SOUTHWESTERN COLLEGE

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This report represents the findings of the evaluation team that visited Southwestern College on March 20 – March 21, 2017

Submitted to:

The Accrediting Commission for Community and Junior Colleges

Submitted by:

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Team Chair

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30 March 2017

TO: **Accrediting Commission for Community and Junior Colleges**

FROM: **Jowel C. Laguerre, Ph.D., Team Chair**

SUBJECT: **Report of Follow-Up Visit Team to Southwestern Community and**

Southwestern Community College, March 20 and March 21, 2017

Introduction:
A team of seven individuals representing a diverse and broad spectrum of the community colleges visited Southwestern College (SWC) on March 20 and March 21, 2017 to conduct a site visit and to verify the accuracy of SWC's Follow-Up Report. All but one member of the team was on the original team that visited Southwestern College in October 2015. To that end, the team held several meetings, including an initial preparatory meeting, and closely examined evidence in support of the College's Follow-Up Report.

On March 20 and March 21, the team interviewed over thirty individuals representing faculty, students, classified staff, and administrators. Special attention was paid to faculty and staff leaders. The President and Vice President of the SWC Governing Board were also interviewed.

Throughout the two-day site visit, the team sought to validate, through a continued examination of evidence and through interviews and on-site evaluations, the Follow-Up Report provided by Southwestern College. College personnel were hospitable and responsive to the team's requests. Individuals appeared to answer questions genuinely and truthfully, realizing where the College was, where it is now, and where it wants to be.

In the SWC Follow-Up Report, the analyses of the various Recommendations were well stated; throughout the document, the College asserted that all but one of the Recommendations was completely resolved, although the team found that some items are still in progress. Nevertheless, for the progress that remains to be done, the team was satisfied that the College addressed the Recommendations, resolved deficiencies, and was up to the task of maintaining the Commission's Standards. Sustaining the efforts already made was a topic that the team discussed extensively, concluding with the finding that

Southwestern College generally is on track. The team concluded that the College's plans and infrastructure are likely sustainable.

Since the 2015 comprehensive visit, the College has had three Presidents, including one interim. Despite the Presidential transitions, the College has kept up its progress in addressing the Recommendations and meeting the Commission's Standards. The ongoing self-evaluation and progress made to date is a testament to the women and men of Southwestern and their focus on student success. We congratulate them on their work.

The SWC Follow-Up Report and team site visit were expected to document resolution of the following Recommendations:

Recommendation One:

In order to meet the Standards, the team recommends that the College ensure there is only one mission statement and when the mission statement is published, the wording of the mission statement is presented consistently in all College documents, signage, posters, displays and publications, electronic and print, and that such wording matches exactly the wording approved by the Board of Trustees. (ER 2, 20; I.A.1, II.A.6.c; IVA).

Recommendation Two

In order to meet the Standard, the team recommends the College evaluate regular and effective student contact for Distance Education courses to determine compliance with the College Distance Education Handbook, stated learning outcomes, and whether achievement is comparable with students enrolled in face-to-face programs. (II.A.1)

Recommendation Three

In order to meet the Standard, the team recommends that the College implement and evaluate 508 accessibility compliance. (II.A.1)

Recommendation Four

In order to meet the Standard, the team recommends that the College evaluate and regularly review web-based applications and sites (beyond LMS), whether faculty or publisher provided, to validate student privacy and identity (at the individual level, not the course level). (II.A.7)

Recommendation Five (replaced with Commission Recommendation One: SEE BELOW*)
*Commission Recommendation One
In order the meet Standards, the Commission recommends that the College demonstrate widespread and consistent participation within the academic programs, which includes the Higher Education Centers, in course and program student learning outcomes assessment that results in program and institutional improvement. (II.A.1.c, II.A.2.e, and II.A.2.f)

Recommendation Six

In order to meet the Standard, the team recommends that the College ensures that faculty and others directly responsible for student progress toward achieving stated student learning outcomes have, as a component of their evaluation, how they use the results of the assessment of learning outcomes to improve teaching and learning. (III.A.1.c)

Recommendation Seven

In order to meet the Standard, the team recommends that the College evaluate all personnel systematically and at stated intervals. The team further recommends the creation of a mechanism to ensure compliance with stated evaluation guidelines. (III.A.1.b)

Recommendation Eight

In order to meet the Standards, the team recommends that the College evaluate the current model for total cost of ownership of physical, fiscal, and human resources, in order to provide a sustainable, safe, secure, and healthful learning and working environment. (IB; III.B.1, III.B.2.a, III.D.1.c)

Recommendation Nine

The team recommends that the collection, storage, and transportation of monetary resources be reviewed and shortcomings identified and ameliorated. (III.B.1.b)

Recommendation Ten

In order to meet the Standard, the institution should ensure that its Mission and goals are integrated with its financial and institutional planning by ensuring realistic resource availability. (III.D.1; III.D.1.a; III.D.1.b)

Recommendation Eleven

In order to meet the Standard, the institution needs to ensure that internal and external controls have a high degree of credibility and accuracy and reflect the appropriate use of financial resources. As part of credibility, financial information must be provided in a timely manner to the institutional community. As part of assessment and improvement, the institution should respond to the evaluation and effectiveness of internal controls and financial resources. (III.D.4; ER 18, ACCJC 2013 Special Report)

Recommendation Twelve

To meet this standard, as reported in the 2013 Special Report, the institution will review and make modifications to its memorandum of understanding between the institution and the foundation in conjunction with hiring appropriate staff to facilitate foundation activities. In addition, the institution shall ensure that the financial resources of auxiliary services, grants and fund raising efforts are used with integrity, shall maintain internal controls and will be evaluated for effectiveness.
(2013 Special Report; III.D.2; III.D.2.d; III.D.2.e)

Recommendation Thirteen

In order to meet the Standards [and Eligibility Requirements], the team recommends that the College create a budget that meets the short- and long-term liabilities, contingency plans, unforeseen occurrences and future obligations of the College while meeting the appropriate reserves set by board policy. In addition, the College shall implement, assess, and evaluate internal controls sufficient to mitigate risk and maintain the fiscal integrity and stability of the College. (ER 17; III.D.1.c, III.D.1.d, III.D.3.a, III.D.3.c, III.D.3.g, III.D.3.h, IV.B.1.c; Commission Policy on Institutional Compliance with Title IV)

Recommendation Fourteen

In order to meet the Standards, the team recommends that the Board and the CEO ensure the fiscal integrity of the College by establishing a balanced budget that includes a plan for effective enrollment management. (IV.B.1.c, IV.B.2.d)

Recommendation Fifteen

In order to meet the Standards, the team recommends that the Board develop and adopt all Board policies required by law, and that it fully implement the plan to review and update all Board policies on a regular cycle. The team further recommends that the Board avoid assigning itself authority over College operations. (IV.B.1.d, IV.B.2.c)

Team Analysis of College Responses to the 2015 Evaluation Team Recommendations

Recommendation One:

In order to meet the Standards, the team recommends that the College ensure there is only one mission statement and when the mission statement is published, the wording of the mission statement is presented consistently in all College documents, signage, posters, displays and publications, electronic and print, and that such wording matches exactly the wording approved by the Board of Trustees. (ER 2, 20; I.A.1, II.A.6.c; IVA).

Findings and Evidence
In assessing SWC's response to Recommendation One, visiting team members agreed that the College, by eliminating the abbreviated version of the Mission statement from all College publications and retaining the statement that had originally been approved by the Board of Trustees, has fully met the Recommendation.

Through an examination of the evidence and interviews with College personnel, the visiting team verified that the College now has in place a process to review the Mission statement annually and to reaffirm, or revise it as needed, every three years, coinciding with the review and update of the Strategic Plan. The process is defined in the 2016-2019 Strategic Plan and supporting documents, and in Southwestern Community College District Policy No. 1200, which states in part, "the Mission, Vision & Values shall be evaluated and revised on a cyclical basis to correspond with institutional strategic planning timelines." The team believes the process is clearly defined in published institutional documents and is sustainable.

The team notes that SWC, as a result of Recommendation One, and in an effort to standardize the quality and accuracy of college publications—specifically, institution-wide publications—developed the Document Review Checklist. The team finds that the Document Review Checklist, including training associated with its implementation, is a constructive innovation designed to maintain the quality and accuracy of major College publications. That the process is managed by a designated office, namely, the Communications, Community and Government Relations Department, ensures the sustainability of this process.

Conclusion
The Team finds that the College has satisfied Recommendation One and meets the Eligibility Requirements (2, 20) and Standards (I.A.1, II.A.6.c; IVA).

Recommendation Two

In order to meet the Standard, the team recommends the College evaluate regular and effective student contact for Distance Education courses to determine compliance with the College Distance Education Handbook, stated learning outcomes, and whether achievement is comparable with students enrolled in face-to-face programs. (II.A.1)

Findings and Evidence

The College has taken significant steps to ensure that there is regular and effective student contact for Distance Education courses. The DE taskforce and the College focused on meeting this Recommendation through curriculum changes, faculty training, and Distance Education faculty mentoring.

Board Policy and Academic Procedure 4115, Distance Education Regular Effective Contact, was adopted in October 2015. The AP defines distance education, course quality standards, and regular and effective contact. A Distance Education Handbook was approved by the Curriculum Committee in Spring 2017 and an addendum was added to curriculum approval in Spring 2017. Faculty who are proposing a new course or revising an existing one, have to address, in a separate form, how regular and effective communication will be provided for DE courses and ensure that the courses meet learning outcomes and DE standards. The DE Faculty Coordinator provides support to faculty to complete the addendum and assists in curriculum development.

In Spring 2016, the Distance Education Faculty Training (DEFT) certificate was created and starting in Fall 2017, the certificate (or equivalency) is required for all faculty teaching Distance Education courses. The visiting team interviewed the Dean of Instructional Support, DE Coordinator, and two DE Mentors, to learn more about the DEFT Certificate and it was evident that the certificate (5 week, 40 hours, on-line course) is rigorous and effective in ensuring that DE courses have effective and regular contacts with the students. A DE mentor program was developed in 2016 and currently there are 50 DE mentors who assist faculty with curriculum development for DE courses and completion of the DEFT certificate. The DE mentors are also assisting faculty to convert from Blackboard to Canvas and are using the opportunity to convert the courses also as a way to improve curriculum and contact for the DE courses.

The District has shown a commitment to meet this Recommendation with fund allocations through Program Review and negotiations. The District allocated 1 FTE to a DE Coordinator, supported professional development for faculty, and has provided a budget for software (i.e. Camtasia and VoiceThread) that assist faculty to have effective contacts with the students.

<u>Conclusion</u>

The Team finds that the College has satisfied Recommendation Two and meets Standard (II.A.1).

Recommendation Three

In order to meet the Standard, the team recommends that the College implement and evaluate 508 accessibility compliance. (II.A.1)

Findings and Evidence
In assessing SWC's response to Recommendation Three, the team agreed that the College has made significant progress toward 508 accessibility compliance as evidenced by the efforts of the Section 508 Workgroup, the Section 508 Website cleanup as noted in several Update announcements, the Agreement between the District and SCEA regarding DE faculty training, the 11-month 1.0 FTE DE Coordinator, the upcoming Technology Specialist for Accessibility and Compliance, and the significant number of faculty who completed DEFT in addition to those DEFT graduates who currently mentor DE faculty.

Overall, the College has demonstrated meaningful progress in addressing 508 accessibility compliance for SWC's website and for improving course content in the learning management systems.

Conclusion
The Team finds that College has satisfied Recommendation Three and meets Standard (II.A.1).

Recommendation Four

In order to meet the Standard, the team recommends that the College evaluate and regularly review web-based applications and sites (beyond LMS), whether faculty or publisher provided, to validate student privacy and identity (at the individual level, not the course level). (II.A.7)

Findings and Evidence
In assessing SWC's response to Recommendation 3, the team agreed that the College has made significant progress toward: 1) regular evaluation and review of 508 compliant web-based applications and sites beyond the LMS;
2) validation of individual student privacy and identity as evidenced by DEFT training; 3) review of Canvas by DSS; 4) review of course content imported into Canvas; 5) faculty evaluation metrics related to accessibility; 6) peer mentoring of course materials; 7) 508 Workgroup, Curriculum Committee and Academic Senate meetings presenting/discussing OER and 508 compliance accessibility, and, 8) publishers and training sessions offered in the DE Faculty Development Lab.

The College demonstrates an eager and consistent approach toward importing compliant materials into Canvas, encouraging ongoing work with accessible publishers' materials, and supporting faculty as they develop and adopt 508 compliant materials.

Conclusion
The Team finds that the College has satisfied Recommendation Four and meets Standard (II.A.7).

Recommendation Five (replaced with):
Commission Recommendation One

In order the meet the Standards, the Commission recommends that the College demonstrate widespread and consistent participation within the academic programs, which includes the Higher Education Centers, in course and program student learning outcomes assessment that results in program and institutional improvement. (II.A.1.c, II.A.2.e, and II.A.2.f)

Findings and Evidence
The College has implemented institution-wide activities on Opening Day, as well as other professional development activities, to promote institutional dialogue and to support Program improvement based on learning outcomes. Both Fall 2016 and Spring 2017 Opening Day activities dedicated several hours to focus on Program Review and learning outcomes. The various activities include faculty, staff, and administrators from the main campuses and the Higher Education Centers, Instruction Support Services, and Continuing Education. As part of the Opening Day activities, each unit documented discussions noting the SLOs or Administrative Unit Outcomes (AUOs), the accuracy of measurement, proficiency level achieved, conclusions made after data review, recommendations to help increase student learning based on outcomes, and resource requests to implement the identified action steps. Examples of improvements include curricular changes, support services, technology, and professional development. Units integrate the action steps, timeline and resources to implement the recommendations as part of the Program Review process.

The College has also prioritized discussions about improvement of student learning and program improvement. For all areas, the Program Review process now includes completion of the SLOs, Data and Evidence (ODE) Sheet to document the data reviewed, and the rationale for requests. The process requires users to cite evidence and data used, specifically requiring the use of assessment results.

The Student Outcomes and Assessment Review (SOAR) Committee, was responsible for discussing and analyzing Institutional SLOs and other institutional data captured in the Program Review and Snapshot. The Shared Consultation Council (SCC) committee culminates the institutional dialogue by prioritizing resource requests and planned action items for the improvement of teaching and student learning. Along with major institutional plans, these recommendations provide a basis for the overall prioritization of resources.

To date, approximately one-third of the units have completed Program Review under SWC's modified template that now requires the inclusion of assessment results for resource requests and narratives that address improvement of learning outcomes. The team encourages the College to complete its cycle of assessment and Program Review and to continue its assessment of the process, the resources, and staff needed to sustain their new practices.

<u>Conclusion</u>

The Team finds that the College has satisfied Commission Recommendation One and meets Standards (II.A.1.c, II.A.2.e, and II.A.2.f).

Recommendation Six

In order to meet the Standard, the team recommends that the College ensure that faculty and others directly responsible for student progress toward achieving stated student learning outcomes have, as a component of their evaluation, how they use the results of the assessment of learning outcomes to improve teaching and learning. (III.A.1.c)

Findings and Evidence
The District and the Full-Time SCEA successfully negotiated an MOU in April 2016 to incorporate SLOs in faculty performance evaluations. The MOU language also was included in part-time faculty evaluations. Visiting team members confirmed that full- and part-time faculty self-evaluation forms have been modified such that faculty are asked to acknowledge they assess SLOs and to identify the application of those assessments to improve teaching and learning. In addition, the team reviewed job announcements that included Student Learning Outcomes and assessment as part of the responsibilities of the job performance.

The Follow-Up Report stated that educational administrators were still in negotiations to incorporate Student Learning Outcomes in their evaluations and negotiations are expected to be completed in Spring 2017. In the meeting with the Vice President of Human Resources, Director of Human Resources, and the President of the Administrators' Union, the administrators stated that the District is still in negotiations over the language for the MOU and that negotiations are expected to be completed by May 2017.

Conclusion
The Team finds that the College has not satisfied Recommendation Six and has not met Standard (III.A.1.c). While the language has been incorporated into the performance evaluations of full-time and part-time faculty, educational administrators have not incorporated the assessment and application of SLOs into their performance evaluations.

Recommendation Seven

In order to meet the Standard, the team recommends that the College evaluate all personnel systematically and at stated intervals. The team further recommends the creation of a mechanism to ensure compliance with stated evaluation guidelines. (III.A.1.b)

Findings and Evidence
The College has taken significant steps to ensure that personnel are evaluated systematically and at stated intervals. An audit was done in October-November of 2015 to address the Recommendation and, at that time, it was clear that there were many inconsistencies due to a lack of a mechanism to complete the evaluations in a timely manner. Since then, the College, through the work of Human Resources, has provided ongoing communication within the past year, to all supervisors and personnel to complete all evaluations. Furthermore, Human Resources developed color-coded spreadsheets to bring to the attention of supervisors' evaluations that were past due and needed immediate attention.

The team visited with the Vice President of Human Resources, Director of Human Resources, two supervisors, and classified and faculty representatives to ensure that there is a commitment to satisfy this Recommendation. The team randomly selected 22 names of faculty, staff, and administrators to review their evaluations, and all but two evaluations were completed in the past 16 months. Two adjunct faculty had left the District in the past year and an evaluation was not available for either of them.

The College has worked very hard this past year to complete all evaluations and is in the process of implementing software to allow for a mechanism that will sustain compliance with timely evaluations. The Board approved the purchase of the NeoGov software in Spring 2016 and they are currently implementing the software with a live date of Fall 2017. The software will assist the College to provide an online performance review and tracking for an ongoing and sustainable evaluation process.

Conclusion
The Team finds that the College has satisfied Recommendation Seven and meets Standard (III.A.1.b).
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Recommendation Eight
In order to meet the Standards, the team recommends that the College evaluate the current model for total cost of ownership of physical, fiscal, and human resources, in order to provide a sustainable, safe, secure, and healthful learning and working environment. (IB; III.B.1, III.B.2.a, III.D.1.c)

Findings and Evidence
Through interviews with appropriate stakeholders and an examination of the evidence, the team found that the College has developed a Total Cost of Ownership calculation and internal processes that will contribute to the ongoing operations of the Institution. The review of preventative maintenance, work orders, Program Reviews, inventory, standards and workflow all lend themselves to positive outcomes and planning in regard to TCO calculations. Furthermore, the College has allocated the resources to facilitate the needs of the various departments for facility retrofits, new equipment, and personnel.

The processes noted above allow the College to provide sustainable practices that create a safe, secure, and healthful learning environment for programs, services and facilities to the College community. SWC has done a good job of understanding and applying the theory and practicum of Total Cost of Ownership for the foreseeable future of the Institution.

Conclusion
The Team finds that the College has satisfied Recommendation Eight and meets Standards (IB; III.B.1, III.B.2.a, III.D.1.c).

Recommendation Nine

The team recommends that the collection, storage, and transportation of monetary resources be reviewed and shortcomings identified and ameliorated. (III.B.1.b)

Findings and Evidence
The College commissioned a TAPS report from the risk manager, Kennan & Associates, and reviewed current procedures for cash handling. In discussions with the Director of Finance, Chief of Police, Higher Education Center at National City, and the Vice President of Business & Financial Affairs, it is clear that this process has improved. Campus police provide armed escorts, typically twice per day, for high cash volume collection points such as the Cafeteria, Time Out Café, and Tradewinds. Additional escorts are available as requested, such as for large events or requests for change from the Cashier's Office.

HEC cash transfer takes place via an armored car pickup. Students do not take part in escorting cash from any venue to the Cashier's Office. Escorted staff carry all cash from venues and from parking machines. If staff are unavailable, a police officer substitutes.

As part of this process of improvement, all HEC and College locations have locked, secured bags. Cameras have been installed for all vault rooms, all safes have been bolted down, and two employees carry out the duties to retrieve resources to mitigate security and risk related issues. The College Cashier's Office has been reorganized to limit access to outdoor and indoor areas and each Cashier station has a glass front.

Finally, the College is hiring an internal auditor as a permanent staff position to sustain these processes moving forward and has used a third party internal auditor prior to the hiring of the permanent classified position.

Conclusion
The Team finds that the College has satisfied Recommendation Nine and meets Standard (III.B.1.b).

Recommendation Ten

In order to meet the Standard, the institution should ensure that its Mission and goals are integrated with its financial and institutional planning by ensuring realistic resource availability. (III.D.1; III.D.1.a; III.D.1.b)

Findings and Evidence
In assessing SWC's response to Recommendation Ten, the team agreed that linking annual Program Reviews and resource allocation create sustainable planning within the Institution.

Members of the team met with appropriate stakeholders to discuss how integrated planning is viewed by department managers within the College. The Deans articulated that the process integrates well in their specific Program Reviews and Snapshot views, and that the process supports their ability to request resources for Programs. A summary paragraph of one Dean's statement:

> For Program Review, we start in Fall and prioritize in Spring. We begin at the faculty level where department chairs are responsible for writing program review and determining what fiscal resources, equipment, and FTEF are needed for the year. We also attend sessions across departments, led by the CIO, to assess and address any duplicated resource requests or gaps. If an emergency arises during the year, we work within our departments and prioritize resources we have as much as possible. After assessing departmental resources, we have the option to request emergency funds with the [President's] Cabinet.

Based on the evidence provided, the collegial environment prevalent in meetings, and the interviews conducted by two team members, it was determined that the College is meeting the current standard by linking resource availability to the Mission, Goals, and Planning of the College. Furthermore, the processes SWC has developed for integrated planning that link to the mission statement and the integration of college resource availability is sustainable and meets the Standards noted.

Conclusion
The Team finds that the College has satisfied Recommendation Ten and meets Standards (III.D.1; III.D.1.a; III.D.1.b).

Recommendation Eleven

In order to meet the Standard, the institution needs to ensure that internal and external controls have a high degree of credibility and accuracy and reflect the appropriate use of financial resources. As part of credibility, financial information must be provided in a timely manner to the institutional community. As part of assessment and improvement, the institution should respond to the evaluation and effectiveness of internal controls and financial resources. (III.D.4; ER 18, ACCJC 2013 Special Report)

Findings and Evidence
In assessing SWC's response to Recommendation Eleven, the team agreed that the College's internal and external controls provide a high degree of credibility for the College's financial resources. Two team members met with the Director of Finance, Acting Chief of Police, and the Vice President of Business & Financial Affairs. All evidence and interviews verify and confirm that internal and external controls have been met and reflect an appropriate use of financial resources. Evidence includes a third-party assessment by their risk management company and an internal control review by independent auditors.

At the time of the current site visit, the College budget is forecasted for future years, to include enrollment management and future liabilities for the College. Evidence documented a continual effort to inform the College community of the budget, financial resources and the state of the Institution and demonstrated by the forums held by the College Finance Office and several meetings with constituents provided in a "town hall" style format.

Based on evidence provided and interviews conducted, the team determined that the College is meeting the current standard to provide a high degree of credibility in its financial resources. The College meets all of its internal and external controls and its financial resources reflect a high level of credibility.

Conclusion
The Team finds that the College has satisfied Recommendation Eleven and meets Standards (III.D.4; ER 18, ACCJC 2013 Special Report).
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Recommendation Twelve

To meet this standard, as reported in the 2013 Special Report, the institution will review and make modifications to its memorandum of understanding between the institution and the foundation in conjunction with hiring appropriate staff to facilitate foundation activities. In addition, the institution shall ensure that the financial resources of auxiliary services, grants and fund raising efforts are used with integrity, shall maintain internal controls and will be evaluated for effectiveness. (2013 Special Report; III.D.2; III.D.2.d; III.D.2.e)

Findings and Evidence
In assessing SWC's response to Recommendation Twelve, the team agreed that the College has updated the Memorandum of Understanding (MOU) between the Foundation and the College. The College also hired three full time, permanent employees to monitor fiscal, legal, and compliance issues, as well as to provide activities for the services outlined in the MOU.

The team met with the Executive Director of the Foundation and agreed that the College and the Foundation have taken great steps in moving required activities forward by developing processes to ensure that the Foundation provides the resources and guidelines to support essential services for the students and College community at large. Evidence includes documentation needed to support ongoing improvement efforts of the Foundation as a formal auxiliary organization of the College.

Conclusion
The Team finds that the College has satisfied Recommendation Twelve and meets Standards (2013 Special Report; III.D.2; III.D.2.d; III.D.2.e).

Recommendation Thirteen

In order to meet the Standards [and Eligibility Requirements], the team recommends that the College create a budget that meets the short- and long-term liabilities, contingency plans, unforeseen occurrences and future obligations of the College while meeting the appropriate reserves set by board policy. In addition, the College shall implement, assess, and evaluate internal controls sufficient to mitigate risk and maintain the fiscal integrity and stability of the College. (ER 17; III.D.1.c, III.D.1.d, III.D.3.a, III.D.3.c, III.D.3.g, III.D.3.h, IV.B.1.c; Commission Policy on Institutional Compliance with Title IV)

Findings and Evidence

In assessing SWC's response to Recommendation Thirteen, visiting team members agreed that the College meets the requirement to create a budget that meets the short- and long- term needs of the College. Evidence supports that the College has controls in place that mitigate risks and maintain fiscal integrity for the financial viability of the College community.

The team met with the Vice President of Business & Financial Affairs and concluded that evidence provided in both documentation and personal interviews allows the College to meet its future obligations and to sustain its fiscal integrity. The budget has been vetted in Open Forums and Board of Trustee meetings. Future year forecasts allow the College community to plan and meet ongoing needs of Programs and Services provided by the College. In parallel, the college implemented, assessed and evaluated internal controls to create a sustainable culture in the District.

Conclusion

The Team finds that the College has satisfied Recommendation Thirteen and meets the Eligibility Requirement (17) and meets Standards III.D.1.c, III.D.1.d, III.D.3.a, III.D.3.c, III.D.3.g, III.D.3.h, IV.B.1.c; Commission Policy on Institutional Compliance with Title IV).
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Recommendation Fourteen

In order to meet the Standards, the team recommends that the Board and the CEO ensure the fiscal integrity of the College by establishing a balanced budget that includes a plan for effective enrollment management. (IV.B.1.c, IV.B.2.d)

Findings and Evidence
The team met with the Vice President of Business & Financial Affairs, Vice President of Student Affairs, and Vice President of Academic Affairs. Through these interviews, the team concluded that the evidence provided in both written documentation and personal interviews allows the College to meet the needs of Enrollment Management and to provide courses for current and future students.

Evidenced, is a 2-year projection in which Programs map out courses and the fiscal resources needed to identify and prioritize planning required to provide a sustainable schedule for students to meet their educational pathways and to support the College community at large. The College produces a five year fiscal projection based on conservative budget assumptions.

In assessing SWC's response to Recommendation Fourteen, the team agreed that the College has met its requirements to create a balanced budget process that meets its Enrollment Management projections.

Conclusion
The Team finds that the College has satisfied Recommendation Fourteen and meets Standards (IV.B.1.c, IV.B.2.d).
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<u>**Recommendation Fifteen**</u>

In order to meet the Standards, the team recommends that the Board develop and adopt all Board policies required by law, and that it fully implement the plan to review and update all Board policies on a regular cycle. The team further recommends that the Board avoid assigning itself authority over College operations. (IV.B.1.d, IV.B.2.c)

<u>**Findings and Evidence**</u>
The 2015 team was concerned with policies that the Board needed to develop and adopt, especially those that were required by law. The team was also concerned about the review and upkeep of the existing Board policies and concluded that the development of sound policies should allow the Board to play its rightful role as policy overseers and not as micromanagers. In response to Recommendation Fifteen, the College provided a thorough response and evidence of its work to address the concerns raised by the Fall 2015 Team.

The College has engaged in the development, revision and/or reaffirmation of legally required policies and procedures through the established collegial consultation process. Since the Accreditation Team's visit in October of 2015, the Human Resources Department has conducted an audit of SWC's policies and procedures. As part of the audit, HR identified legally required policies and procedures that were in need of development, revision, or reaffirmation. Consequently, a staff member was assigned to update and develop the necessary policies. The adoption of policies and procedures followed established collegial consultation processes as outlined in the Shared Consultation Council Operating Guidelines, including adoption by the Governing Board.

Since the 2015 visit, all legally required Governing Board policies and procedures have been satisfactorily developed, updated, or reaffirmed and a system is in place to keep the policies current. Though the system is now managed by one person, an automation of the system is being explored for the future. One major difference noted through interviews with College personnel is that each department used to hold its own policy process and thus, was a decentralized system and driven by individuals, as opposed to the new policy and procedure system which is centered on an institution-wide focus.

To more conveniently access policies and procedures, a Policy & Procedure Status Index is posted on the College District's SharePoint Portal and is maintained by the Human Resources Technician, the point person on policies. This Index outlines timelines for review, update, and/or reaffirmation of policies based on a six-year cycle of review, as well as the current status in the approval process (e.g., first/second reads, GB approval for policies). The Index is updated at least once monthly to reflect the current status of policies and procedures as they move through the Shared Consultation Council (SCC) for

review through Board approval. Members of the President's Cabinet are held accountable for the maintenance of the policies and procedures.

The Shared Planning and Decision Making (SPDM) Handbook describes the policy and procedure review cycle. The SWC Policy and Procedure Status Index provides the tracking mechanism for renewal of policies and procedures. Ensuring currency of all policies and procedures, the Human Resources Technician receives bi-annual updates from the Community College League of California (CCLC) regarding legally required revisions to policies and procedures. Finally, the Human Resources Technician disseminates this information to the appropriate Vice President responsible for the policies and procedures requiring revision. The key for consistency and regular updating of Board policy is the assignment of an individual who oversees the policies' process.

The Follow-Up Report states that the College has developed a plan to fully address and resolve Recommendation Fifteen, although some of the policies are still in the review process. Given the time that has elapsed since the last visit, it is understandable that not all policies and procedures have been approved and the team concluded that the College has made significant progress to address the Recommendation and should provide updates to the completion of the process to the Commission no later than the time of the submission of SWC's Mid Term Report.

Since the 2015 team visit, the Governing Board has taken several steps to align itself with expected Accreditation Standards. The Governing Board and Interim Superintendent/President reviewed and discussed accreditation standards related to Recommendation Fifteen at their annual Board Retreat on August 13, 2016. Specifically, at the Retreat, the Board engaged in a facilitated discussion by the Community College League of California (CCLC), focused on the Board and CEO roles and protocols, as well as governance; here, the Governing Board reaffirmed its role as a policy-making body. Additionally, each Trustee signed a Resolution reaffirming its role, thus acknowledging that their respective role does not include assigning itself authority over College Operations. Further, at the August 13, 2016 Governing Board meeting, the Governing Board approved a policy specifically detailing its duties making clear that the Board's intent to move in the right direction. Still, these are recent steps are fragile ones if the majority of the Board members does not hold itself accountable.

The Governing Board enjoys an optimism in the newly elected Board member, and there is the need to ensure that the new Board member is oriented well and develops the skills to assume an effective role as Trustee. The new Superintendent-President is an experienced CEO and has the skills to help the Board to assume its rightful role. A mutually supportive relationship between the Board and the SP will serve the College well.

Conclusion
The Team finds that the College has satisfied Recommendation Fifteen and meets Standards (IV.B.1.d, IV.B.2.c).

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