

FOLLOW-UP VISIT REPORT

**Antelope Valley College
3041 West Avenue K
Lancaster, CA 93536**

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

This report represents the findings of the External Evaluation Team that visited
Antelope Valley College on October 18, 2013.

Submitted by:

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DATE: October 25, 2013

TO: Accrediting Commission for Community and Junior Colleges

FROM: Randal Lawson, Team Chair

SUBJECT: Report of Follow-Up Visit Team to Antelope Valley College—October 18, 2013

Introduction:

A Comprehensive Evaluation team visit was conducted at Antelope Valley College in October 2010. At its meeting of January 11-13, 2011, the Accrediting Commission took action to reaffirm accreditation, with a requirement that the College submit a Follow-Up Report by October 15, 2012.

At its meeting of January 9-11, 2013, the Commission reviewed the Follow-Up Report submitted by Antelope Valley College and took action to require that the institution submit a Follow-Up Report in conjunction with the Midterm Report by October 15, 2013 to be followed by a visit by Commission representatives.

The visiting team, Randal Lawson and Dr. Gary Williams, conducted the site visit to Antelope Valley College on October 18, 2013. The purpose of the team visit was to verify that the Follow-Up Report prepared by the College demonstrated that the institution has addressed the specified recommendations, has resolved the deficiencies, and now meets Accreditation Standards. The team found that the College had prepared well for the visit by arranging for meetings with those faculty and staff members most involved in addressing the recommendations and by providing updated evidence the day of the visit. Over the course of the day, the team members met with fourteen individuals, including the Chair of the Board of Trustees, the Superintendent/President, the Vice President, Academic Affairs/Accreditation Liaison Officer, the Academic Senate President, and other faculty leaders and administrators. They also reviewed numerous documents.

The Follow-Up Report and Visit were expected to document resolution of the following recommendations:

Recommendation 1: In order to comply with the standards, it is recommended that the college modify its processes in a manner that creates documentation and other forms of evidence that can be used to reveal the college's progress toward implementation of SLOs and assessment of those outcomes. More specifically, the team recommends that to show compliance with the standards, that the college:

- a. Develop a method to monitor progress made when implementing activities identified in the program reviews to include listing steps in action plans, listing of individual student learning outcomes for each course and assessment activities matched against progress made to achieve assessment activities (I.B.3).
- b. Provide evidence in the form of documents or other deliverables to result from the operation of the integrated planning cycle (I.B.3)

- c. Provide evidence that outcomes demonstrate the integrated planning cycle, from SLOs to making budget decisions (I.B.5).
- d. Assess program learning outcomes (PLOs) and provide evidence of program, student service and administrative changes and improvements as a result of changes made (II.A.1.a; II.A.1.c).

Recommendation 2: To meet the standards and to raise the quality of instructional programs and to instill a culture of evidence across the college the team recommends the following practices be institutionalized:

- a. To meet the standards, it is recommended that the college establish clear connection with and document the involvement of members of professions, association and professional organizations when curriculum is being modified and at other appropriate points in time to demonstrate input from vocational/occupational advisory boards and experts in the field so that the College can verify the quality of educational programs is based on experts in the profession (II.A.2.b).
- b. To ensure each department is being consistently evaluated under the program review process it is recommended that the college develop a list of minimum areas considered to ensure a rigorous self examination is conducted consistently across the college (II.C.1).
- c. To meet the standards requirement that adequate resources be allocated to support the Library function of the college, it is recommended that the college conduct a comparative analysis against other similarly-sized colleges to assess whether the amount of resources to meet the needs of students who rely on the Library to complete their educational goals (I.B.7).
- d. To meet the standards and to enhance the effectiveness of its technology, it is recommended that the college adjust its technology advisory committee structure to ensure that the needs of administrative and instructional computing are equally well addressed, and that this dialogue then results in equitable priorities, implementation, and budget allocations for all technology needs (III.C.1 and III.C.1.d).

Recommendation 4: To comply with the standards it is recommended that the college, when making its short-range financial plan, e.g. the annual budget of the college, consider its long-range financial obligation to pay the cost of the GASB 45 – Other Post-Employment Benefits (OPEB) as the costs are incurred instead of delaying payment to some future date. Specifically, the college is encouraged to prepare a comprehensive plan to prevent disruption of services offered to students by paying the Annual Required Contribution (ARC) determined using generally accepted accounting principles into an irrevocable trust fund at the amount equal to the actuarially determined Annual required Contribution (III.D.1.c).

College Responses to the 2010 External Evaluation Team Recommendations

Recommendation 1: In order to comply with the standards, it is recommended that the college modify its processes in a manner that creates documentation and other forms of evidence that can be used to reveal the college's progress toward implementation of SLOs and assessment of those outcomes. More specifically, the team recommends that to show compliance with the standards, that the college:

- a. **Develop a method to monitor progress made when implementing activities identified in the program reviews to include listing steps in action plans, listing of individual student learning outcomes for each course and assessment activities matched against progress made to achieve assessment activities (I.B.3).**

Findings and Evidence: The College has made significant and sustained efforts to address the broad participation of all programs and units of the College in the assessment of learning outcomes and the documenting of course-level outcomes and evidence resulting from assessment activities. The College has also formalized its integrated planning and budgeting cycle to ensure that assessment results inform the creation of action plans that form the core of the resource allocation process. WEAVEonline is the institution-wide repository for the documentation of outcomes, assessment plans, evidence, discussion of assessment results, and the identification of action plans. The College has continued to refine the program review process to ensure that student learning drives institutional planning. The team was able to verify evidence that all program units are participating in the annual integrated program review and planning cycle, documenting all steps, and tying all steps to the educational mission of the College.

Conclusion: Through interviews with key faculty and staff and review of evidence in institutional documents and in WEAVEonline, the team determined that the College has satisfied this recommendation and now meets Standard I.B.3.

- b. **Provide evidence in the form of documents or other deliverables to result from the operation of the integrated planning cycle (I.B.3)**

Findings and Evidence: The College has developed a sound and ongoing program review process that operates on a four-year cycle, with annual update reports required in the intervening years. The process has been refined to include questions that address integrating the results of outcomes assessment efforts with the identification of resource needs, the development of action plans, and the budget allocation process. All program units are required to document all steps of their assessment, planning, and program review activities, including the identification of action plans, in WEAVEonline. The College has also maintained its three-year cycle for revision of the *Education Master Plan*. The 2013 plan was approved by the Board of Trustees in September 2013.

Conclusion: The College has implemented a stable, sustainable integrated planning cycle that includes a data-driven program review process and annual planning cycle. That planning process features consistent reports and documents that clearly articulate program characteristics,

achievements, and needs. The College has satisfied this recommendation and now meets Standard I.B.3.

- c. Provide evidence that outcomes demonstrate the integrated planning cycle, from SLOs to making budget decisions (I.B.5).**

Findings and Evidence: As detailed above, the College has established clear links among the identification and assessment of learning outcomes, the identification of resource needs through the program review process, and the budget allocation cycle. Members of each program unit participate in the cycle, and the College has created a transparent participatory governance process that provides opportunities for input at each stage.

Conclusion: The College has satisfied this recommendation and now meets Standard I.B.5.

- d. Assess program learning outcomes (PLOs) and provide evidence of program, student service and administrative changes and improvements as a result of changes made (II.A.1.a; II.A.1.c).**

Findings and Evidence: To date, all but two programs have assessed Program Learning outcomes, and the College has introduced an approach for mapping the individual course Student Learning Outcomes to the Program Learning Outcomes. Through review of the Follow-Up Report and interviews, the team observed numerous examples of assessment-driven changes and improvements across instruction, student services, and administrative areas.

Conclusion: The College has satisfied this recommendation and now meets Standards II.A.1.a and II.A.1.c.

Recommendation 2: To meet the standards and to raise the quality of instructional programs and to instill a culture of evidence across the college the team recommends the following practices be institutionalized:

- a. To meet the standards, it is recommended that the college establish clear connection with and document the involvement of members of professions, association and professional organizations when curriculum is being modified and at other appropriate points in time to demonstrate input from vocational/occupational advisory boards and experts in the field so that the College can verify the quality of educational programs is based on experts in the profession (II.A.2.b).**

Findings and Evidence: Of the 35 career technical education programs at Antelope Valley College, 30 held advisory committee meetings during 2011-2012, and 32 held advisory committee meetings during 2012-2013. All of the advisory committees include business and industry professionals as well as faculty members, and all meetings included collaboration on curriculum revisions and updates and discussion of student assessment and industry needs. This is documented in the advisory committee meeting minutes, which are now kept on file in the office of the Vice President, Academic Affairs. In 2011, the College developed a standardized template for advisory committee meeting agendas and minutes to document the recommendation that all such meet-

ings include discussion of program outcomes, collaboration on curriculum updates, and an open forum to discuss information provided by industry and professional organization representatives.

Conclusion: The College has satisfied this recommendation and now meets Standard II.A.2.b.

- b. To ensure each department is being consistently evaluated under the program review process it is recommended that the college develop a list of minimum areas considered to ensure a rigorous self examination is conducted consistently across the college (II.C.1).**

Findings and Evidence: In spring 2012, the College developed a list of minimum areas required for program review. This list was used as the basis for developing two new program review templates (one for comprehensive reviews required every four years and one for annual updates) which have been used since fall 2012. These templates feature questions dealing with five-year headcount enrollment trends, outcome assessment results, FTES trends (for instructional programs), student achievement data (including student success, persistence, and retention for instructional programs), and analysis of changes in student achievement and achievement gaps (for instructional programs). The College currently enjoys 100% compliance with the Program Review Schedule, meaning that approximately 25% of college programs submitted comprehensive reports in fall 2012, and the remaining 75% of programs submitted annual update reports (which are produced online through the WEAVEonline software that is used to document outcomes assessment.) These new report templates are producing a wealth of planning information, and the College should consider having the Program Review Committee prepare an annual summary to facilitate communication with the Strategic Planning and Budget Council (SPBC), particularly regarding overarching trends and issues across multiple college programs.

Conclusion: The College has satisfied this recommendation and now meets Standard II.C.1.

- c. To meet the standards requirement that adequate resources be allocated to support the Library function of the college, it is recommended that the college conduct a comparative analysis against other similarly-sized colleges to assess whether the amount of resources to meet the needs of students who rely on the Library to complete their educational goals (I.B.7).**

Findings and Evidence: The College has completed the comparative study, which revealed that library staffing meets or exceeds the average and median levels of the comparison groups and that software spending exceeded the average and the median, but that electronic database and periodical database holdings and print and electronic book holdings fell significantly below the corresponding comparison group holdings. As a result, the College has taken steps to build its Library's collection of volumes, both printed and electronic, in the face of challenging fiscal times. In spring 2012, the College purchased through the Community College Library Consortium a number of databases, including EBSCO Discovery Service (EDS), which allows students to search all electronic resources through a single interface. The Library now provides access to 48 full text databases and 12,459 eBooks in addition to over 400,000 publications indexed through EDS. Recently purchased subscriptions to two EBSCO eBook databases have added approximately 160,000 eBooks to the collection.

Conclusion: The College has satisfied this recommendation and now meets Standard I.B.7.

- d. To meet the standards and to enhance the effectiveness of its technology, it is recommended that the college adjust its technology advisory committee structure to ensure that the needs of administrative and instructional computing are equally well addressed, and that this dialogue then results in equitable priorities, implementation, and budget allocations for all technology needs (III.C.1 and III.C.1.d).**

Findings and Evidence: While the College has made changes to the structure of the two main advisory committees (the Distance Education and Technology Committee and the Information Technology Committee) that govern technology on campus, it has encountered significant challenges in maintaining an adequate technology infrastructure that meets the daily as well as long-term needs of the students and the College as a whole. Through interviews, team members learned that the College has been operating without either a current technology plan to drive planning or a consistent budget allocation to build and maintain an adequate computing infrastructure. (The Follow-Up Report indicates that an *Information Technology Master Plan 2013-2017* to replace the document that “expired” in 2010 is currently in draft form.) This has eroded the institution’s ability to maintain computers and other technology. Much existing technology has become obsolete and costly to repair, and related technology infrastructure needs have gone unaddressed in the face of resource and funding shortages.

Conclusion: The structural changes in the advisory committees demonstrate progress, but the College still needs to complete development and allocate resources toward the implementation of a technology plan that addresses the current technology needs of the college community and establishes and maintains an infrastructure to allow for future growth and change. The College has not yet satisfied this recommendation and does not fully meet Standards III.C.1 and III.C.1.d.

Recommendation 4: To comply with the standards it is recommended that the college, when making its short-range financial plan, e.g. the annual budget of the college, consider its long-range financial obligation to pay the cost of the GASB 45 – Other Post-Employment Benefits (OPEB) as the costs are incurred instead of delaying payment to some future date. Specifically, the college is encouraged to prepare a comprehensive plan to prevent disruption of services offered to students by paying the Annual Required Contribution (ARC) determined using generally accepted accounting principles into an irrevocable trust fund at the amount equal to the actuarially determined Annual required Contribution (III.D.1.c).

Findings and Evidence: In response to this recommendation, the College developed a thoughtful four-phase process and has completed the first two phases. Actuarial studies were conducted in 2011 and 2013. The 2013 study estimates the Actuarial Accrued Liability (AAL) at \$8,143,893 and the Annual Required Contribution (ARC) at \$1,064,009. At the Board of Trustees meeting held just prior to the Follow-Up Visit, the Board approved the formation of a local Retirement Board of Authority (RBA) which will be tasked with developing, installing, and maintaining a Comprehensive Compliance Plan. This plan will establish levels of annual contri-

butions to an irrevocable trust needed for the College to first reach the Annual Required Contribution (ARC) level and eventually pay off the liability and will include a timeline for achieving both goals. The four-member Retirement Board of Authority will consist of the Chief Business Officer, the Director of Business Services, the Vice President of Human Resources, and an elected official.

The College developed a three-year budget projection for funds to be set aside (in a California Community College League Joint Powers Association trust) to begin the process of funding the ARC. For 2013-2014, \$387,113 has been paid into the JPA trust. Continued funding and allocation will be the responsibility of the RBA.

Conclusion: The College has responded substantively to this recommendation, is demonstrating commitment to fund its OPEB liability, and is making meaningful progress toward full compliance with Standard III.D.1.c.