

# ACCJC Follow-up Team Report

**Southwestern Community College District  
900 Otay Lakes Road  
Chula Vista, Ca 91910**

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

**This report represents the findings of the evaluation team that visited  
Southwestern College on April 11, 2011**

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## **Introduction and Overview**

A peer evaluation team representing ACCJC conducted a comprehensive visit for reaccreditation of Southwestern College in October 2009. At its meeting in January 2010, the Commission acted to place Southwestern College on Probation. The Commission divided the recommendations into those which the college should address promptly and required a Follow-up Report from the college in October 2010 followed by a team visit, and those needing more time for implementation with a requirement of a report due March 2011, also to be followed by a visit. This report focuses on the recommendations dealt with in the college's March 2011 report.

The evaluation team found that the college had prepared well for the visit, both in writing a report with complete accompanying documentation, and in scheduling meetings between team members and individuals and groups from the college as requested. The team noted that the college had continued its collegial approach to preparing its response with involvement of a work group for each of the Commission's recommendations. The evaluation team met with representatives from each recommendation work group, the Interim Superintendent/President, the Vice Presidents, the Academic Senate President, the union presidents, the ALO, the Trustees, and several other faculty members, staff members, and administrators.

In order to address the Commission's recommendations, the college engaged in several types of training. To address Recommendation 8(b), the Board of Trustees, College constituency leaders, and committee members received training on participatory decision making from the Statewide Academic Senate President and the President of a well-known organization that is engaged in trustee training. The Board scheduled two training sessions to address Recommendation 9, one with the ACCJC President. The two new trustees participated in two new trustee orientation sessions, and the Interim Superintendent/President conducted a study session for the whole board in February. In addition, the college hired an experienced and well-qualified accreditation consultant to assist in interpreting the recommendations and assuring the college resolves issues in a timely fashion.

The team was encouraged by the significant progress the college has made on the Commission's recommendations.

## **College Responses to Team Recommendations from the March 2011 Follow-up Report:**

**1. As previously identified in the 2003 ACCJC WASC Accreditation Report, the team recommends that the college systematically and regularly evaluate and update the mission statement; assure that it defines the college educational purposes, its intended student population, and its commitment to student learning; and use it to guide institutional decisions and improvement goals. (Standards I.A.3, I.B.2, and II.A.1)**

The confirmation that the college understood integrated planning was its decision to meld the separate task groups working on Recommendations #1, 2, and 3—addressing the areas of college mission, planning processes, budget, program review, and student learning outcomes—into an integrated team. Work group #1 had previously addressed the review of the mission statement. Extensive dialogue among numerous constituent groups had produced a revised mission statement that defined the college’s educational purpose, its intended student population, and its commitment to student learning. Processes were also established for regular evaluation and updates to the mission statement. However, acknowledging that the mission was the focus around which all planning decisions revolve, it was clear to the college that Recommendations #2 and #3 could not be resolved without consistently addressing the mission statement. So the work group responsible for Recommendation #1 joined with work groups #2 and #3, noting that Recommendation #1 could only be resolved if it, indeed, guided the resolution of Recommendations #2 and #3.

The college has reviewed mission statements of several community colleges and has revised District Policy 1200: Mission and Values. The revision process included extensive vetting of proposals among multiple constituent groups. The college has committed to annual review of the mission statement by the Shared Consultation Council (SCC) at the August retreats. The mission statement is clearly and widely regarded by the college community as the “common interest” that binds the college together and gives it direction for all its planning.

### **Conclusion:**

Recommendation 1 has been resolved.

**2. As previously identified in the 2003 ACCJC WASC Accreditation Report, the team recommends that the college establish and implement a collegial and comprehensive planning process that assures improvement in student learning. Such a process integrates the various college plans; is informed by quantitative and qualitative data and analysis; systematically assesses outcomes within both instruction and noninstructional services; and provides for an ongoing and systematic cycle of goal setting, resource allocation, implementation, and evaluation. (Eligibility Requirement 19, Standards I.B.2, I.B.3, I.B.4, I.B.7, III.A.6, III.B.2.a, and III.B.2.b)**

To quote an especially enthusiastic faculty member, Southwestern College saw the box top and how all the pieces fit together and finally “got it” regarding an integrated planning process. The college’s planning cycle, known as P.I.E.—planning, implementation, evaluation—has not only infused order into planning but has generated an unexpected excitement for planning, as well. One member of the task group remarked that the college had spent so much time on the “P,” it was now easy to do the “I.” All of the pieces of an integrated planning cycle—revised mission statement, program review, data collection and analysis, dialogue, integration with budget and with other plans, and assessment—are in place and are functioning. Granted, the pieces have not been in place and functioning for long, so the full planning cycle has not been completed. But the planning infrastructure is in place and is driven by the college mission. Additionally there is a pervasive attitude among staff that planning is important, and there is a commitment to maintaining and improving the process. As part of the process, an annual assessment of the planning processes is scheduled, slated to have begun in April 2011. Program review is understood to establish institutional priorities and to drive the resource allocation process. Contrary to how budgets were developed eighteen months ago, work group members report that they now cannot fathom separating planning and the budget development; this is now a singular process in their minds.

Getting to this point did require substantial commitment on the part of the entire college, commitment that was freely given once the college culture had become more open and collegial. Standing committees that had met monthly began to meet weekly; one work group met five hours a day, every day, for weeks to completely revamp its planning process. Although it may appear that the college had waited until the last minute and then had scrambled to meet ACCJC deadlines, in this case appearances are deceiving. This is more clearly a case of a college with a newly-found understanding of planning, an excitement over the discovery, a formerly-unavailable freedom to openly dialogue with senior administration about the direction of the college, and an ethical commitment to do planning right rather than submit to ACCJC a half-hearted plan that was in place but not done well.

With regard to Recommendation #2, all the puzzle pieces are in place. Conceptually, the college “gets it.” The commitment to integrated planning is everywhere evident; all that is missing is time—time to complete the full cycle and sustain an on-going, integrated planning process.

#### **Conclusion:**

Absent only the time to have closed the loop on the cycle, Recommendation 2 is partially resolved and is well on its way to full resolution.

**3. The team recommends that the college improve program review across all areas; integrate it with student learning outcomes; and ensure that it is evidence based and is occurring at regular intervals sufficient to provide a foundation for college planning and**

**allocation of human, physical, technological, and fiscal resources. At issue since 1996, the team recommends that the college implement its policy on program discontinuance. (Eligibility Requirement 19, Standards I.A.4, I.B.1, I.B.5, I.B.6, II.A, II.A.1.a, II.A.1.c, II.A.2.e, II.A.2.f, II.B.4, II.C, II.C.1.a, and III.B.2)**

Within its newly-developed strategic planning cycle, the college also redesigned its institutional program review process. With oversight by the Institutional Program Review Committee, the new process combines comprehensive review on multi-year cycles (three-year cycles for academic programs, six-year cycles for student services and administrative units, two-year cycles for Career and Technical Education programs) and annual program review updates (“snapshots”). The college has committed a full time faculty member with 100% reassigned time to lead the institutional program review, and that faculty member reports directly to the Superintendent/President.

At the time of the follow-up visit, every program and service area had completed at least a snapshot report. Academic programs and student services had been involved in program review for years past, but for some reason the administrative units of Business, Finance, and Human Resources had not done program reviews. One explanation was that since administrative areas that reported directly to prior presidents had not been obligated to be involved in program review, and other administrative areas considered themselves exempt, as well. That notion has since been dispelled; however, due to administrative changes over these units, it was not deemed possible for these groups to do a comprehensive program review with the necessary integrity in time for the scheduled follow-up visit. Each of the groups did complete a snapshot report and is now on schedule for a comprehensive review. What is particularly significant is not that the groups got something done, but that the college culture allows them to admit that the reviews are not complete because they require integrity in the process with appropriate training, complete data collection and analysis, dialogue, and a product that will be useable and will persist after the visit has concluded.

With the delinquency of some of the administrative units to get on board with program review, there has not been enough time to complete comprehensive reviews for all programs and services. However, the change in culture at the college is palpable, particularly regarding program review. Recalcitrant faculty who refused to do program reviews in the past—citing that their efforts were no more than busywork and never used in planning or resource allocation—have now completed program review. Their reason: given the new collegial, integrated planning processes and the trust in administrators, they now feel that program review will actually have credibility and impact the decision-making process. Noting these kinds of examples, it is evident that the program review process has become integrated into the college and its planning, is a basis for program improvement and resource allocation, is evidence-based, and will be sustainable.

**Conclusion:**

Given the critical role the research office plays in providing data for institutional planning and evidence-based decision making, the college is urged to follow through with its staffing plans in this area.

Because all units have not yet completed the program review cycle, Recommendation 3 is partially resolved.

**4. The team recommends that the college identify SLOs for all of its courses, academic programs, learning and support services, and identify administrative unit outcomes for noninstructional areas. It is further recommended that the college use data and analysis to assess student achievement of those outcomes and use assessment results to make improvements. (Standards II.A, II.A.2.e, and II.A.2.f)**

Student learning outcomes (SLOs) are fully defined at both the course and program levels in accord with “developmental” status as defined by the accreditation rubric. When the college was responding to the recommendation, it was discovered that not all of the program SLOs were complete, and the deadline for submitting the report was fast approaching. Once again the college rallied, not just to complete a task by the deadline, but to ensure that the deficiency could be addressed with integrity and in a way that would be useable in the assessment and on-going planning cycles.

A fulltime SLO coordinator, reporting directly to the Superintendent/President, oversees the SLO development and assessment process for academic and student services SLOs, and the Director of Research, Planning, and Grants gives direction to the administrative units and their administrative unit outcomes (AUOs). The college has also invested in technology to facilitate the creation and assessment of SLOs and AUOs. The office of Research, Planning, and Grants collects and maintains necessary data on student learning and student achievement to support the SLO assessment. Strategies for authentic assessment of SLOs have been established and many are operational. The college acknowledges that the full cycle of assessments has not been completed for all areas; however, the college has publicly committed to completing the SLO assessment cycle by 2012, as required by the Commission. The college has begun to move into the “proficiency” level of implementation and has begun using the initial results of available assessments in course and program improvement, in allocating resources, and in provoking institution-wide dialogue.

As with the other pieces of the integrated planning puzzle, SLOs have become an integral part of the college culture. The infrastructure is in place, dialogue is robust and inclusive, and the commitment to sustainability is evident. What is again lacking is the time necessary to demonstrate a fully functioning, on-going cycle.

**Conclusion:**

Recommendation 4 is partially resolved.

**Recommendation 5:**

**The team recommends that, in order to comply with the Commission’s policies on distance learning and substantive change, the college submit a substantive change report for those programs that currently offer more than 50 percent of a program through distance education (Eligibility Requirement 21).**

The College submitted a Substantive Change report to the Commission. At its June 2010 meeting, the Commission acted to accept the report, thus extending the College’s accreditation to the online program.

**Conclusion**

Recommendation 5 has been resolved.

**Recommendation 6:**

**As previously identified in the 1996 and 2003 ACCJC WASC Accreditation Reports, the team recommends that the college implement a Technology Plan that is integrated with the Strategic Plan and college goals; relies on Program Review; and provides reliable budgetary process for renewing technology and for providing appropriate technology staffing, support, and training college wide (II.C.1.a, III.C.1.a, and II.C.1.c).**

Of all the Herculean efforts the college has put forth to meet recommendations with integrity, the college’s response to Recommendation #6 is particularly noteworthy. At the time of the comprehensive visit in October 2009, technology and technology support were deficient, and the apparent solution by the college at the last minute was to just spend more money. Consultants were hired to construct a plan, and there was a warehouse full of hardware that had been purchased with insufficient dialogue with end-users. As this follow-up visit approached, the college decided that, rather than put forth a unilaterally created plan, a new technology plan should be created. This plan would have input from all constituent groups and would address the technology needs of the college as revealed in program review. This work commenced just four weeks before the follow-up report was due and was made possible by the resignation of a senior administrator who had been instrumental in, and defended, the previous technology plan. There was precious little time to do the work, but it was important to the college to have a collaboratively created plan, aligned with the newly-approved mission statement, and addressing strategic priorities. The process reached out to students for their input, as well, and students responded. The college chose the option of this intense workload in order to have a plan that belonged to the college community rather than a plan that was foisted upon them. To do this, the

work group agreed to meet from 1:00 p. m. to 6:00 p. m. every day until the plan was approved. In this process the college was reminded of a truth that had been lost to them during the times when the college culture was characterized by fear and intimidation: "...given the proper leadership and organizational structures, SWC has all the skills, intelligence and passion it needs to do the one overarching task we are here to accomplish, to serve students."

In the process, technology services at the college were renamed and reorganized. The technology plan was completed; technology deficiencies in hardware, software, and service were remedied, consistent with needs identified in program review; and the rift between the technology department and constituent groups was resolved. Technology planning is now carried out in a manner that is consultative and inclusive, and it is integrated within the college-wide planning process.

### **Conclusion**

Recommendation 6 has been resolved.

### **7. The team recommends that the college plan and conduct professional development activities to meet the needs of its personnel and implement a formal evaluation process of the activities. (Standards III.A.5, III.A.5.a, III.A.5.b)**

Significant progress has been made by the college for staff development in response to Recommendation #7. A full time staff development coordinator was hired in 2009; a needs assessment was conducted of all constituent groups; an infrastructure for supporting and assessing staff development activities was created; staff development was integrated into both program review and the planning processes; and previously-absent resources were allocated for staff development. College personnel report that the college put money into staff development because now there is data to substantiate the need; and they report that staff development now is "very well supported" financially. Many staff development activities and opportunities for staff, faculty, and administration are offered, and each event is assessed to determine its efficacy in meeting the expressed needs of the staff. However, a summative assessment of the staff development program has yet to occur. This assessment is scheduled prior to the June 2011 extension date the college was given to meet this recommendation, at which time the college expects there will be full resolution of Recommendation #7.

### **Conclusion:**

Until that assessment can occur and the results of the assessment can be analyzed and looped back into the planning process, Recommendation 7 is partially resolved.

### **8. The team recommends that the college set as a priority fostering an environment of trust and respect for all employees and students that allows the college community to promote administrative stability and to work together for the good of the college. The team further**



**recommends that the college establish and follow a written process and structure providing faculty, staff, administrators, and students a substantial voice in decision-making processes. (Standards IV.A, IV.B.2.b, and III.A.4.c)**

Prior to this visit, the college made progress in addressing this recommendation in the form of Governing Board training sessions and the development of a governance policy and procedure. Work was underway on a Shared Planning and Decision Making Handbook. However, feelings between faculty and staff, the Superintendent/President, and some trustees remained acrimonious.

Since the team visit in November 2010, a number of significant changes have occurred. Two incumbent trustees were replaced by candidates who enjoy wide support by members of the college community. Closely on the heels of the election, the Superintendent/President tendered his resignation. The Board appointed two sitting vice presidents to share the interim CEO responsibilities until an Interim Superintendent/President could be hired. Through a collegial process, the Board selected an experienced former college president with a clear understanding of participatory governance and the board-district relationship. Just prior to the visit, the chief business officer resigned, and an experienced interim was appointed.

The college has come together to accomplish a great deal toward satisfying this recommendation in the few months since last visit. The venue of Board meetings was changed to accommodate a much larger number of participants, allowing all of those interested to attend. The order of the agenda was modified to move reports by constituency groups to the beginning of the meeting, thereby allowing their views to be heard ahead of Board action. A tentative agreement was reached between the union and the district in December. The Board withdrew the letters of reprimand from the personnel files of the professors suspended in October 2009 that had resulted from a demonstration, and previously dismissed staff were rehired.

The team was able to verify that the college has a strong sense of trust and respect previously lacking. Concrete examples include communications from the Superintendent/President to the college community, broad-based discussion prior to decisions, respectful treatment among all at Board meetings, and ready access to the Superintendent/President. Two surveys indicate marked improvement in morale.

Trustees also reported an improvement in morale. Several stated the college feels safe, has hope, is working together, and is ready to do more. It is important to note that individual trustees have demonstrated ability to work together despite earlier contention, and voting does not split along consistent lines.

The Interim Superintendent/President has had a significant role in establishing a collegial environment that can be sustained once a permanent CEO is hired. One individual described college processes as “deliberately inclusive” now. Nevertheless, the college is new, or “out of practice” at working collegially. This newness was apparent in interviews that understanding of the role of the Superintendent/President in decision making is uneven. For example, one statement made was that the college knows exactly who makes the decisions now, “the college community.” Some stated that the faculty senate reports directly to the Governing Board, going directly to the SCC and the Board with a resolution on all issues, even those not included among the academic items referred to in policy as 10+1. Several believe the Board makes all decisions and directs the Superintendent/President what to do. Another stated the SCC makes a recommendation, the president delivers it to the Board, and the Board makes the decision. Even the documentation (Procedure 2510) states that the Superintendent/President would have to write explanation to the SCC if she goes against its recommendation in an emergency. The example of an emergency offered was “a fiscal crisis, like now.”

On the other hand, when pressed about collegial governance, members of the college community were able to articulate the role of the president as it is explained in district policy, and several believed the portion of Procedure 2510 referred to above contained an error. The Superintendent/President is aware that the college is grappling with its new role and is still learning how it works, but she is striving for and expecting the college to have good habits in place when she leaves. At this point, some in the college community have made good progress toward participatory governance, but there are gaps in their understanding of what it means. Others exhibit a very clear understanding of the authority and accountability of the Superintendent/President and administration, the role of the various constituent group including faculty, and the policy-making role of the Governing Board.

### **Conclusion**

The college has made impressive progress in addressing issues of respect and trust, and morale has soared in a short time. There is considerable evidence that members of the college community have come together and taken great strides for the good of the college. The biggest concern of the team about this recommendation is nascent nature of the college understanding of its relationship with the Board. The first reaction of many seems to be “Yay! We are now in charge!” Upon reflection, they are able to articulate that the Superintendent/President is the designee of the Board and that direct communication between the Board and the college is limited—that the president has 51% of the vote, as she puts it. More time is needed for the college to become accustomed to how their governance structure is to work and to participate in it effectively.

Recommendation 8 has been partially met.

**Recommendation 9:**

**As previously identified in the 2003 ACCJC WASC Accreditation Report, the team recommends the Governing Board adhere to its role as a policy-making body and not interfere with the authority and responsibility of the Superintendent/President for college operations. The team further recommends that the Governing Board act as a whole once it reaches a decision and as an advocate for the college (IV.B.1.a and IV.B.1.j).**

In addition to five previous training sessions, the current Governing Board, including its two new members, has participated in two training sessions. The new Board members also attended a new trustee workshop held by a well-respected organization that regularly conducts such sessions. In conversations with each trustee, there seemed to be a clear understanding of the differences in the roles of the Superintendent/President and the Board. Specifically, all trustees were able to differentiate their role to set policy and the Superintendent/President's to determine how to implement policy. Although trustees seem to describe their role well, the team still heard reports that one trustee meets regularly with one of the faculty leaders. This action by itself is not necessarily a concern, especially since the relationship of these two individuals is described as a long-standing friendship. However, it could be viewed as a reason for others to go around the Superintendent/President directly to the Board. At a minimum, this action will not assist the college community in its growing understanding of the distinction of the roles of the Board and the Superintendent/President.

Several trustees expressed worry over the future stability of the college leadership, especially in light of interims in both the chief executive and business positions. The Interim Superintendent/President has also altered the reporting structure so that several key areas report directly to her. The team was convinced that the Interim Superintendent/President is laying a strong foundation for the permanent executive officer to build upon, but transitioning to a new leader will require time and thought in order to assure that he or she will have the necessary authority and support to make difficult future decisions. This issue is extremely important since in the past when the Governing Board did not feel the President was effective, they have, by their own admission, tended to interfere with the operation of the college.

The team found no evidence that the board has failed to act as a whole once it reaches a decision since its initial visit.

**Conclusion**

The Board, with the support of the Interim Superintendent/President, has made excellent progress in establishing itself in the policy-making role. As the college transitions to a new leader, the Board will need to adhere to this function and demonstrate their commitment to limiting their involvement in the college to the policy level.

Recommendation 9 has been resolved.

**Recommendation 10:**

**The Team recommends that the Governing Board establish and implement a formal procedure for handling potential conflict of interest and ethics policy violations and document adherence to the protocol. (IV.B.1.a and IV.B.1.j)**

In June 2010, the Governing Board approved a Conflict of Interest Procedure. Beginning with the March 2011 Board meeting, the Interim Superintendent/President has asked if any of the trustees need to recuse themselves from any item that might pose a conflict of interest. So far, one trustee has recused himself on an item involving the acceptance of a monetary donation made to the school newspaper.

In October 2010, the Board of Trustees approved a new Code of Ethics Procedure and Code of Ethics Policy. The Code of Ethics Policy includes specific language regarding conflict of interest and ethics, while the new procedure outlines the process for handling violations. The procedure is specific in the actions required to investigate and respond to violations. A revised Ethics Policy and Procedures is due for approval in May 2011. All but one trustee has signed the Code of Ethics form, and the remaining trustee has committed verbally to adhere to it. The college report states that the Board is committed to establishing an annual training calendar and retreat, and one is planned to occur each March. At that time, the Board will perform a self-evaluation and set annual goals.

**Conclusion**

It appears that all of the elements required by Recommendation 10 are in place, and that the conflict of interest policy has been re-established. The Ethics Policy and associated training has occurred, at least for the new trustees, and the Board has committed to following it. Full implementation and assessment are planned to occur through the coming year, including annual training for the whole Board, self evaluation, and goal setting.

Recommendation 10 has been satisfied.