and resource allocations are made at the PFC. The utilization of long-term planning, annual planning, and an oversight committee structure provide for ongoing assessment of the effective use of technology resources. The results from these assessments and subsequent planning form the basis for technology improvements (III.C.2)

Conclusions

Technology supports the needs of learning, teaching, college-wide communications, research, and operational systems. The operation and effectiveness of the College are enhanced through the utilization of technology services, support, and infrastructure. Professional development opportunities and training are provided for the effective use of technology resources. Systematic planning provides for acquiring, maintaining, and upgrading technology equipment and infrastructure. Technology planning is aligned with institutional planning and technology improvements are based on assessment of the effective use of technology resources.

The College meets the Standard.

Recommendations

None.
STANDARD III.D: Financial Resources

General Observations

The College has sufficient financial resources and sound processes to support student learning programs and services and to improve institutional effectiveness. Also, the College’s institutional planning processes enjoy widespread dialogue that provide for an effective deployment of resources that are strategically focused on helping achieve the educational mission. The distribution of resources supports the development, maintenance, and enhancement of programs and services for students. The College’s plans for allocating its financial resources are integrated with institutional planning processes. The institution manages its finances with integrity and in a manner that reasonably ensures both short-term and long-term financial stability and solvency. However, recent financial trends and key metrics provide cause for caution.

Findings and Evidence

The College allocates its resources in a focused effort to fulfill the mission and goals of the institution. Financial planning of the College is integrated with and supports all institutional planning. Through annual plans and program review, program goals/objectives and resource requests are linked to institutional goals and mission. Prioritization of resource allocation requests are reviewed at an Institutional Planning Retreat and ultimately approved by the Governing Board (if funds are available). (III.D.1.a)

The College has sufficient financial resources to support student learning programs and services and to improve institutional effectiveness. Also, the College’s financial resource planning is integrated with institutional planning in a manner that reasonably ensures both short-term and long-term financial stability and solvency. The College has maintained general fund reserves between 7% and 14% each fiscal year for the past five years. This fiscal stewardship is an especially noteworthy accomplishment in light of the substantial multi-year economic challenges California’s community Colleges have faced in recent years. In this regard, the College’s institutional planning takes into consideration available financial resources including the base budget, new and expiring grant funding, restricted categorical funds, and general obligation construction bonds. However, some findings deserve some attention from the College. Among these financial concerns are the following: (a) over the past few years the College’s cost of employee salary and benefits as a percentage of total expenditures has increased from 82% to 87%, which is higher than the statewide average of 84%; (b) the College has deficit spent in recent years causing a commensurate decline in reserve levels; (c) the College has a substantial unfunded actuarial accrued liability of $59.9 million for retiree health benefits that is not yet fully funded. These matters of concern should be widely discussed with institutional stakeholders on a regular basis in order to review options to control costs and mitigate any descendant negative impact on the District’s financial health. (III.D.1.b)

Concurrently, the College has focused on its future fiscal health by allotting considerable funds for long-term liabilities such as the lifetime health and welfare benefits that are provided to all employee groups. The College has earmarked a total of $39 million toward meeting the
institution's $59 million dollar unfunded actuarial accrued liability (UAAL) that was identified in the July 26, 2013 actuarial study of retiree health benefits. Of the $39 million set aside to meet the liability for retiree benefits, $10 million has been reserved in an irrevocable trust in the Futuris Public Entity Investment Trust Program, while the remaining $29 million is accounted for within accrued liabilities, internal funds, and audited retiree health insurance funds within joint powers authority. The future physical plant maintenance needs of newly constructed or modernized buildings is another long-term liability that the College has thoughtfully considered by allocating $4.2 million from the initial sale of general obligation bonds for scheduled maintenance. (III.D.1.c).

The College has established guidelines and processes that it follows for institutional planning and resource allocation. All constituent groups have an opportunity to participate in the development of institutional plans and budgets. (III.D.1.d)

The College's financial documents have a high degree of credibility and accuracy based on independent audit reports. Furthermore, the 2012-13 Adopted Budget and five year trend for general fund expenditures indicates that the institution funds its programs and services in a stable way, allocating appropriate resources to support student learning programs and services (III.D.2.a). As demonstrated through three independent audit reports, the institution clearly responds rapidly to external audit findings with effective interdepartmental communication and timely implementation of corrective action (III.D.2.b). Information about the budget, fiscal conditions, financial planning, and audit results are presented to the Governing Board, faculty, staff, and student leadership and also disseminated throughout the College in a variety of ways. For example, general information about the budget and the budgeting process has been provided at FLEX day workshops; budget worksheets are discussed with department and division staff; budget reductions and enhancements are discussed at meetings of the Planning and Fiscal Committee and the annual institutional planning retreat; and quarterly and annual financial reports are regularly provided at meetings of the Governing Board. (III.D.2.c)

The independent audit reports indicate that the College utilizes funds from non-general fund sources such as foundation, grants, and so forth, with integrity and in a manner consistent with the intended purpose of the funding sources (III.D.2.d). The College has appropriate internal control structure and mechanisms in place to assure financial integrity and responsible use of resources. Three independent audit reports confirm that internal controls are deemed sufficient for purposes of auditing the financial statements. Of note, the self-evaluation report provides evidence that internal controls are established on an individual case basis. (III.D.2.e)

The institution maintains sufficient cash balances and reserves to maintain stability. Additionally, the College is a member of multiple Joint Powers Authorities for risk management capabilities including insurance coverage. Contingency plans have been developed in terms of insurance reserves and also budget reduction strategies to mitigate for an actual or potential reduction of revenues (III.D.3, III.D.3.a). The institution practices effective oversight of its finances, including management of externally funded programs. For example, the College has a comprehensive process for evaluating grant opportunities. This process ensures that each grant opportunity supports student learning and the institution's mission, is financially viable in terms of College resources, and plans for institutionalization, if appropriate (III.D.3.b). The College has
allocated considerable funds for long-term liabilities such as the lifetime health benefits that are provided to all employee groups. Further, the College has assigned an additional $29 million for this purpose within accrued liabilities, internal services funds, and an audited retiree health insurance fund within a joint powers authority. The College has also been proactive in setting aside $4.2 million of General Obligation Bond funds for future physical plant maintenance needs (III.D.3.c). The actuarial plan has been prepared every five years with the latest plan having been prepared in 2013; however, preparing a plan no less frequently than every two years would be considered best practice in accordance with GASB 43/45 requirements (III.D.3.d). Locally incurred debt instruments are minimal (leases) and are appropriately allocated in the annual budget. These minimal debts are not substantial and do not impact the annual budget in a material way (III.D.3.e). The institution has a financial aid default management plan that indicates compliance with federal requirements. The loan default rate is well under the federal loan default rate limit (III.D.3.f). The College utilizes many contractual agreements for a variety of services with external entities. In reviewing multiple contracts, these agreements are consistent with the mission of the organization, are governed by institutional policies, and contain appropriate provisions to maintain the integrity of the institution (III.D.3.g). The College employs both the annual independent audit report and internal evaluations of individual programs, as-needed, to assess its financial management practices and make improvements to internal control structures. (III.D.3.h)

Financial resource planning is integrated with institutional planning. The College systematically assesses the effective use of its financial resources indirectly when it makes adjustments to its programs and services in ongoing efforts to improve. Financial allocation adjustments are made in context of changing needs, strategies, and goals of the institution. Resource allocation decisions are developed from program review outcomes, institutional needs, and plans for improvement. Prioritization of resource requests is managed through established budget development procedures and college governance structures. (III.D.4)

Conclusions

Student learning programs and services and improvement of institutional effectiveness are supported by sufficient financial resources. Financial resources are distributed through established governance and budget development procedures assuring the development, maintenance, and enhancement of programs and services. The College has a record of managing its financial affairs with integrity that results in financial stability. Financial planning provides for short-term and long-term financial solvency. Financial resources planning efforts are integrated with institutional planning. Some financial items deserve careful monitoring to ensure financial integrity and stability including: salary and benefits expenditures in relation to total budget, deficit spending, and unfunded actuarial liability.

The College meets the Standard.

Recommendations

None.
STANDARD IV
LEADERSHIP AND GOVERNANCE

Standard IV.A: Decision-Making Roles and Processes

General Observations

Institutional leaders including the Governing Board and president, the faculty, staff and students have created an environment for empowerment, innovation and improvement. Interviews, policies, administrative procedures, and practices demonstrate that campus voices are heard when discussing programs and services through the participatory governance structure.

The College has undertaken much training in leadership, roles and responsibilities. The Planning and Fiscal Council (PFC) dialogue has led to increased contributions from members of the institution as well as increased knowledge of the roles and responsibilities of constituency groups that play a part in participatory decision-making at the College. Especially prevalent has been the training for the Governing Board through study sessions and professional development.

Governing Board policies have been reviewed and approved related to governance understanding and participation and areas of influence or purview have been part of the review. The most prominent Governing Board policy for this purpose is 2510 – Participation in Local Decision-Making. The ongoing role of administration, faculty, staff, and students in the development of policies and procedures is found within the participatory governance process. It is understood that the outcomes of governance processes result in recommendations to the Governing Board, with the exception of mutual agreement with the Academic Senate on those policies specific to academic and professional matters.

The College has complied with the Accrediting Commission and other external agencies in all reporting and requirements. The roles of leadership and governance through decision-making structures have been evaluated for their integrity and communication patterns and continued noted improvement has been made since the 2009 Follow-Up Report and in the last two years with new leadership.

Findings and Evidence

The Organizational Structure and Governance Manual provides the parameters for all constituency groups engaging in participatory/shared governance. This governance structure provides the framework for creating an environment that supports empowerment, innovation, and input into decision-making. Workshops have been presented by the statewide Academic Senate and the Community College League of California to assist constituent groups in understanding roles in participatory governance. The governance structure provides opportunities for all employees and students to contribute to improving programs and services. Faculty, staff, administrators and students provided examples of recent participatory discussions and decisions that have demonstrated the honoring of constituent insights, contributions and process through the decision-making structure. The examples include joint review of data and planning at the annual spring Institutional Planning Retreat, the revision of the mission...
statement, and class sections reduction meetings. Within these examples are the themes of participation and collaboration. (IV.A.1.)

Several written policies and administrative procedures provide for participation in decision-making. However, the primary policy and administrative procedure is BP/AP 2510, Participation in Local Decision-Making. This policy and administrative procedure specifies how individuals and/or groups participate in the governance processes as appropriate to their roles and responsibilities. Additionally, there are some policies and administrative procedures that define specific student participation. These include:

BP/AP 5400, Associated Students Organization
BP/AP 2015, Student Member of the Board
BP/AP 2105, Election of Student Members (IV.A.2.a)

Recommendations about student learning programs and services are primarily the responsibility of the faculty, Academic Senate, and academic administrators. The procedures and roles for their involvement are contained in a number of policies and administrative procedures including:

BP/AP 2410, Board Policy and Administrative Procedure
BP/AP 4020, Program Curriculum, and Course Development
BP/AP 4010, Academic Calendar
BP/AP 4021, Vocational Program Discontinuance
BP/AP 4050, Articulation (IV.A.2.b)

Training in the governance structure and process, along with leadership academy development for employees, has been a very effective component of the strong foundation being built for the overall leadership and governance of the College. Training specific to constituent roles and responsibilities has been effective in the working relationship between the Governing Board and the Academic Senate. Interviews revealed an increased confidence with the new superintendent/president and documentation of the last two years in Planning and Fiscal Council minutes and governance documents demonstrate an improvement in working together for the good of the institution. The team found evidence of effective communication occurring within the Planning and Fiscal Council at the highest governance level. (IV.A.3)

The College has a demonstrated record of complying with ACCJC standards, policies, and guidelines. The College has satisfied all requirements for public disclosure, self-evaluation, team visits, and substantive change. The College has responded in a timely manner in addressing Commission recommendations and submitting required reports. (IV.A.4)

Assessment of the governance structure most recently occurred in spring 2014 when eight governance groups participated in a survey to evaluate the effectiveness of the governance structure. Results from the survey were distributed broadly. A theme that emerged from the results of the survey was a need to improve communications within and among governance groups. The theme of improving communication also emerged in the Campus Climate Survey. However, the College offered no actionable plan for addressing this outcome. The College referenced strategies that were deployed in 2010. The actionable plan in the current self-
evaluation addressed a plan to review the survey instrument and to improve participant response rates, but did not address the need to improve communication. (IV.A.5)

Conclusion

The College has both a governance structure and a culture that encourages participation of all constituencies. The *Organizational Structure and Governance Manual* provides a guide and procedures for implementing governance that support decision-making. The roles of faculty, staff, administrators, and students in governance are clearly defined through the manual, policies, and procedures. The College has a mechanism for evaluating the effectiveness of the governance structure. The results from the effectiveness of governance effectiveness revealed a need to improve communications within and among governance groups.

The College substantially meets the Standard.

Recommendations

**Recommendation 8**
In order to increase effectiveness, and to address the finding from the assessment of governance effectiveness, the team recommends that the College develop and implement a plan for improving communications within and among governance groups. (IV.A.5)
Standard IV.B: Board and Administration Organization

General Observations

The Governing Board consists of five members and one student member. Through extensive involvement in activities at the local, regional, state, and national level, the Governing Board stays informed about concerns and issues relevant to governing the Rio Hondo CCD. This involvement enhances Governing Board members’ understanding of education policy and practice.

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

The Superintendent/President reports directly to the Governing Board and operates with an administrative structure consisting of seven administrative direct reports: three vice presidents and four deans and/or directors. The Superintendent/President delegates authority to these administrators to manage programs and services within their assignments.

Findings and Evidence

The members of the Governing Board are elected by District registered voters to represent the community service area configurations of the District service area. The student member is elected by a popular vote of the student body. The Governing Board is an independent policy-making body that acts as a whole when reaching decisions. Site visit interviews with Governing board members revealed a strong understanding and commitment to the communities being served, including current and prospective students. (IV.B.1.a)

Policies are consistent with the mission statement and assure that the Governing Board has ultimate authority for educational quality, improvement of student learning programs and services, fiduciary responsibility, and legal matters. The Governing Board’s actions are final and not subject to review by any other entities. The Governing Board regularly reviews data, outcomes, and evidence in support of educational quality. The Governing Board confers with legal counsel on a regular basis during closed sessions of meetings. The Governing Board, through several policies and regular reports, assures the financial integrity of the District. (IV.B.1.b, IV.B.1.c)

Several policies specify the Governing Board’s size, duties, responsibilities, structure, and protocols. These policies are published on the College’s web site under Chapter 2 – Board of Trustees. (IV.B.1.d)

Governing Board policies and administrative procedures are developed, reviewed, and/or modified through the process outlined in BP/AP 2410, Board Policy and Administrative
Procedure. The team found no inconsistency between Governing Board actions and its policies. (IV.B.1.e)

BP 2740, Board Education, establishes policy for ongoing professional development of Governing Board members including orientation for new members. BP 2100, Board Elections, establishes staggered terms of office to ensure continuity of membership. (IV.B.1.f)

The Governing Board's self-evaluation process for assessing performance is clearly defined, implemented, and published in BP 2745, Board Self-Evaluation. The last self-evaluation of performance was conducted in June 2014. (IV.B.1.g)

BP 2715, Code of Ethics/Standards of Practice, provides a code of ethics for the Governing Board and includes a clearly defined process for handling violations of the code. The team found no evidence of any violations of the code of ethics. (IV.B.1.H)

The Governing Board has demonstrated engagement with accreditation through establishing a Governing Board goal, receiving regular reports about accreditation progress, and participating in the institutional self-evaluation for Standard IV. The Governing Board's self-evaluation included items related to accreditation. (IV.B.1.i)

BP/AP 2431, Superintendent/President Selection, establishes the search process when a vacancy occurs, was revised in October 2009, and was utilized for the search that resulted in the hiring of the current Superintendent/President. BP/AP 2435, Evaluation of Superintendent/President, establishes the process for evaluating the Superintendent/President. The last evaluation was conducted April-July 2014. BP 2430, Delegation of Authority, establishes that the Superintendent/President has responsibility and authority to implement policies and is accountable for the operation of the College. (IV.B.1.j)

Through BP/AP 3100, Organizational Structure, Superintendent/President establishes the organizational structure of the District. BP/AP 3100 also grants authority to the Superintendent/President to establish lines of responsibility and general duties of employees. (IV.B.2.a). The Superintendent/President demonstrates primary responsibility for the overall quality of the College through appropriate engagement with planning and institutional effectiveness efforts. Through appropriate governance structures input is provided to the Superintendent/President, but ultimate decision-making rests with the Superintendent/President and/or the Governing Board.

Through BP/AP 3250, Institutional Planning, and other planning documents and procedures the Superintendent/President guides institutional improvement. Planning processes are collaborative and collegial and include: setting values, goals, and priorities; utilizing qualitative and quantitative data; utilizing the results of program review and assessment to inform resource allocation decisions; and evaluating the effectiveness of planning and implementation efforts. (IV.B.2.b)

Through BP 2430, Delegation of Authority, the Superintendent/President has authority and responsibility for implementing Governing Board policies and for implementing decisions of the
Governing Board that require administrative action. Through regular review and revision of Governing Board policies the Superintendent/President assures that statutes and regulations are implemented appropriately. Through regular review and revision of administrative procedures the Superintendent/President assures that institutional practices are consistent with mission and policies. (IV.B.2.c)

The Superintendent/President utilizes policies, procedures, and the governance structure to develop the budget and to effectively control the budget and expenditures. Financial stability has been established as a goal for the Governing Board and the institution. (IV.B.2.d)

Through regular meetings, presentations, communications, and publications, and with the assistance the Director of Marketing and the Director of Government Relations, the Superintendent/President effectively communicates with stakeholders, partners, supporters, and communities served by the College. (IV.B.2.e)

Conclusions

The Governing Board establishes policies that support the quality, integrity, and effectiveness of the College’s student learning programs and services. Through its policies the Governing Board assures the financial stability of the College. The Governing Board has demonstrated a commitment to professional development and assessing its own performance. The Superintendent/President has the authority, responsibility, and provides leadership for the overall quality of the College. Leadership for continuous improvement is demonstrated through planning, budgeting, selecting and developing personnel, and assessing institutional effectiveness.

The College meets the Standard.

Recommendations

None.