

**EVALUATION TEAM REPORT
FOR**

**Glendale Community College
1500 North Verdugo Road
Glendale, CA 91208**

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

**This report represents the findings of the evaluation team that visited
Glendale Community College
October 3-6, 2016**

**Gilbert H. Stork, Ed.D.
Chair**

NOTE: this page shall be added to the External Evaluation Team Report (Team Report), immediately behind the cover page, and shall become part of the final report associated with the review.

DATE: February 3, 2017

INSTITUTION: Glendale Community College
1500 North Verdugo Road
Glendale, CA 91208

SUBJECT: Commission Revisions to the Team Report

The Team Report provides details of the findings of the evaluation team that visited Glendale Community College October 3-6, 2016 with regard to the Eligibility Requirements, Accreditation Standards, and Commission policies, and should be read carefully and used to understand the team's findings. Upon a review of the Team Report sent to the College, the Glendale Community College Self-Evaluation Report, and supplemental information and evidence provided by the College, the following changes or corrections are noted for the Team Report:

1. The Commission has removed Recommendation 1 wherever it occurs in the Team Report.

List of Team Members

Dr. Gilbert H. Stork (Chair)
Superintendent/president
Cuesta College

Ms. Lisa Gray (Team Assistant)
Executive Assistant to the President
Cuesta College

Dr. Eva Bagg
Dean Institutional Effectiveness
& Student Success
Long Beach City College

Ms. Elizabeth Bowman
Library Director
Santa Barbara City College

Dr. Edward Bush
President
Cosumnes River College

Ms. Elena Cole
English Faculty
Las Positas College

Ms. Roberta Eisel
English Faculty
Citrus College

Dr. Claudia Habib
Vice President, Student Services
Reedley College

Ms. Deborah Kaye
English Faculty
& Professional Development Director
Los Angeles Valley College

Dr. Derek Lerch
Chief Instructional Officer
Feather River College

Mr. Brandon Shimokawa
Vice Chancellor, Administrative Services
Kauai Community College

Mr. Paul Wickline
Interim Dean, School of Social and
Behavioral Sciences
College of the Canyons

Summary of the External Evaluation Report

INSTITUTION: Glendale Community College

DATES OF VISIT: October 3 – October 6, 2016

TEAM CHAIR: Dr. Gilbert H. Stork

A twelve-member accreditation external evaluation team visited Glendale Community College (GCC) October 3-6, 2016 for the purpose of determining whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and United States Department of Education (USDE) regulations. The team evaluated the degree to which the College is achieving its stated purposes. In addition, the team provided recommendations for quality assurance and institutional improvement, and submitted recommendations to the Accrediting Commission for Community and Junior Colleges (ACCJC) regarding the accredited status of the College.

The preparation process for this visit began July 13, 2016 when the team chair attended a team chair training workshop also conducted a pre-visit to GCC on September 2, 2016. During this visit, the chair and his team assistant met with the College leadership and key personnel involved in the preparation of the Self-Evaluation Report as well as toured the main campus of GCC. In addition, the evaluation team received team training provided by ACCJC staff on August 30, 2016.

On Monday afternoon, October 3, 2016, team members visited the Verdugo campus of GCC and participated in a guided tour of the campus. On Tuesday morning, the team was hosted by the College and introduced to members of the GCC community during a reception held in the GCC Student Center.

During the evaluation visit, team members met with 23 various committees and constituent groups and conducted interviews with approximately 230 employees, students, and Trustees. In addition to the scheduled meetings and/or interviews, numerous less formal interactions with students and employees took place during the visit. Informal classroom visits, as well as visits to a variety of the open learning labs provided additional opportunities to interact with students and employees. Two open forums provided over 70 members of the GCC community opportunities to share their impressions of how GCC is meeting its mission.

The team reviewed pieces of evidence supporting the Self-Evaluation Report that were provided in electronic form as well as made available in the team room. The evidence was highly organized and clearly identified how the evidence supported the Accreditation Standards, Eligibility Requirements, Commission Policies, and USDE Regulations. Examples of evidence reviewed by the team included institutional master plans, technology plan, audit reports, program review procedures and sample reports, distance education course outlines, student learning outcomes assessments, college policies and administrative regulations, enrollment data, student demographic information, employee evaluation procedures and samples of completed evaluations, resource allocation reports, and the College governance structure. In addition, the

team reviewed agendas and minutes from meetings of the Board of Trustees, College governance committees, and student government meetings.

The team was extremely complimentary of the enthusiasm of the College faculty, staff, and students throughout the team visit. The manner in which GCC employees responded to team requests for additional interviews, pieces of evidence, or materials to support the team room was very professional and accommodating. The College responded in a timely manner to all requests made by the evaluation team.

The team found the College to be in compliance with the vast majority of the Accreditation Standards, Eligibility Requirements, Commission Policies, and USDE Regulations. The team found many effective practices and programs and identified a number of commendations to the College. In addition, the team identified several areas where the College met the Standard, but could increase its effectiveness. Recommendations for compliance and improvement were offered by the evaluation team.

Major Findings and Recommendations of the 2016 External Evaluation team

Team Commendations

During the visit the team recognized several aspects of the College worthy of commendations.

Commendation 1

The team commends the College for fostering a culture of inclusion and support for diverse student populations. There is demonstrated commitment to support student success through LGBTQ safe spaces, the Multicultural Center, the Veteran Resource Center, learning communities and for efforts to increase the number of diverse and multilingual faculty and staff.

Commendation 2

The team commends the College for demonstrating an innovative, detailed, effective, student-centered approach to facilities planning as reflected by the creation of multiple spaces that support student learning and engagement. (Plaza Vaquero, Cafes, Piano Barn, Learning Center, re-design of the Library, and multiple computer labs)

Commendation 3

The team commends the Garfield Campus for its devotion to adult learners and for developing partnerships with community organizations to leverage resources in support of student learning, student success and civic engagement.

Commendation 4

The team commends the College for the long tradition and commitment to participatory governance and for fostering an environment that values open dialogue and an inclusive environment for decision-making.

Commendation 5

The team commends the Associated Students of Glendale Community College for their knowledge of the College governance structure, active committee participation, financial investment in the College, and for valuing diverse student representation.

Commendation 6

The team commends the College for its recognition of technology needs, its development of its Technology Master Plan and its rapid, effective response to meet the technology resource requirements of the institution, especially its students.

Commendation 7

The team commends the College for its high regard for its adjunct faculty and for concerted inclusion of adjunct faculty in the life of the institution.

Team Recommendations

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

Recommendations to Meet the Standards

Recommendation 1

In order to meet the Standard and Eligibility Requirements, the team recommends that when the College establishes institution-set standards for student achievement, including job placement rates, it consistently publishes this information. The team further recommends that when the College identifies gaps between performance and institution-set standards appropriate to its mission, it implements strategies to mitigate those gaps and evaluate the efficacy of those strategies. (I.B.3, I.B.6, ER 11, ER 19)

Recommendations to Improve Quality

Recommendation 2

In order to increase effectiveness, the team recommends that the College revisits its institution-set standards on a regular basis to ensure they remain appropriate and useful for determining institutional effectiveness. (I.B.3, ER 11)

Recommendation 3

In order to increase effectiveness, the team recommends that the College collect and disaggregate student learning outcome data for subpopulations of students to determine performance gaps and implement strategies for allocating resources to address those gaps. (I.B.6).

Recommendation 4

In order to increase effectiveness, the team recommends that the College formalize and record its widespread, but often informal, efforts to assess student learning outcomes at the course, program, and institutional levels in order to improve student learning and support programs, to fine-tune processes, and to allocate resources as appropriate. (I.B.6, II.A.1, II.A.3, II.A.11).

Recommendation 5

In order to increase effectiveness, the team recommends that the College assess the effectiveness of its current decentralized approach to student support labs and tutorial coverage and utilize the results to implement change as appropriate. (II.B.2)

Recommendation 6

In order to increase effectiveness, the team recommends that the College provide access to online counseling for students and identify methods to reduce wait time for counseling appointments. (II.C.5)

Recommendation 7

In order to increase effectiveness, the team recommends that the College develop a method for identifying, completing, and tracking timely evaluations of adjunct faculty. (III.A.5)

Recommendation 8

In order to increase effectiveness, the team recommends that the College revise the evaluation

forms for faculty, counselors, and librarians to more clearly and effectively demonstrate that the results of the assessment of learning outcomes are used to improve teaching and learning.
(III.A.6)

Introduction

Glendale Community College (GCC) was established in 1927 as Glendale Junior College to serve the Glendale, La Crescenta, and Tujunga school districts. The original college was housed in a wing of Glendale Union High School. In 1929, the College moved to its first independent facilities on Harvard Street in Glendale. After the main building was damaged by the 1933 Long Beach earthquake, the College relocated into small buildings and tent structures. In 1935, 80 percent of the local electorate approved a \$195,000 bond issue for new college buildings. The current site of the Verdugo Campus was purchased with bond funds and the addition of a \$174,000 Public Works Administration grant. In 1937, the Glendale Junior College District was dissolved and the College became part of the Glendale Unified School District. In spring 1937, the new administration and science buildings were completed and occupied.

The College was renamed Glendale Community College in 1971. In 1980, voters approved the separation of the College from the school district, creating the Glendale Community College District. Since April 1983, the College has been governed by its own five-member Board of Trustees.

Construction and expansion continued in the 1980s and 1990s. A new facility was constructed at a site approximately three miles south of the main campus to house noncredit programs. This facility was initially named the Adult Community Training Center and is now named the Garfield Campus. An additional site, the Professional Development Center, which provides state-funded workforce training, moved into its headquarters in Montrose.

In March 2002, Glendale voters passed a \$98 million general obligation bond for improvements to the College's facilities and infrastructure. These funds have been used to complete a science center, a parking structure, a health sciences building, an expansion of the Garfield Campus, and an upgrade of the College's network infrastructure. Bond funds and state funds have also been used to construct the new Sierra Vista building, which includes student services departments, labs, classrooms, and offices.

Glendale Community College's accreditation was last reaffirmed in 2011.

Eligibility Requirements

1. Authority

The team confirmed that Glendale Community College is authorized to operate as a post-secondary, degree-granting institution based on continuous accreditation by the Accrediting Commission for Community and Junior Colleges (ACCJC) of the Western Association of Schools and Colleges (WASC). The ACCJC is a regional accrediting body recognized by the U.S. Department of Education and granted authority through the Higher Education Opportunity Act of 2008.

The College meets the ER.

2. Operational Status

The team confirmed that the College is operational and provides educational services to 21,904 students actively enrolled in credit courses. These enrollments include 19,217 students enrolled in degree-applicable credit courses, and 8,560 students enrolled in noncredit courses. In 2015-2016, the College awarded 765 associate degrees.

The College meets the ER.

3. Degrees

The team confirmed that the College offers 95 associate degrees, as defined by the 2015-2016 Catalog, all of which are two academic years in length. The College offered 4,505 sections of 797 degree-applicable courses in 2015-2016. The number of students enrolled in degree-applicable courses in 2015-2016 was 19,217, representing 88 percent of the entire credit student population.

The College meets the ER.

4. Chief Executive Officer

The team confirmed that the Governing Board employs a superintendent/president as the chief executive officer of the College. The superintendent/president does not serve as a member of the Board of Trustees nor as the Board president. The team further found that the superintendent/president's full-time responsibility is to the institution and possesses the requisite authority to administer board policies. Since the last full accreditation visit, there have been changes in personnel in the superintendent/president position, each of which were appropriately reported to the ACCJC.

The College meets the ER.

5. Financial Accountability

The team confirmed that the College engages a qualified audit firm to conduct audits of all financial records of the College including the General Fund, the College Foundation, and the Government Obligation(GO) bond funds. All audits are certified and all explanations or findings are documented appropriately. Audit reports are made publicly available. The team further confirmed that the College meets all Title IV eligibility requirements achieving a three-year

average default rate for 2010-2012 of 8.9 percent which was below the national three-year average of 11.8 percent. Default rates are well below the 30 percent federal requirement, as well as the 15.5 percent California requirement.

The College meets the ER.

Checklist for Evaluating Compliance with Federal Regulations and Related Commission Policies

Public Notification of an Evaluation Team Visit and Third Party Comment

Evaluation Items:

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| <input checked="" type="checkbox"/> | The institution has made an appropriate and timely effort to solicit third party comment in advance of a comprehensive evaluation visit. |
| <input type="checkbox"/> | The institution cooperates with the evaluation team in any necessary follow-up related to the third party comment. |
| <input checked="" type="checkbox"/> | The institution demonstrates compliance with the <i>Commission Policy on Rights and Responsibilities of the Commission and Member Institutions</i> as to third party comment. |

[Regulation citation: 602.23(b).]

Conclusion Check-Off (mark one):

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements. |

Narrative:

The College posted information on its college website beginning June 3, 2016. The invitation of third party comment stated that the College is undergoing accreditation review in fall 2016. Individuals wishing to make comments were directed to the Commission's third party comment form which is also posted as a link on the College website. The team found no third party comments related to the accreditation visit had been submitted before or since the completion of the Institutional Self-Evaluation Report.

Standards and Performance with Respect to Student Achievement

Evaluation Items:

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| <input checked="" type="checkbox"/> | The institution has defined elements of student achievement performance across the institution, and has identified the expected measure of performance within each defined element. Course completion is included as one of these elements of student achievement. Other elements of student achievement performance for measurement have been determined as appropriate to the institution's mission. |
| <input checked="" type="checkbox"/> | The institution has defined elements of student achievement performance within each instructional program, and has identified the expected measure of performance within each defined element. The defined elements include, but are not limited to, job placement rates for program completers, and for programs in fields where licensure is required, the licensure examination passage rates for program completers. |

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

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

Conclusion Check-Off (mark one):

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|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements. |

Narrative:

The College provided evidence that it established institution-set standards in 2014 and 2015 for course and program completion, job placement rates for instructional programs, and licensure passage rates for instructional programs. The College monitors student achievement measures regularly to determine changes and to make improvements. Results are widely communicated across the campus and to the public.

Credits, Program Length, and Tuition

Evaluation Items:

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

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

Conclusion Check-Off (mark one):

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|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements. |

Narrative:

Course credit is described on all course outlines of record and is approved by the College's curriculum committee. Credit is awarded consistent with expectations of the California Community College system and in line with the expectation of the Carnegie Unit. Students enrolled full-time can complete degree requirements within two years. Enrollment fees are the same for all courses and are set by the State of California.

Transfer Policies

Evaluation Items:

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| <input checked="" type="checkbox"/> | Transfer policies are appropriately disclosed to students and to the public. |
| <input checked="" type="checkbox"/> | Policies contain information about the criteria the institution uses to accept credits for transfer. |
| <input checked="" type="checkbox"/> | The institution complies with the Commission <i>Policy on Transfer of Credit</i> . |

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

Conclusion Check-Off (mark one):

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| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements. |

Narrative:

Transfer-of-credit policies are clearly published in the College's catalog. The College evaluates and accepts credit from other regionally accredited institutions through established procedures that involve curriculum experts and faculty leaders as appropriate. The transcript review process includes evaluation of the course description and/or syllabus from the originating institution.

Distance Education and Correspondence Education

Evaluation Items:

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| <input checked="" type="checkbox"/> | The institution has policies and procedures for defining and classifying a course as offered by distance education or correspondence education, in alignment with USDE definitions. |
| <input checked="" type="checkbox"/> | There is an accurate and consistent application of the policies and procedures for |

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| | determining if a course is offered by distance education (with regular and substantive interaction with the instructor, initiated by the instructor, and online activities are included as part of a student's grade) or correspondence education (online activities are primarily "paperwork related," including reading posted materials, posting homework and completing examinations, and interaction with the instructor is initiated by the student as needed). |
| <input checked="" type="checkbox"/> | The institution has appropriate means and consistently applies those means for verifying the identity of a student who participates in a distance education or correspondence education course or program, and for ensuring that student information is protected. |
| <input checked="" type="checkbox"/> | The technology infrastructure is sufficient to maintain and sustain the distance education and correspondence education offerings. |
| <input checked="" type="checkbox"/> | The institution demonstrates compliance with the <i>Commission Policy on Distance Education and Correspondence Education</i> . |

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

Conclusion Check-Off (mark one):

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|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements. |

Narrative:

The College has a small distance education program that is guided by the work of Academic Senate committees (Committee on Distance Education and the Curriculum and Instruction Committee). These committees have established clear expectations and policies around DE course content and teacher training, included guidance on how to establish regular and effective contact in an online environment, and how to authenticate student identity.

Student Complaints

Evaluation Items:

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|-------------------------------------|---|
| <input checked="" type="checkbox"/> | The institution has clear policies and procedures for handling student complaints, and the current policies and procedures are accessible to students in the College catalog and online. |
| <input checked="" type="checkbox"/> | The student complaint files for the previous six years (since the last comprehensive evaluation) are available; the files demonstrate accurate implementation of the complaint policies and procedures. |
| <input type="checkbox"/> | The team analysis of the student complaint files identifies any issues that may be indicative of the institution's noncompliance with any Accreditation Standards. |
| <input checked="" type="checkbox"/> | The institution posts on its website the names of associations, agencies and governmental bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints with such entities. |

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| <input checked="" type="checkbox"/> | The institution demonstrates compliance with the <i>Commission Policy on Representation of Accredited Status</i> and the <i>Policy on Student and Public Complaints Against Institutions</i> . |
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[Regulation citations: 602.16(a)(1)(ix); 668.43.]

Conclusion Check-Off (mark one):

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|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements. |

Narrative:

The College has clear procedures for student complaints providing prompt and equitable means of resolving grievances against actions taken by the College and/or its employees. The grievance and appeals procedures are outlined in the College catalog and website. Complaint files are housed in a decentralized system, within the offices of the instructional or student services deans depending where the complaints were resolved. Title IX complaints are filed and maintained by the Vice-president of Student Services who also serves as Title IX officer. The evaluation team reviewed these files and determined that they were processed according to policy and no patterns of concern were identified.

Institutional Disclosure and Advertising and Recruitment Materials

Evaluation Items:

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| <input checked="" type="checkbox"/> | The institution provides accurate, timely (current), and appropriately detailed information to students and the public about its programs, locations, and policies. |
| <input checked="" type="checkbox"/> | The institution complies with the <i>Commission Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status</i> . |
| <input checked="" type="checkbox"/> | The institution provides required information concerning its accredited status as described above in the section on <u>Student Complaints</u> . |

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

Conclusion Check-Off (mark one):

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| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements. |

Narrative:

The College provides accurate, timely, and thorough information to students and the public regarding its programs, locations, and policies through its catalog and website. The catalog contains all of the elements required in ER 20. The College posts information about its accredited status with contact information for the Accrediting Commission for Community and Junior Colleges on its website and in its catalog. Programs with separate accreditors, Nursing, Alcohol/Drug Studies, and the Fire Academy, name the agencies responsible for accrediting them in the Catalog and on their webpages, and two of these programs provide links to those accrediting bodies.

Title IV Compliance

Evaluation Items:

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|-------------------------------------|---|
| <input checked="" type="checkbox"/> | The institution has presented evidence on the required components of the Title IV Program, including findings from any audits and program or other review activities by the USDE. |
| <input checked="" type="checkbox"/> | The institution has addressed any issues raised by the USDE as to financial responsibility requirements, program record-keeping, etc. If issues were not timely addressed, the institution demonstrates it has the fiscal and administrative capacity to timely address issues in the future and to retain compliance with Title IV program requirements. |
| <input checked="" type="checkbox"/> | The institution's student loan default rates are within the acceptable range defined by the USDE. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range. |
| <input checked="" type="checkbox"/> | Contractual relationships of the institution to offer or receive educational, library, and support services meet the Accreditation Standards and have been approved by the Commission through substantive change if required. |
| <input checked="" type="checkbox"/> | The institution demonstrates compliance with the Commission <i>Policy on Contractual Relationships with Non-Regionally Accredited Organizations</i> and the <i>Policy on Institutional Compliance with Title IV</i> . |

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

Conclusion Check-Off:

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|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements. |

Narrative:

For 2012, the College's 3-year default rate was 9.5 percent, which is significantly below the community college national average of 19.1 percent, and within the acceptable range defined by the USDE. The College has sound procedures to ensure accurate program record-keeping and that students understand the requirements of repaying their loans. The College was selected by

the USDE in 2014 to participate in an experimental pilot program which prohibited issuing unsubsidized loans for first-year students, which should improve the College's future default rates. Additionally, the College has one agreement with a non-regionally accredited organization, the Institute of Heating and Air Conditioning Industries, and has received substantive change approval from the commission.

STANDARD I
MISSION, ACADEMIC QUALITY AND INSTITUTIONAL EFFECTIVENESS
AND INTEGRITY

Standard I.A: Mission

General Observations

Glendale Community College (GCC) demonstrates a strong commitment to placing student learning and achievement at the center of its mission statement. The mission statement effectively identifies the College's broad educational purposes, its intended population, and its commitment to achieving student learning, identifying the Institutional Student Learning Outcomes in the mission statement. The College has established student learning programs and services that are aligned with its purposes, character, and student population. The mission is widely published and reviewed on an annual basis. Evidence shows the College's strong commitment to programs and services that are aligned with the mission. The mission statement is current, approved on March 15, 2016 by the Board of Trustees and central to the College's planning and resource allocation process. The College uses data to analyze how well it is accomplishing its mission.

Findings and Evidence

The College mission statement is aligned with the three primary missions of the California Community College system: lower-division academic and vocational instruction and transfer preparation, basic skills, and workforce preparation and is appropriate for an institution of higher learning. The mission statement describes its broad educational purposes; fully considers the intended student population; defines the types of degrees, credentials, and preparation it offers; and expresses a commitment to student learning and student achievement. In the 2015 revision, the mission recognizes the College's "evolving urban environment," including students who live outside the formal borders of the district, and references distance education. (ER 6)

The mission not only asserts the institutions commitment to student learning and achievement, but also describes its commitment to student learning and success in three ways: promoting the core competencies that comprise the College' institutional learning outcomes (ILOs), supporting diversity and interdisciplinary collaboration, and recognizing the importance of student services, learning support and state-of-the-art technology. (I.A.1, ER 6)

Evidence presented in the Self-Evaluation Report and gathered through interviews indicates the Master Planning Committee (Team A) discussed and revised the current mission based on input from the Academic Senate to include Institutional Student Learning Outcomes. However, it is unclear the extent to which this revision was reviewed by other collegial consultation groups and constituencies (students, faculty, etc.). The interview with Team A indicated that only major changes of the mission statement are vetted through constituency groups. The team is unclear how the College differentiates a major from a minor change. (I.A.1)

As discussed in the Institutional Self-evaluation Report, the College uses a variety of data to assess how effectively it is meeting its mission including information on the following: student enrollment, demographic/socioeconomic, service area, labor market, achievement, student learning, and institution-set standards. Additionally, the College's division chairs responsible for instructional programs, in consultation with the Academic Senate, identified Program-level

institution-set standards for job placement rate and licensure examination pass rates. For all CTE associate degree and certificate programs, standards for job placement rates were set using historical data from CTE core indicators available from the Chancellor's Office of the California Community Colleges. Standards for licensure examination pass rates were set based on data from the licensing agencies. Currently the institution does not collect and disaggregate student SLO data (at the course, program or institutional level) so is unable to use these data to assess institutional effectiveness or direct resources to address needs.

The relationship between the mission, the Institutional Effectiveness Report and the Master Planning Committee's development of the annual goals is evidence of the College's mission directing institutional priorities in meeting the needs of the students. This is supported as well by the results of the fall 2015 faculty/staff evaluation survey (REF I.A.2-15) which indicated a 91 percent agreement that the College's goals are related to its mission and vision. The mission directs institutional priorities and goals through the program review, planning and curriculum development processes. Evidence presented in the Institutional Self-evaluation Report demonstrates a clear alignment of program goals with the College's mission and vision with program review documents validated to ensure this alignment. The Curriculum and Instruction Committee requires new course and program proposals to indicate whether and how assessment data findings have led to the development of the proposed course additions or changes to course prerequisites. Data drives decision making as evidenced by the College's use of data to determine annual goals, develop its plans (Equity and others) and pursue grants to address achievement gaps identified through the disaggregation of achievement data. (I.A.2)

Samples of Curriculum and Instruction documents provided to the team indicate that outcomes assessment results and other data are used to determine how effectively the College is accomplishing its mission. For example, a statistical evaluation of the College's information competency course, Library 191, resulted in the creation of Library 190, a new library competency course paired with ESL. The Math department developed a "Skills for College Success in Statistics" course, Math 336, which the Curriculum and Instruction Committee approved in March 2016. This course was in response to annual data gathered by the Math faculty on the success of the Fast Track Algebra course as well as statewide and national data demonstrating the effectiveness of acceleration of the math sequence. Additionally, the College uses Labor Market Data effectively to determine program need as illustrated by the development of a new Business Information Worker (BIW) CTE program (Certificate of Achievement) and a proposed Administrative Assistant AS degree. There is substantial evidence the College's mission directs institutional priorities in meeting the educational needs of the students. In interviews with the team, division chairs and Team A members shared numerous examples from both Instruction and Student Services that illustrate that the College uses data to determine how well it is accomplishing its mission. (I.A.2)

The mission is also assessed through the inclusion of the College's Institutional Student Learning Outcomes identified in the mission statement. The College's ISLOs are currently assessed primarily through indirect measures -- student survey and faculty questionnaires as well as aggregation of course-level SLO assessment results. During the Team A interview, participants noted that the College is investigating more meaningful direct assessment methods (signature assignments, for example) to assess student attainment of program and course-level SLOs. A

task force analysis of ILO assessments led to a one-year pilot focusing on the ILO that evidenced the lowest success, critical thinking. The report [REF I.A.2-8] was presented to the Learning Outcomes Committee and the IPCC. A question remains as to whether this pilot one-year focus on the ILO directed institutional priorities is meeting the educational needs of students since the report ended with only recommendations with no evidence of actions taken at the institutional level. However, the College is clearly committed to developing a meaningful assessment plan for its Program and Institution-level SLOs. (I.A.2)

The mission statement informs institutional planning and the College uses data to determine how effectively it is accomplishing the mission. The institution uses the master planning committee (and program review processes) appropriately to process the information provided from institutional research, programs and services to determine the effectiveness and success of its mission.

The College's mission guides the planning and resource allocation processes and serves as the basis for the Educational Master Plan, informing institutional goals for student learning and achievement. The Institutional Effectiveness Report from 2014-15 as well as the presentation to the Board of Trustees on June 29, 2015 makes clear this connection and the minutes from Team A meetings from last year indicate a review and discussion of this data and the goals.

A review of the College's planning documents indicates a consistent alignment between its programs and services and its mission. All programs and services identify their relationship to the mission statement as a part of their program review, conducted on a three-year cycle. The College produces a simple "Report on Programs Related to Components of Mission Statement" which helps connect each instructional and student support program to the mission statement. The program approval process requires new programs to align with the College's mission and new services, such as summer bridge programs, must identify their relationship to the mission. The program review process is directly linked to the larger planning and resource allocation process. To be eligible for College resources, programs are required to submit a validated program review plan. The mission statement prompts planning and decision making and is central to the choices the College makes.

The Institutional Self-evaluation Report cites that the mission guides decision-making through the governance system citing Administrative Regulation (AR) 2511 which states "The task of governance is the continuing development of the institution and its mission" (REF I.A.3-5). Survey results seem to support this claim with 87 percent of respondents agreeing that the College governance committee focus on the College's mission and vision statements when making recommendations with 85 percent agreeing that the mission and vision guide decision-making, planning and resource allocation. Additionally, the results of the annual survey of governance committees provided to the team illustrate that the committee missions are strongly tied to the College mission. (I.A.3)

The College articulates its mission in each annual edition of the catalog, in the printed schedule of classes each term, at sites on the campuses, and on the College's website including a brief animated video that includes information about the revision process (REF I.A.4-5). As demonstrated by the narrative and evidence provided in the Self-Evaluation Report, the mission is central to institutional planning and decision making. The mission statement is provided to College

personnel in a variety of documents and is mounted prominently in a variety of locations on campus, including the library, student government areas and within many classroom buildings.

As discussed, the mission is embedded and featured in all planning documents; most noticeably in the program review. Moreover, it is a criterion by which budget requests are prioritized and grants are approved. Survey results indicate that 95 percent of faculty and staff, 47 percent of credit students and 74 percent of noncredit students indicated they have read the mission statement (REF I.A.4-7, I.A.4-8). Sixty-nine percent of faculty and staff responding to the survey indicated they had participated in discussions about the mission statement. The College engages in an annual review of the mission statement each fall as described in the Integrated Planning Handbook. The Glendale Community College District Board of Trustees adopted the most recent revision of the College mission statement on March 15, 2016. (I.A.4)

Conclusions

The College meets Standard I.A and Eligibility Requirement 6.

Recommendations to Meet the Standard

None.

Recommendations for Improvement

None.

Standard I.B: Assuring Academic Quality and Institutional Effectiveness

General Observations

Following the 2010 accreditation visit, the College increased efforts to establish and implement processes and institutionalize personnel to gather and use outcomes and assessment data to assure academic quality and improve institutional effectiveness. The College effectively utilizes and supports a Learning Outcomes Database (LOD), created faculty released-time positions to coordinate assessment processes, and collects and disseminates information from this database. The team found substantial evidence that the College uses assessment results (particularly Course Student Learning Outcome results) to improve student outcomes. The team verified that the LOD structure has prompted revisions to learning outcomes for courses and programs and facilitated continuous quality improvement. Reports from the LOD are available to the public on the website for the Learning Outcomes Committee, a subcommittee of the Academic Senate made up of representatives from each academic division.

The Institutional Self-Evaluation Report and the accompanying evidence provided in the report along with information gathered through interviews provided considerable evidence that the College engages in collegial and substantive dialogue about learning outcomes at multiple levels. Interviews were conducted with division chairs, Team A, and the SLO, PLO and ILO group consisting of the outcomes assessment coordinator, Curriculum and Instruction Committee members, members of the Institutional Planning Coordination Committee (IPCC), Dean of Research Planning and Grants, division chairs, administrators and faculty members. The team verified the College uses analysis of quantitative and qualitative data to continuously and systematically evaluate, plan, implement and improve the quality of its programs and services.

Findings and Evidence

The College indicates that its organizational structure and established procedures encourage sustained collegial dialogue on continuous improvement of academic quality, student equity and student success. The Report indicates significant improvement in this area since 2010, and evidence provided to the committee and discovered in interviews with division chairs, planning teams and members of the Learning Outcomes Committee makes clear the commitment stakeholders have in sustaining substantive collegial dialogue about student outcomes to improve student learning and achievement. The Learning Outcomes Committee serves to educate the College community about learning assessment at the course, program, and institutional levels. There are two reassigned faculty coordinators to lead the learning outcomes assessment work; one of these positions is responsible for developing and implementing the College's online Learning Outcomes Database (LOD). The Curriculum and Instruction Committee, responsible for ensuring the integrity and quality of all course offerings and programs, is informed by dialogue and assessment results led by the Learning Outcomes Committee and the departments who populate SLOs and assessment results into the database. (I.B.1)

After the College received recommendation in response to its 2013 Midterm Report to accelerate its efforts to develop and implement SLOs, the Academic Senate adopted a policy to clarify expectations regarding learning outcomes assessment and the cycles of assessment. This clarification, along with further development of the infrastructure to support the collection and reporting of SLO findings, corresponds to a significant increase in the percentages of courses and

programs that show ongoing learning outcomes assessment (from 73 percent of courses and 19 percent of programs for which assessments were in place at the time of the 2013 Midterm Report and over 93 percent of courses and nearly 92 percent of programs assessing as of spring 2016). The Academic Senate also adopted a “Class Overview” policy that encourages faculty to discuss course learning outcomes with students as part of their review of the class syllabus. Student survey results demonstrate that more than 80 percent of students who responded to the survey are well aware of the learning outcomes for the courses they take. As demonstrated by the agendas and minutes provided to the team from department, division and planning team meetings, faculty and others responsible for student learning engage in collegial discussion of SLOs to identify gaps and implement improvements. The Institutional Planning and Coordination Committee helps promote institution wide dialogue through its publication and presentation to planning groups (including the Master Planning Committee, or Team A) of the Institutional Effectiveness Report which includes both outcomes and achievement data. However, the team did not find evidence of formal structures to encourage and sustain cross disciplinary, large group conversations in which faculty and others responsible for student learning from across the College met to discuss assessment practices and results to fine-tune processes and improve student learning and achievement. (I.B.1)

The College has systems and personnel in place to ensure learning outcomes at all levels (Course, Program, and Institution) for both instructional and student and learning support services are developed, reviewed and approved on regular cycles and that the results are used to drive decision-making. The College recently established a three-year cycle of program review where one-third of all programs conduct comprehensive reviews at any given time, while the other two-thirds provide annual updates. Instructional, student support and administrative units of the College all participate in program review, the key process where achievement and learning outcomes data are utilized and analyzed to inform program-level decisions and resource requests. Learning outcomes information is prepopulated in the program review for each program. Outcomes are developed, reviewed and assessed, and used to guide decisions affecting both instruction and student services. The program review template, as well as the Learning Outcomes Database, facilitate linkage between course, program and institutional learning outcomes. (I.B.2)

Evidence provided by the College and through interviews conducted by the team confirm that faculty discuss SLOs at department and division meetings. The College provided examples, both in the Institutional Self-Evaluation Report and in the additional evidence requested, that illustrate results are used to change curriculum and adjust pedagogy; however, much of the evidence provided indicates conversation focused on process and procedures. Through interviews and the collection of additional evidence provided from the Learning Outcomes Committee, the team confirmed that more meaningful course assessment is taking place than initially discovered or available through the website links or Learning Outcomes Database. However, the team concludes and interviewees agree that the College can more effectively and meaningfully assess program and institutional outcomes through more direct measures. (I.B.2)

In 2013, the Academic Senate recommended standards for the five institutional measures specified by accreditation standards including course completion (67%), retention (47%), degree completion (300), transfer (800), and certificate completion (200). The Institutional Self-Evaluation Report shows that five years of historical data were used to set the standards.

Minutes from an Academic Senate meeting show that the standards were adopted. However, the approval was not unanimous, and no notes of the discussion were captured. The Master Planning Committee accepted these standards and used them to inform institutional goals. Each spring since their adoption, the Committee reviews, along with the Academic Senate, the standards for these metrics, and they have not been changed since. These standards appear in the introduction of the Institutional Self-Evaluation Report, in the Campus Profile made available on the College website, and in the annual Institutional Effectiveness report. Brief analyses are provided in the Institutional Effectiveness report that acknowledge the fact that overall college performance has consistently exceeded the standards set.

The Self-Evaluation Report highlights how the College uses student performance data to demonstrate its institutional effectiveness and the quality of its academic programs. Specifically, the annual Institutional Effectiveness report, as well as reports provided to the Master Planning Committee and to the board of Trustees, includes Student Success Scorecard data which allows the College to compare its performance to peer community colleges in the state. Glendale Community College clearly ranks high for rates of student persistence, 30-unit milestone completion, and completion of degrees, certificates, or transfer. These performance indicators are aligned with the College's federal scorecard 150% completion rate, but also allow the College to more precisely measure different success outcomes that the federal indicators obscure. For example, the Student Success Scorecard metrics allow the College to determine the count of both degree and certificate completers and the completion rates include completions (such as transfer) that the federal scorecard omits. This measure is core to the mission of the College.

The team confirmed that the College has set short (one year) and long-term (six year) goals for one of the five key institution performance metrics (course completion), but there is no evidence of dialogue to address the tension between setting minimum standards and aspirational goals that will drive institutional improvement. Interviews with faculty and administrators of the Master Planning Committee (Team A) revealed that establishing learning and student achievement goals will be part of the work of developing a new Institutional Master Plan (formerly called the Educational Master Plan). Timelines for the development of this new Master Plan have already been established and were shared with the visiting team. The team noted that these standards, which were established as the "floor" (as opposed to aspirational), are appropriate to the College's mission. They are also important indicators of how well the College meets its mission and vision. (I.B.3, ER 11)

Initially, after reviewing the Institutional Self-evaluation Report and accompanying evidence, the team questioned how effectively the College was using assessment data and organizing its institutional processes to support student learning and student achievement. However, as the College provided additional evidence and the team gathered information from interviews, the team concluded that through the use of the personnel (two faculty each with 40 percent release time), committee organization, allocated resources, well-established and effective data collection processes, and development, dissemination and discussion of assessment reports, the College has integrated a systematic process of data-driven decision-making and resource allocation to ensure ongoing advancement of student learning and achievement. (I.B.4)

The College assesses accomplishment of its mission through program review, outcomes assessment (including course, program and institution), and analysis of disaggregated achievement data by program type and method of delivery and communicates this information through its Institutional Effectiveness Report, presentations to the Master Planning Committee, and the Board of Trustees. The Master Planning Committee uses the data provided to set annual goals which are the highest priority planning items for the College each year. The College assesses accomplishment of the mission by evaluating progress toward achievement of program review goals, annual goals and through the assessment of course, program and institutional learning outcomes, which are part of the mission statement. The College also assesses accomplishments of its mission through the regular review of student achievement measures. The Student Success Scorecard is featured on the College website, and the data is communicated internally (at committee and planning meetings) and externally (through marketing materials and at Board of Trustees meetings). (I.B.5)

Performance results for key student achievement indicators that are relevant for planning and for guiding improvement are reported at meetings of the Academic Senate, the Master Planning Committee, and to the Board of Trustees. Program-level standards and actual performance are documented in program reviews. College-level standards and performance measures are published in the Institutional Effectiveness Report. Standards are also tied to resource allocation through program review. (I.B.6)

The College disaggregates student achievement for subpopulations of students and has identified performance gaps. Only when the institutional measures are disaggregated, as they are by age, ethnicity, gender, financial aid status, and course delivery method, does student performance for some groups fall below set standards. The Institutional Self-Evaluation Report states that these gaps in performance are being addressed by the student equity planning processes precipitated by the availability of state funding to close achievement gaps among student groups. A review of the 2015 Student Equity Plan verified this. Institutional Student Equity Plan initiatives to close achievement gaps include learning communities for specific groups (Black Scholars), La Comunidad, Transfer Academy, Guardian Scholars, Summer Bridge, new programs in the Learning Center and Math Discovery Center, an expansion of Supplemental Instruction and embedded tutoring, Latino Students' Achievement Project and other programs and support personnel. Because these programs are newly implemented, the College has not yet evaluated the efficacy of these strategies. However, the College does evaluate grant funded activities and initiatives as part of required annual reports. Additionally, programs like Supplemental Instruction and others targeting disproportionately impacted students are evaluated through the program review process. (I.B.6)

While student achievement data is disaggregated, student learning outcomes data currently is not. As shared with the team in the interview with the Student Learning Outcomes committee, the College is aware of this need and is currently exploring options to be able to disaggregate outcomes assessment data. (I.B.6)

The division chairs, in consultation with the Academic Senate, set standards at the program level for job placement rates and licensure examination pass rates. The Institutional Self-Evaluation Report states that the standards were first set in 2014-2015 for the associate degree and credit

certificate programs with 10 or more completers in the previous two years. In the following academic year, the division chairs and the Academic Senate set standards for all CTE associate degree and certificate programs. Job placement rates were reportedly set using data on CTE core indicators that is available from the state Chancellor's Office and based on the recommendation from the local Academic Senate to not set any job placement rates below 50%. The team observed that the College has reported standards for job placement rates in its 2014 and 2015 annual reports to ACCJC that are not entirely consistent with those reported in the Self-Evaluation Report and in its internal Institutional Effectiveness Report. The Self-Evaluation Report shows no standards below 50%, whereas the Annual ACCJC Reports appear to report the state negotiated rates made available from the Chancellor's Office, some of which are below 50%. The Institutional Effectiveness Report references use of the state negotiated rates, but uses placeholders of "xx" where the actual standards need to be provided. This review of the evidence signaled to the team the need for the College to consistently and completely set job placement standards across all college reports. Using the data provided in the Self-Evaluation Report which compares actual job placement rates with institution-set standards, the team researched program reviews for those few programs where gaps were apparent. The team could not find direct evidence where programs focused explicitly on improving job placement rates to meet or exceed the standards, but some did point to curricular changes base on input from advisory committees that included industry representatives. (I.B.6)

Board Policy 2410 and its associated Administrative Regulations call for the review of all board policies and administrative regulations every three years. The College Executive Committee conducts the final review of all policies before submitting them to the governing board for final approval. The Board of Trustees assesses board policies for their effectiveness in fulfilling the College mission; ensuring the quality, integrity, and improvement of student learning programs and services and the resources need to support them. In addition, the Board considers policies in light of adherence to state and federal laws and regulations. The Academic Senate and college standing committees review those policies pertinent to their areas of responsibility. Governance groups and committees also complete an annual survey in which they verify their aligning with the College mission, assess and report on their progress on goals from the previous year, and set goals for the current year. (I.B.7)

Instructional practices are reviewed through monthly meetings of the division chairs, the Academic Senate, the Curriculum and Instruction Committees, and the Academic Affairs Committee. Student services practices are reviewed through weekly meetings held by managers of student services areas and through monthly meetings of the Student Affairs Committee.

Regular evaluation of resource allocation is documented and published in the Annual Evaluation of Planning, Program Review, and Resource Allocation reports available on the College's Master Planning website. (I.B.7)

The College broadly communicates the results of its assessment and evaluation activities through the processes of program review, learning outcomes assessment and institutional effectiveness reporting. All programs conduct program review. Instructional program reviews address student achievement and learning outcomes assessment data at the course and program levels. Strengths and weaknesses are captured in program reviews, as well as plans for improvement and attendant

resource requests. Program reviews for all units are publicly available on the College website. (I.B.8)

Assessment information is communicated through annual Institutional Effectiveness reports which include achievement and learning outcomes assessment data as related to the College mission, goals and institution-set standards. In addition, the office of Research, Planning, and Grants annually produces the Campus Profile which shows data on student demographics and student achievement as well as faculty and staff demographics and fiscal information. Institutional effectiveness reporting also includes results of the annual “Student Views” survey which captures student satisfaction with college services and other aspects of the student experience. “College Views” are also reported annually and summarize the results of the faculty and staff survey which includes employee perceptions of governance, institutional effectiveness, technology, and resources. A review of these results indicate high satisfaction in all of these areas. Institutional effectiveness reporting is also made regularly to the Board of Trustees when the state-wide Student Success Scorecard measures are presented and discussed. (I.B.8)

The College has updated and published a Planning Handbook throughout the past accreditation cycle. It has continued to strengthen its planning process since its last comprehensive self-evaluation and, especially after 2013, when ACCJC recommended that the College strengthen linkages between program review, planning and resource allocation. The Integrated Planning Handbook 2015-2016 describes the cycle of planning activities, including program review, and how they relate to evaluation and resource allocation. Both long and short-term planning processes are described in this handbook. (I.B.8)

Currently, the Institutional Planning Coordination Committee (IPCC) is the governance body that coordinates the College’s planning, program review, and resource allocation processes. The IPCC meets monthly, is chaired by the Dean of Research, Planning & Grants, and has representation from all constituent groups. Subcommittees of the IPCC include the Master Planning Committee (Team A) and the Planning Resource Committee (Team B). The Master Planning Committee is charged with developing and tracking implementation of the College’s Educational Master Plan, annually reviewing the mission statement, recommending annual goals to the College Executive Committee, reviewing institutional plans, and using result of program review to inform institutional planning. (I.B.9)

The College engages in continuous, broad based, systematic evaluation and planning. The Integrated Planning Handbook 2015-2016 describes how the College evaluates the effectiveness of its integrated planning, program review and resource allocation model and processes. The Institutional Planning Coordination Committee (IPCC) annually evaluates program review by capturing the percent of completed program reviews, the percent of resource requests from program reviews that are validated and considered for resource allocation, and by documenting examples of the use of student learning outcomes assessment for program improvement. The IPCC also annually evaluates the Educational Master Planning process and tracks progress toward completion of action items against assigned timelines and outcomes. The IPCC evaluates the integration of planning and budgeting by capturing the percent of requests successfully funded and compares funded requests against lists of prioritized requests. Finally, the IPCC, in collaboration with the Office of Research, Planning, and Grants, evaluates institutional

effectiveness in terms of a variety of key performance indicators, which includes institutional student learning outcomes, and student progress and achievement indicators. (I.B.9, ER 19)

Since the 2010 site visit, the College has significantly improved its planning, review and resource allocation processes. Interviews with members of the Master Planning Committee revealed a strong sense of determination to take full ownership in developing a new Institutional Master Plan that will replace the expired Educational Master Plan which was adopted in 2010 and developed with assistance from a consultant.

As documented in the Institutional Self-Evaluation Report's Quality Focused Essay for Action Project 1, the institution identified issues it seeks to address to further strengthen and enhance its integrated planning and resource allocation processes. Some of these issues appear to have emerged through the introduction of new plans required to receive funding from the state Chancellor's Office. These plans impose external requirements and timelines that must be aligned with college processes. Keeping track of institutional plans that are the responsibility of multiple offices and committees has also presented a significant challenge. The College has called for the development and implementation of a centralized online system to support coordination of all plans from the coordinating committees of the College and to support the plan managers with a tool to coordinate the activities of their plans with those of other plans. During the site visit, the new web-based tracking system was revealed to the visiting team. The College has also identified the need to more closely link general resource allocations and multiple funding sources and has taken steps to address this as the next iteration of the Educational Master Plan development begins. Use of a common request form and process across different plans and funding sources is identified as an action in the Quality Focus Essay.

Conclusions

The College does not meet Standard I.B and Eligibility Requirements 11 and 19.

Recommendations to Meet Standard

Recommendation 1

In order to meet the Standard and Eligibility Requirements, the team recommends that when the College establishes institution-set standards for student achievement, including job placement rates, it consistently publishes this information. The team further recommends that when the College identifies gaps between performance and institution-set standards appropriate to its mission, it implements strategies to mitigate those gaps and evaluate the efficacy of those strategies. (I.B.3, I.B.6, ER 11, ER 19)

Recommendations for Improvement

Recommendation 2

In order to increase effectiveness, the team recommends that the College revisits its institution-set standards on a regular basis to ensure they remain appropriate and useful for determining institutional effectiveness. (I.B.3, ER 11)

Recommendation 3

In order to increase effectiveness, the team recommends that the College collect and disaggregate student learning outcome data for subpopulations of students to determine performance gaps and implement strategies, allocating resources to address those gaps. (I.B.6).

Recommendation 4

In order to increase effectiveness, the team recommends that the College formalize and record its widespread, but often informal, efforts to assess student learning outcomes at the course, program, and institutional levels in order to improve student learning and support programs, to fine-tune processes, and to allocate resources as appropriate. (I.B.6, II.A.1, II.A.3, II.A.11).

Standard I.C: Institutional Integrity

General Observations

The College exhibits a high degree of integrity and provides accurate and useful information to all constituencies and the public. The College has clearly established policies and procedures promoting honesty, academic integrity and responsible operations appropriate for an institution of higher learning. These policies and procedures are systematically and regularly evaluated and revised as necessary.

Findings and Evidence

The College assures the accuracy of information through a process consisting of review and approval. Information presented internally and externally is clear and accurate about the College mission statement, student learning outcomes and achievement, educational programs, and student support services. Additionally, the College clearly communicates its accreditation status and provides public access to all related reports, including the Substantive Change Proposals for Distance Education and the Industrial Technology (ITECH) curriculum. (I.C.1)

The narrative and evidence provided in the Institutional Self-evaluation Report adequately identify the quality and type of information available to internal and external stakeholders. Information includes the annually updated college catalog, results of program initiation and modification processes, the outcomes assessment data available through the publicly accessible Learning Outcomes Database, program reviews, and others. (I.C.1)

The College posts information about its accredited status and the ACCJC on its website and in its catalog. Programs with separate accreditors, such as Nursing, Alcohol/Drug Studies, and the Fire Academy, name the agencies responsible for accrediting them in the Catalog and on their webpages and two of the programs provide links to those accrediting bodies. (I.C.1)

The elements included in the catalog are thoroughly documented in the report. Admissions & Records is responsible for annually reviewing, updating, and producing the catalog each May, a function that will now be undertaken by Student Services. The catalog includes all the information required under Eligibility Requirement 20, “Integrity in Communication with the Public” with a table provided that shows the page numbers in the 2015-16 catalog referencing these elements. The team reviewed the catalog and verified the College is compliant with Eligibility Requirement 20. (I.C.2, ER 20)

The College provides the public with information on how well the College is accomplishing its mission and vision through its website, reports (e.g. Institutional Effectiveness Report REF I.C.3-2), presentations (including Board of Trustees meetings REF I.C.3-9, 3-10, 3-11), and marketing materials (I.C.3-13). The College effectively disseminates Scorecard data and emphasizes its achievement data (success, retention, completion) and disaggregates these data for internal purposes to improve institutional effectiveness. Data are easily accessible on the College website and interpretable by prospective students and the public. This information allows the public to compare the College with other colleges. (ER 19)

To address the College's documentation of student learning, the College produces an Institutional Effectiveness Report. The latest version included results of ISLO assessment, the results from which are primarily the result of indirect measures (faculty and student opinion). Additionally, the Learning Outcomes Database, while internally and publicly accessible, is difficult to navigate and extract information for inclusion in reports to facilitate dialogue. The College has created an Action Plan in its QFE to address this. (I.C.3)

Through the catalog and website, the College identifies and describes all certificates and degrees in terms of their purpose, content, course requirements, and expected program learning outcomes. The College website includes webpages on certificates and degrees (including a page devoted to Associate Degrees for Transfer). Additionally, per the Academic Senate policy (REF I.B.1-6. Senate Class Overview Policy), faculty are required, within the first two class sessions, to provide a class overview that includes important information students need to be successful in the class, including the course SLOs. The process the Curriculum and Instruction Committee uses in the development of new instructional programs requires specific information be provided including required courses, restricted electives, and course sequencing. Proposed degrees and certificates are required to use data to demonstrate program viability. (I.C.4)

Board Policy 2410 requires each board policy and administrative regulation be reviewed every three years with one-third evaluated annually. A random search through the many policies and regulations show that most were reviewed or revised within the last few years, mostly in 2014 and 2015. However, a check of the fiscal policies, for example, showed that many had not been reviewed or revised since 2010 or 2011. Per the Board Meeting June 30, 2016 minutes provided as evidence, this review process is now being consistently completed. (I.C.5)

The cost of attendance is listed in the catalog, schedule, and on the financial aid webpage. Details provided to students explain the total cost of education providing estimated expenses for students living with parents/guardians and another for students living on their own. The schedule on the website lists information about the cost of textbooks. The Nursing webpage lists the cost of pursuing this program. (I.C.6)

The College has policies in place on academic freedom (BP 4030) which upholds individual faculty members' entitlement to freedom in research, publication of results, and discussion of their subject. Additionally, the College has a policy on free speech (BP 3900) that makes clear the rights and expectations of all campus constituent groups and visitors. Evidence provided and required by Eligibility Requirement 13 (Academic Freedom) illustrate the College is committed to academic freedom through its policies and procedures. (I.C.7, ER 13)

The College has numerous policies on academic integrity and publishes the consequences for dishonesty under the "Standards of Student Conduct" (BP 5500). Additionally, the College makes clear its ethics and code of conduct expectations which are provided to all employees and explained in BP 3050. Policies and procedures covering employees are also included in the faculty and classified handbooks. (I.C.8)

To ensure that faculty present information fairly, students rate their instructors on this aspect as part of faculty evaluation. Student survey results were positive on this aspect. The team reviewed student complaints and did not uncover violations of this Standard. (I.C.9)

The College is a public institution and does not seek to instill specific beliefs or world views. Codes of conduct for all employees are clear and widely disseminated. (I.C.10)

The College has satisfied Commission requirements on their foreign locations. Courses offered through the Baja Program and Study Abroad program require the same policies, procedures, standards, outcomes and assessments, and faculty evaluations as those completed in the U.S. (I.C.11)

The College demonstrates a commitment to comply with Standards of the Commission, Eligibility Requirements, Commission policies, and all requirements for public disclosure and reporting. It discloses to the public all information required by the Commission. (I.C.12, ER 21)

The College presents itself openly, honestly and consistently to federal, state and private agencies and complies with all regulations and statutes. (I.C.13)

The College is an independent institution with no investors or shareholders. (I.C.14)

Conclusions

The College meets Standard I.C and Eligibility Requirements 13, 19, 20, and 21.

Recommendations to Meet Standard

None.

Recommendations for Improvement

None.

STANDARD II STUDENT LEARNING PROGRAMS AND SUPPORT SERVICES

Standard II.A: Instructional Programs

General Observations

Glendale Community College (GCC) is a comprehensive community college, offering basic skills, pre-collegiate, general education and career technical education (CTE) courses with the goals of preparing students for college level coursework, career entry, job skill development for incumbent workers and transfer to four-year colleges. The College has thoroughly identified its intended student population and has developed and implemented services and programs to adequately meet the needs of its students. The College's offerings are diverse with a wide range of transfer, CTE, noncredit, dual enrollment, and community education programs. When needs are identified to better serve students, the College has been successful in creating targeted programs to meet these needs.

Through the self-evaluation process, the College has thought honestly and proactively about its service to students and has accomplished tangible changes to improve. Additionally, the College has laid out plans for improvement that are clearly described at the end of each Standard, although these plans do not always follow directly from the narrative that preceded them. The Self-Evaluation Report directly addresses the Standards; yet some pieces of evidence that would verify statements were missing. For example, flyers or calendars were used instead of actual descriptions, proof of attendance, or evaluations. The Learning Outcomes database site was difficult to use and some sections were cut off. The team also took some issue with the lack of self-critique in the narrative – with every evaluation section starting with “The College meets the standard.” Although the chart and QFE indicate plans to improve, the report's narrative often did not clearly discuss areas needing improvement. Despite these shortcomings in the self-evaluation, the team found the visit to the College to be beneficial and informative in clarifying processes.

Findings and Evidence

The team found that the College has developed, implemented, and sustained academic programs and support services sufficient in size and breadth to support its students. The College uses established and effective policies and practices to develop and maintain academic programs and related policies, relying on collaborative decision-making to ensure currency and rigor of said programs. All instructional programs are offered in fields of study consistent with GCC's mission and are thoroughly reviewed through faculty-driven approval processes that include the Academic Senate and the Curriculum and Instruction Committee before final approval by the board and the Chancellor's Office. The College has developed a comprehensive array of academic, vocational, and noncredit programs to serve a diverse student population. The College ensures that instructional programs meet the standards appropriate to higher education by using its established review and approval process to meet the requirements set forth by the ACCJC and the California Community Colleges Chancellor's Office. New program proposals require that program leaders address questions about the program's ability to meet student needs, its relationship to general education requirements, and its fit with the objectives of the California Community College system. The College's presence related to distance education is overseen by

a standing committee, the Committee on Distance Education (CoDE), yet the general status, purpose, and vision for DE coursework were not immediately clear in the Self-Evaluation Report. Interviews with members of the CoDE clarified the College's DE presence. The College has clear expectations and policies around DE course content and teacher training, it includes guidance on how to establish regular and effective contact in an online environment, and it establishes methods to authenticate student identity. Although the College's DE offerings have been modest in scope, the College appears poised to grow its online presence. The Curriculum and Instruction Committee, a subcommittee of the Academic Senate at the College, is responsible for ensuring that instructional content and methods of instruction meet appropriate standards and are aligned with the mission. The C&I Committee includes a faculty co-chair, an administrative co-chair, faculty representative from each division, a librarian, the SLO coordinator, and the articulation officer. Full-time and part-time faculty work with their division representatives to develop and revise course content and prerequisites. Faculty improve courses, programs, and instructional services through program and curriculum review, with all instructional programs undergoing a complete review every three years. The program review process includes reflection and analysis of learning outcomes and captures programmatic improvement plans. (II.A.1, II.A.2, ER 9, ER 11)

The College defines standards for student achievement and assesses its performance against those standards. The institution publishes each program's expected student learning and any program-specific achievement outcomes. The team examined evidence of regular and systematic assessment and discussion of achievement data; the College is able to demonstrate to the public and potential students that those who complete programs at the College are achieving identified outcomes and that the standards for student achievement are being met. (ER 11)

The College has made substantial progress in developing student learning outcomes, measuring them, and using the results to plan and implement institutional improvements. Student Learning Outcomes (SLOs) were the focus of a previous recommendation in 2010, which the Commission, based on the College's report and evidence, found the College to have addressed in its letter of July 2014, which also noted that it had sustained the work needed to meet the Standard. Although instructors are expected to list the course SLOs on their syllabi, the team's random sampling of posted syllabi uncovered that of 45 syllabi, in a variety of departments, 10 did not have SLOs and five had SLOs combined with course objectives or had them mislabeled as objectives. Despite this shortcoming, the College has completed a substantial amount of work related to assessing and tracking SLOs, especially at the course level. The quality or level of reflection captured in these assessments was not always clear from the team's initial review of the assessment database prior to the visit, but evidence provided during the visit confirmed that the College is assessing and recording SLO attainment. It is worth noting that the College's strategy related to SLO assessment is currently focused at the course level and does not capture the resolution to disaggregate student attainment of learning outcomes. The College acknowledges the need to improve the communication and dissemination of assessment results and has formulated a plan to meet this need. This is included briefly within the response to Standard II and in greater detail in the Quality Focus Essay. (II.A.3, QFE Topic #2)

The College provides substantial pre-collegiate coursework in English and math with multi-level sequences available in credit ESL, English, and mathematics. Additionally, the College also

offers noncredit instruction in ESL, Adult Basic and Secondary Education, and in GED preparation. A relatively large percentage, 35 percent, of students who earn associate degrees began their studies in the noncredit program. Additionally, the performance of students in the pre-collegiate programs at the College generally exceeds regional and statewide averages: 34 percent of GCC students in the analyzed cohort who began in pre-collegiate math passed a college-level math class compared to a 27 percent success rate in the region, and 43 percent of GCC students in the analyzed cohort who began in pre-collegiate English passed a college-level English class compared to a 38 percent success rate in the region. (II.A.4)

Consistent with locally established curriculum requirements as well as requirements set by the California Community College system, the College's degrees and programs are of appropriate length, breadth, rigor, and sequencing. All degrees require the completion of 60 semester units, of which 18 units are dedicated to general education requirements that conform to generally-accepted norms, including those established by the ACCJC. Program proposals reviewed through the curriculum-approval process are evaluated for course sequencing and are arranged so that a full-time college-ready student can complete the degree in two years. New programs are required to submit a table to the Curriculum and Instruction Committee that defines the program requirements and course sequences which for associate degree programs include at least 18 units in a major or interdisciplinary core as well as associated general education requirements. The review of program requirements by the Curriculum and Instruction Committee include the review of course and program-level learning outcomes. The breadth, depth, and rigor of the instructional programs at GCC is evidenced by high persistence rates of transfer students to the California State University (CSU) system: 92 percent of GCC students in the analyzed cohort persisted from one fall to the next at the CSUs compared to 88 percent for all community college transfer students. Additionally, GCC students had an average GPA at the CSUs that was 0.30 points higher than their counterparts from other community colleges. (II.A.5, II.A.6, II.A.13, ER12)

The College has a well-established and effective program for professional development for faculty and uses this program to provide broad training for the various instructional modes supported by the College. Accordingly, numerous workshops, training sessions, and retreats are held throughout the year to explore effective teaching strategies. These strategies generally follow from widely recognized successful strategies to engage and reach diverse learners. Additionally, the College has sought and implemented student feedback related to the instructional design of learning centers and classrooms to promote an active and collaborative approach to learning. The College also experiments with a variety of focused instructional strategies such as portfolio-based learning, self-paced learning, and accelerated classes to meet the needs of its diverse learners. The College supports distance education and has clear and appropriate training expectations in place for faculty who teach online. (II.A.7)

The College administers department-wide exams in English, credit ESL, and mathematics. In all of these examples, exams are developed across the departments, evaluated regularly, and scored in conjunction with other instructors to ensure consistency in scoring. The mathematics department has used standardized exams since the 2000-2001 academic year. Throughout this time, mathematics faculty have worked closely to review exams for clarity and rigor, have developed a complex and unbiased format for delivering and proctoring the exams, and have

jointly scored the exams to identify systematic weaknesses in student performance. These results are used to guide the development of supplemental instruction and teacher training for future semesters and to provide direction on curricular development within the department. (II.A.8)

The College awards credit based on student attainment of learning outcomes that are established through the course-approval process with the College's curriculum committee. The units of credit awarded for courses are consistent with generally-accepted norms and conform to the expectations set for the California Community Colleges. The College does not offer courses with clock-to-credit-hour conversions. (II.A.9, ER 10)

The College maintains effective and extensive articulation agreements with four-year colleges and successfully transfers students to public and private universities such as California's public universities (2,089 total agreements) and 32 private universities. The College also communicates established policies related to transfer of credit in campus publications, such as the college catalog. The division chairs and/or appropriate discipline experts review these policies for consistency relative to student learning outcomes. (II.A.10)

All instructional programs have established program-level outcomes that are linked to institutional-level outcomes. The College has mapped the program-level outcomes to established institution-level outcomes that address the topics required by Standard II.A.11 (communication competency, information competency, quantitative competency, analytic inquiry skills, ethical reasoning, and the ability to engage diverse perspectives). Based on the Self-Evaluation Report and associated evidence, it was not clear prior to the team's visit whether or not the assessment of program-level outcomes was effective or widespread. From interviews with the Learning Outcomes Committee and various constituencies involved in program review, the team confirmed during the visit that the College has assessed program-level outcomes through mapping and assessment at the course level. The team found that the progress on this effort has been both rapid and recent and, as such, the team is concerned about its future sustainability. While the College is left to create its own processes regarding the integration of learning outcome assessment across various levels and within program review, the team encourages the College to focus on incorporating faculty and administrative input to ensure that assessment processes work for the institution, that assessment efforts within academic departments are inclusive of all appropriate constituencies and are reflective, and that program and institutional-level outcomes be assessed as directly as possible. (II.A.11)

The team found that the College requires general education coursework for the completion of all degree programs and that these requirements are clearly listed in the college catalog. Like most California community colleges, the College allows students to choose from a locally established general education pattern or the CSU Breadth and IGETC patterns (systemwide transferable general education patterns) based on the students' educational goals. Additionally, the College has an established policy (BP 4025) that formalizes its philosophy on general education. The College uses faculty expertise in its established curriculum-approval process to evaluate the appropriateness of all courses to be included in the general education curriculum. General education learning outcomes have been established by the College. (II.A.12)

The College offers a variety of vocational (CTE) certificates and degrees, all of which follow the College's established curriculum-approval process. Students can complete CTE programs in health science, business, technology and aviation, visual and performing arts, and child development. These programs rely on faculty expertise and industry advisory boards to ensure that program requirements adequately prepare students for employment. Graduates of these programs demonstrate competencies by entering into employment with a higher than 50 percent employment rate. In the case of programs that require external licensure, the College has established programs that successfully prepare students to meet these requirements. This includes the Verdugo Fire Academy in which graduates earn a Firefighter I training record and related certifications from the State Fire Marshall, and the GCC Nursing program that has had a pass rate for the National Council Licensure Exam of 88-94 percent over the last five years. (II.A.14)

All instruction programs participate in the College's established program review process, which is built upon a three-year cycle with annual updates. Through this process, program leaders reflect on student attainment of learning outcomes. In addition, all courses and programs are reviewed at least once every five years to ensure relevance. Although infrequent, the College has established policies related to program discontinuation and has worked to minimize the impact on students when programs have been discontinued or significantly modified. (II.A.15, II.A.16)

Conclusions

The team concludes that the College has established an effective and student-centered array of academic programs and support services. The College uses established policies and practices to regularly review and update curriculum to ensure adequacy in meeting student needs. Also, the College sustains comprehensive learning support and student support programs and regularly evaluates and modifies these programs to meet student needs. The College engages in dialogue about student learning, student achievement and its processes for evaluation and plans for improvement and shows evidence of a culture and practices that support continuous improvement of educational quality and a focus on improving student outcomes. Although many academic programs and services appear to be sound, the College indicated through its plans and through the Quality Focus Essay that there is improvement needed in the communication and integration of assessment results.

The College meets Standard II.A and Eligibility Requirements 9, 10, 11, and 12

Recommendations to Meet Standard

None

Recommendations for Improvement

See Recommendation 4.

Standard II.B – Library and Learning Support

General Observations

The Verdugo Campus library, the Garfield Campus library, and labs at both the Garfield and Verdugo Campuses are learning environments that provide walk-in and curriculum-integrated programs that directly offer a range of print and electronic media, academic lab facilities, and support and reference staff. They provide instruction and drop-in computer lab support as well as tutoring and learning support services that support student success.

Findings and Evidence

There is one main library, a satellite library, and seventeen labs or centers to support educational programs and student learning.

The Verdugo Campus library is open 60 hours per week, offering 62 computers for student use, extensive print and e-resource collections, a variety of spaces for student studying and collaboration, and consultation with librarians in person, by phone, through online chat, or email. In addition to orientations to the library, seven different information competency workshops are offered throughout the semester in the library, and two credit-bearing courses are offered. A smaller library on the Garfield Campus is open 32 hours per week, offering instruction to students in non-credit courses, three computers, and print material collection. Additionally, the library offers 24/7 resources to all students through its website. A recent “re-visioning” following a major materials deaccessioning project has resulted in improvement in space utilization in the library better suited to student needs. The team found the library to be warm, welcoming, bright, well-used and well-regarded by students. This finding was confirmed by student surveys from 2012 and 2014.

There are six full-time librarians, supplemented with adjunct librarians for a total of 10.7 FTES, two classified managers, and 5.65 FTES classified staff. Recent staffing changes have created a dedicated librarian at the non-credit Garfield Campus who also works on collection development for both campuses.

Learning support services are extensive and spread throughout both campuses. Some labs offer space, materials, computer hardware and software, and lab supervision for students, while other labs include those elements as well as providing direct instruction via faculty, aides, tutors or other personnel.

A tutoring center, located within the Learning Center, offers in-person tutoring in most subjects. The Learning Center coordinator conducts training for tutors, for this lab and some others. In addition to tutoring from within labs, students can get online tutoring at any time through Smarthinking, a private tutoring agency. Peer-led workshops are available through the Supplemental Instruction program, supporting a number of different courses in different disciplines. Disciplines supported by the various labs include architecture, biology, CAD/CAM, computer science, ESL, English, media arts, music, nursing, photography, physics, robotics, and visual arts. Further, the High Tech Center is a lab that supports disabled students, which is adjacent to the Instructional Assistance Center which houses tutors, learning specialists, assessment within the Disabled Student Programs and Services. (II.B.1)

Materials and equipment are selected with faculty and staff input, and based on student needs and opinions assessed by surveys. As evidenced by both the site visit and the library's program reviews, the collection includes carefully selected new materials chosen with faculty input, and existing materials are reviewed for currency and usefulness. A recently initiated, extensive and carefully planned weeding project is well underway and will create more collection development opportunities. Learning support labs and centers offer course-specific software or equipment, as well as trained personnel to assist students, and those who provide instruction are overseen by discipline faculty and staff, who review and select materials. Although the College has addressed this Standard by providing sufficient support services to students, the effectiveness of these services could be improved. Because there are so many labs and services across the campuses, there would seem to be opportunities for shared resources and ideas about practices (such as assessment of student learning within labs), professional exchanges, and even practical suggestions for operational efficiencies. For instance, tutors are trained at each lab individually and differently, and there may be opportunities for tutors throughout the college to have the same, or expanded training, or even cross-training. (II.B.2)

The library and other learning support services complete program reviews as part of the College's 3-year cycle of Program Review. The services of the library and other learning support services are evaluated through this process as well as through student and faculty surveys, usage statistics, workshop evaluations and tutor logs. Improvements in training, facilities, staffing, equipment, and resources are planned based on these evaluations. Student awareness of and satisfaction from use of the library is assessed in institutional student surveys. Program-level student learning outcomes for the library are currently under review to better align with institutional student learning outcomes. The team examined multiple user survey results from students and faculty that support a positive evaluation of how the library services meet the needs of users; however, the team observed that the library has not recently assessed its program-level outcomes and such an assessment would prove valuable to a deeper understanding of how student learning needs can be met. (II.B.3)

The library assesses student achievement in its credit-bearing courses. Evidence was found on the library website, not in this section of the ISER, of a longitudinal study of positive student achievement in these courses from 2007-2013; it would be valuable to have this data updated for 2016.

The Learning Center makes use of tutor logs, student surveys, and workshop evaluations to modify workshops for students and training for tutors. Labs associated with academic disciplines track usage but do not yet assess data for impact on student achievement except for the Math Discovery Center (MDC), which has compared students who use the MDC to students who do not. This comparison has demonstrated a positive impact on student achievement for those students using its model. Although the College provides sufficient support services to students, the effectiveness of these services could be improved following an assessment of student learning within each of the labs. (II.B.3)

The Library, as well as other college labs, document formal agreements with other institutions or sources of services and resources responsibly, and evaluates services. The College's Information

Technology, Security Services and Facilities coordinate to provide effective maintenance and security for the Library and other learning support services, equipment and facilities. The College provides, through ownership or contractual agreement, specific long term access to sufficient information and learning support services adequate for its mission and instructional programs in whatever format whenever and wherever they are offered. The team verified that formal agreements were in place and current. (II.B.4, ER 17)

Conclusions

The team concludes that the College provides comprehensive and effective library and learning support programs, services and facilities, all of which welcome and engage students in learning.

These programs include the instruction-based learning support services, multiple computer labs, collaborative and group study learning environments, peer and professional tutorial programs, research instruction workshops and varied facilities to support the College's student learning outcomes and student success.

While facility usage is tracked by student log-in to each facility and student satisfaction is assessed by campus-wide surveys, connections between these services (in the library and the various learning support services) and student achievement are not as evident as they could be.

The Library has demonstrated admirable vision to improve the physical space of the library to best serve the changing needs of students using library facilities, resources, and staff.

The College has established appropriate support for online learners with the provision of online tutoring for many different disciplines, reflecting Standard II.B.1 "regardless of location or means of delivery, including distance education and correspondence education."

The College meets Standard II.B and Eligibility Requirement 17.

Recommendations to Meet Standard

None.

Recommendations for Improvement

Recommendation 5

In order to increase effectiveness, the team recommends that the College assess the effectiveness of its current decentralized approach to student support labs and tutorial coverage and utilize the results to implement change as appropriate. (II.B.2)

Standard II.C – Student Support Services

General Observations

The College provides an array of student support services to its diverse student population. The College has implemented a variety of initiatives to improve access to services at the Garfield and Verdugo campuses.

Sufficient evidence was presented to verify that the College engages in evaluation and assessment of services. However, in the case of surveys, results are presented but there is little reflection on how effective the services are. The Self-Evaluation Report identifies areas of improvement that suggest that the College is engaged in continuous quality improvement.

Particularly strong was the response to Standard II.C.4 in which student engagement activities are well-described and specific evidence, including lists of co-curricular, athletics and student governance, are included.

Findings and Evidence

The College offers an array of student support services to students at its Verdugo campus as well as similar, but sometimes limited, services at the Garfield campus. Select services are also available online. Services provided at all locations include matriculation (orientation/assessment/counseling), admissions & records, counseling, DSPP, library, Job Placement, Assessment, Bookstore, and Tutoring. In limited capacity at some sites are: financial aid, student health services, student government and study abroad, as well as various population-specific programs (Veterans Resource Center, DSPP, EOPS, CARE, CalWORKs, etc.).

Student support services are evaluated using four primary methods: Student Services Learning Outcomes (SSLOs) assessment cycle, Student Equity Plan, Student Services Master Plan and Program Review. The office of Research, Planning and Grants conducts annual student surveys that are also included in the program review.

In addition to satisfaction surveys, Student Services assesses how their programs meet the objectives, goals, and mission of the College, whether students recognize and use the services, and if there is evidence of success. An example of improvements made as a result of Student Satisfaction survey is an enhanced New Student Orientation with updated animated videos. Also, as a result of the conducting the self-evaluation, access to support services such as DSPP, career counseling, and academic counseling have improved at the Garfield campus.

The Program Review Committee reported that 100 percent of Student Services programs and services have submitted completed assessment cycles, and have developed improvement plans as part of the SSLO process. The College supports its mission statement by providing an array of student support services to its diverse student population that fosters student learning and engagement. (II.C.1, II.C.2, ER 15)

The College offers comprehensive student services. To meet ER 15, these services foster student learning and development within the context of the College mission. In response to the SSSP and SEP Initiatives, efforts have been made to improve services and to address gaps that impact

students' abilities to succeed. Examples of recent efforts to improve access to services include: online "virtual" campus tour, placement testing at high school sites, animated online orientation, cohesive delivery of services, and increased levels of services at the Garfield campus. (II.C.3, ER 15)

The team determined that the College offers comprehensive co-curricular and athletic programs that contribute to student engagement outside of the classroom and further support the College's mission. Examples include more than 40 clubs and organizations, over 1,000 students participating in volunteer service learning, and about 300 student athletes participating in 16 intercollegiate athletic teams. The team confirmed, through an examination of Athletic Department policies, Club and Organization charters and constitutions, that the co-curricular and athletic programs offered to students at the College are conducted with sound educational policy and standards of integrity. In addition, the Student Affairs office has oversight of the Associated Students of Glendale Community College (ASGCC) and its six standing committees. ASGCC Officers are required to serve in at least two of the College's 31 governance committees. The team interviews with student leaders confirmed the active participation in all committees. (II.C.4)

The College has highly qualified counselors; a number of them speak one or more languages in addition to English including: Arabic, Armenian, French, Farsi, Italian, Portuguese, Russian, Korean and Spanish. Counseling services are provided in a wide range of delivery methods (e.g., individual appointment, group appointments, evening hours, etc.), and workshops are provided covering career exploration, financial aid application, math preparation, to name a few. Counselors attend monthly information meetings, and attend workshops and conferences to ensure they remain current in their field. Although the College's distance education program has been modest in size up to the point of the team's visit, the College's interest in expanding DE programs should be accompanied by an effort to develop and provide online counseling services. Student satisfaction surveys indicated that 66 percent of students were satisfied by the counseling services. However, the surveys also revealed the need for the College to reduce the wait time for counseling appointments. (II.C.5)

In accordance with Eligibility Requirement 16, the College has an admission's policy consistent with its mission as outlined in Board Policy 5010, Admissions and Current Enrollment and Administrative Regulation 5010, Admissions. (ER 16)

The College defines pathways to student completion and transfer goals and publishes this information in the catalog and through its website. The College admits students through an online application process using PeopleSoft and through in-person applications. (II.C.6, ER 16)

The College uses placement instruments approved and validated by the California Community College Chancellor's Office. Placement instruments, along with multiple measures, are used to place students into course sequences. All instruments are validated by the office of Research, Planning and Grants, and the instructional divisions, which includes an analysis for disproportionate impact. The data analysis led to changes in placement test's cut-scores in Math. Conversations among Math faculty and the review of research studies led to the adoption of multiple measures. (II.C.7)

The College follows Board Policy BP 3310: Retention and Destruction of Records, and AR 3310: Records Retention and Destruction, to secure and maintain student records. The security of student information is maintained by Admissions and Records and Information Technology Services. Electronic images are stored securely to ensure security and redundancy.

The College follows Family Education Rights and Privacy Act (FERPA) requirements, which requires a student's permission to release educational records to third parties. The College identified the need to formally train staff and faculty about confidentiality and FERPA regulations. (II.C.8)

Conclusions

The team concludes that the College provides student-centered and effective support services and programs. The College has demonstrated a commitment to providing a supportive learning environment for all of its students, evidenced by excellent services at both its Verdugo and Garfield campuses. Accordingly, the College has continued to look forward in identifying ways to improve services and support for students.

The College meets Standard II.C and Eligibility Requirements 15 and 16.

Recommendations to Meet Standard

None

Recommendations for Improvement

Recommendation 6

In order to improve effectiveness, the team recommends that the College provide access to online counseling for students and identify methods to reduce wait time for counseling appointments. (II.C.5)

STANDARD III RESOURCES

Standard III.A: Human Resources

General Observations

The Self-Evaluation Report for this Standard is complete and well-written, and overall, in the responses to Standard IIIA, policies and processes are well-defined and specific. The report identifies areas of improvement that suggest the College is engaged in continuous quality improvement. During the College visit, human resources personnel were helpful and provided additional evidence as requested. Policies and processes seem clear and the College's plans for improvement indicate a focus on continuous quality improvement.

Of particular note is the discussion of professional development where development opportunities are well-described and specific evidence including lists of development opportunities are cited. (III.A.14)

Findings and Evidence

The team found that employees are qualified by appropriate education, training, and experience to provide and support the institution's programs and services. Four Administrative Regulations (AR 7120, AR 7121, AR 7250, AR 7123) delineate hiring procedures for faculty, adjunct faculty, administrators, and classified employees.

Requests for positions are generated through the program review process. Requests must support the need to meet the institutional mission and must relate to the Educational Master Plan as well as to program needs. Position requests are reviewed and prioritized by one of three committees: the Classified Hiring Allocation Committee, the Instructional Hiring Allocation Committee, or the Student Services Hiring Allocation Committee. When a position has been approved for hiring, the human resources department forwards a draft announcement to the department chair or the administrator or manager within whose area the position is located. These personnel review position descriptions for accuracy and currency. The Academic Senate president reviews announcements for full-time faculty positions.

Faculty are actively involved in the selection of new faculty. The Academic Senate has one representative, and there are three - five other faculty on hiring committees. For instructional faculty, there is a College Services representative, and for College Services positions, there is an instructional faculty representative. Position announcements are posted to the College Human Resources webpage, and are emailed to the College community. They are also posted on sites such as Monster.com, the Registry, diversity sites, and disciplines sites.

The College verifies qualifications of applicants and newly hired personnel. The hiring committee chair checks references of applicants. The College requires applicants with degrees from non-U.S. institutions to verify the equivalency of degrees with those offered by United States institutions as required by Board Policy and Administrative Regulation 7131. A memorandum of understanding between the District and the Glendale Community College

Faculty Guild articulates that faculty who teach in the distance education mode will have completed either the At-one training or in-house training. (III.A.1)

Faculty job announcements and descriptions articulate the appropriate degrees and experience criteria, including knowledge of subject matter and other requisite skills. Job announcements address the development and review of curriculum as well as assessment of learning. During the team's campus visit, the College provided samples of job announcements for faculty positions recruited in 2015 – 2016. Descriptions provide basic information on requisite skills for faculty. Additionally, job announcements inform candidates that courses may be offered in either hybrid or online format and that candidates need to show experience teaching courses online using a learning management system such as Moodle or Canvas. The College adheres to the minimum qualifications set by the California Community College Chancellor's office. The applicant screening process helps determine that faculty selected for hire will have the knowledge appropriate to their subject matter. (III.A.2, ER14)

Job descriptions state the qualifications for administrators and others who are responsible for educational programs and services. The College Catalog lists the names and degrees of these personnel.

The Release Time Extra Pay Committee reviews requests for released time/extra pay positions for faculty assignments to fulfill programmatic and/or institutional needs of the College to assure that such requests address project or program outcomes in the justification for the positions. (III.A.3)

The College informs applicants that they must provide documentation that degrees from non-U.S. institutions are equivalent to those from Accredited Institutions of Postsecondary Education. (III.A.4)

Clearly defined processes are in place for evaluation of all personnel. The team confirmed that since July 2016, the College has reduced the backlog of uncompleted evaluations, particularly for the administrative/managers group. However, completion rates for evaluations of adjunct faculty are not determined. While AR 7221, Faculty Evaluation and Tenure Review Process, states the requirements for completion of evaluations for adjunct faculty, the visiting team could not verify that evaluations are completed as intended. The College is moving to a comprehensive, automated performance tracking system in order to address concerns with timely completion of evaluations for all employees. (III.A.5)

The College states "the evaluation forms for all employees directly responsible for SLOs indicate their effectiveness in student learning" [REF III.A.6-2] and also states "evaluators may review submitted SLOs and provide feedback on the employee's evaluation on how well they have completed the SLO cycle" [REF III.A. 6-6]. The collective bargaining agreement between the Glendale Community College District and the Glendale Community College Guild states that "Assessing student learning outcomes (SLO's) and reporting the results are part of the obligations of all instructors, including adjunct instructors." This collective bargaining agreement was updated with a memorandum of understanding in April 2015, and the evaluation forms were agreed upon as part of that process. (III.A.6)

The Self-Evaluation Report indicates evaluation forms for classroom faculty, librarians, counselors, and division chairs address assessment of learning outcomes in “Evidence of Student Learning” sections. Administrative Regulation 7151 includes an evaluation criterion on “use of results of assessment of learning outcomes to improve teaching, learning, and/or institutional effectiveness, success and meeting goals and objectives.” Further, the self-evaluation component of this process calls for the manager/administrator to report on his or her “role in improving teaching, learning, and/or institutional effectiveness.” (III.A.6)

The forms for evaluating faculty, counselors and librarians mention learning outcomes. The forms do have an item asking if the faculty, counselor or librarian being evaluated engages in an assessment cycle. The classroom faculty evaluation form, for example, asks whether the faculty member “assesses student success and responds appropriately to the information gathered” [REF III.A.6-4] but this language, along with the similar language in the forms for evaluating counselors and librarians, is not specific to the language and intent of the Standard. During the site visit, the human resources staff provided copies of faculty evaluations for five faculty members. The sample group included completed evaluations from all groups (instructional, counseling, library, tenure-track, tenured, and adjunct). Team members could not find clear evidence that the evaluation process addresses use of results of assessment of learning outcomes to improve teaching, learning, and/or institutional effectiveness. In contrast, the evaluation form for division chairs provides a good example of meeting the standard. It includes specific references to SLOs / PLOs. Also there is a new evaluation process for academic administrators and classified managers effective 2016-17, including new evaluation forms. While the College has made many strides toward meeting this Standard, a careful review of evidence suggests there is room for improvement. (III.A.6)

The College states it has a sufficient number of qualified part-time and full-time faculty members to assure that the quality of the institution’s educational programs and services is in place to achieve the College’s mission and purposes. Factors the College uses to determine faculty adequacy are enrollment management data, the Faculty Obligation Number as provided by the Chancellor’s Office, institutional planning, and program review. Forecasting staffing needs for faculty is grounded in the program review process. Procedures for faculty hiring are articulated in the Instructional Hiring Allocation Committee Manual (2013). The College concludes that its level of faculty staffing is above average from looking at both the percentage of employees who are faculty members and the ratio of student enrollments to faculty members. The College states that it has a strong student-to-faculty ratio, meaning fewer students served by each faculty member, which it cites a strength. However, the report also states “that instruction and services rely on a greater proportion of part-time faculty than the average for these single-college districts.” There is a trend since 2009 in increased reliance on part-time faculty, according to Table III.A.4. The College has set a goal to develop methods for using data to determine appropriate staffing levels by fall 2017. (III.A.7, ER 14)

Adjunct faculty seem to be integrated effectively into the life of the College. Adjunct faculty are active participants in the Academic Senate. Further, adjunct faculty participate regularly in professional development activities and serve as workshop presenters. The College has a high regard for adjunct faculty. Evidence of this is the action of the Campus Executive Committee, on

recommendation of the Academic Senate to issue this statement on November 10, 2015: “Glendale Community College recognizes the significant contribution and value that adjunct faculty bring to the College and welcomes and encourages their participation in all capacities for which their experience and education qualify them.” (III.A.8)

The College plans to develop methods for using data to determine appropriate staffing levels by fall 2017. (Changes and Plans Arising out of the Self-evaluation Process). The Classified Hiring Allocation Committee reviews and ranks requests for classified positions which have come forward from the program review process. The College Executive Committee then reviews position requests.

Currently, the College relies on comparative data on levels of staff provided by the Chancellor’s Office. Given these data, the College has concluded that its ratio of full-time equivalent students divided by the number of FTE classified staff indicates that their staffing is relatively high when enrollments are taken into account. (III.A.9, ER 8)

The number of administrators is based on college needs, the budget, program review, the Educational Master Plan and other plans. Comparisons with levels of staffing among similar colleges in the region indicate that the College’s administrative staffing levels are relatively high. The College has identified a goal to develop methods for using data to determine appropriate staffing levels by fall 2017. (Changes and Plans Arising out of the Self-evaluation Process). The College adheres to the “Minimum Qualifications for Faculty and Administrators in California Community Colleges” to assure administrative personnel have appropriate preparation and expertise. (III.A.10, ER 8)

The College has established written personnel policies and procedures that are made available on the College website. Board Policies and Administrative Regulations are scheduled for regular review and revision. The Human Resources Office recommends new board policies and administrative regulations to the Administrative Affairs Committee. The Equal Employment Opportunity (EEO) Advisory Committee is tasked with ensuring fairness and equitable treatment of all applicants and employees in compliance with federal/state laws, Board Policies and hiring procedures. The College has had fifteen complaints in 2014 and fourteen complaints in 2015. The process of analysis of such complaints is not clear. Visiting team members were able to review some of these complaints but could not verify any information beyond the receipt of the complaint.

Board policies and administrative regulations are posted on the College website. The College is in the process of securing a “New tracking system for employee complaints, student complaints, union grievances, and better monitor and ensure matters are resolved fairly and equitably.” The College is encouraged to pursue this goal as it will assure complaints against the institution are resolved fairly and equitably. (III.A.11)

The College analyzes data regarding its employment diversity regularly by reviewing data on gender and ethnicity (noting that Armenian employees are included in the White category). Board Policy 7100, Commitment to Diversity, states the commitment of the College to

recognizing diversity in the College. Accordingly, the College aligns its professional development processes to the institutional learning outcome - the College's Global Awareness and Appreciation. Professional development programs and events, such as the Cultural Diversity Lecture Series, celebration of Women's History Month, Black History Month, Armenian Remembrance Week, support the rich diversity of the College community. In addition, the Diversity Task Force, a subcommittee of the Equal Employment Opportunity Advisory Committee, developed a diversity plan that is included in the College's EEO Plan. The EEO Advisory Committee provides programs that support diversity in employment. (III.A.12)

The College has written codes of professional ethics for all personnel which are posted on the College website. Administrative Regulation 3050, Conflict of Interest Code, and Board Policy 3050, Employee Code of Conduct and Conflict of Interest, define professional behavior required on and off campus for all employees. Board Policy 2715, Ethical Responsibilities of the Board of Trustees, articulates expectations for the Board of Trustees. Consequences for violations are addressed in Administrative Regulation 7365, Discipline Procedures, and Administrative Regulation 7362, Dismissal/Suspension/Disciplinary Action. The College is in the process of creating consequences for violation of its code of ethics (Changes and Plans Arising out of the Self-evaluation Process). (III.A.13)

The College supports a robust professional development program for its employees. The College dedicates significant resources for professional development. Having evaluated and identified the need for more focus on classified staff development, the College created released-time positions, one for faculty development and one for classified development. The superintendent/president oversees professional development for administration and management. The July 2014 – June 2015 – Staff Development Workshop Offerings Report includes activities that address learning and assessment and indicate institutional dialogue about student learning and student achievement. The Two-Year Staff Development Plan, 2014 – 2016 calls for professional development throughout the College. For faculty, development related to dialogue about student learning and achievement is addressed in Goal 1: "Provide professional development to help faculty incorporate new pedagogical practices into the classroom which is indexed to IMP items 124 and 185." Other faculty professional development goals address uses of College processes such as the SLO database and training in curriculum process as well as faculty leadership training. During the College visit, the human resources department provided evidence of evaluation of classified professional development workshops. As a measure of the commitment to continuous improvement, the College plans to develop regular systems for evaluating professional development activities with an implementation timeline of spring 2017.

The College has identified Changes and Plans Arising out of the Self-evaluation Process. One of these plans is to "develop regular systems for evaluating professional development activities" with an implementation timeline of spring 2017. The team encourages the College to advance its clear commitment to on-going professional development by creating a new plan before the Two-Year Staff Development Plan, 2014-2016, expires. (III.A.14)

The College has measures in place that assure the security and confidentiality of personnel records. Employees have access to their personnel records. (III.A.15)

Conclusions

The College meets the Standard and Eligibility Requirements 8 and 14.

Recommendations to Meet Standard

None.

Recommendations for Improvement

Recommendation 7

In order to increase effectiveness, the team recommends that the College develop a method for identifying, completing, and tracking timely evaluations of adjunct faculty. (III.A.5)

Recommendation 8

In order to increase effectiveness, the team recommends that the College revise the evaluation forms for faculty, counselors, and librarians to more clearly and effectively demonstrate that the results of the assessment of learning outcomes are used to improve teaching and learning. (III.A.6)

Standard III.B: Physical Resources

General Observations

The Self-Evaluation Report for this Standard is complete and well-written, and policies and processes are well-defined and specific. During the team visit, college personnel were engaging and provided helpful supplemental information. The College's plans for improvement indicate a focus on continuous quality improvement.

The College has three primary locations - the Verdugo Campus, the Garfield Campus, and the Professional Development Center. It also offers a small number of classes at different facilities and at one permanent site, the Bahia de Los Angeles Field Station. (II.B.1)

The Facilities Master Plan, revised in 2015, is linked to the Educational Master Plan and the College's mission. The Facilities Master Plan, along with having strong linkages to the Educational Master Plan, guides planning for construction, acquisition, maintenance, upgrading, and renovation of facilities. Other plans, such as the Energy Conservation and Modernization Plan and the Facilities Management Five-Year Construction Plan, which are based on the capacity-load ratio, also detail the College's work to ensure safe and sufficient physical resources. To assure that long-range needs for facilities are met, the College addresses the total cost of ownership for new facilities and equipment as evidenced in Energy Modernization Project and the Facilities Index. (III.B.2)

The College has received funds from a variety of sources such as the Measure G Fund, the Proposition 39 Fund; Federal Title III Hispanic Serving Institution Science, Technology, Engineering, and Mathematics (STEM) Grants, and the Associate Student Government in its effort to "develop and maintain high-quality physical resources in order to provide a positive environment to support excellence in instruction and learning." Utilizing its funding sources, the College has completed a variety of capital projects since the last accreditation, including improvements to the infrastructure of the College's existing Data Center and a renovation of the San Rafael Third Floor (III.B.3, III.B.4)

The College names "improving physical access to facilities" as an "ongoing concern." The Campus Development Committee is charged with assessing the safety and sufficiency of college physical resources. The ADA Ad-hoc Group is a task force of this committee. Their work is complemented by the College's risk management program, the Safety Committee, and the College Police. (III.B.1)

Findings and Evidence

The College assures safe, secure and accessible physical resources at all locations where it offers courses, programs, and learning support services. This assurance is reflected in the Facilities Master Plan's Planning Principle 6 speaking to a "Safe and Secure Campus" and the high student survey ratings from spring 2015. According to that survey, students feel safe on campus. Eighty-three percent of credit students rated their safety on campus as "excellent" or "good" and ninety-three percent of noncredit students rated safety on campus as "excellent" or "good." In addition to its ADA Ad-hoc Group, which monitors the College's compliance with Americans with Disabilities Act requirements, experts are brought in during construction to ensure

compliance with laws and codes and regulations of the state. The Risk Manager, contracted by the Alliance of Schools for Cooperative Insurance Programs (ASCIP), ensures compliance with federal and state laws regarding safety. Moreover, the College has a Safety Committee and a police department as well as a National Incident Management System (NIMS) plan as mandated by federal and state agencies. A review of its recently implemented emergency procedures suggests they are clear and thorough. (III.B.1)

The College is committed to constructing and maintaining facilities that support a healthful environment. Most recently, the College passed Board Policy 3570: Smoking Policy to assure its facilities are smoke-free. The Environmental Affairs Committee, a subcommittee of Administrative Affairs, is charged with raising campus awareness of issues surrounding sustainability and supporting such practices throughout the College, including facilities. Information from the Environmental Affairs Committee is routed to Administrative Affairs and the College Executive Committee per the College's governance process, therefore reflecting its commitment to prioritizing a healthy environment and sustainability. The Energy Conservation and Modernization Plan addresses sustainability concerns as well. The College's commitment to sustainability was recognized when it received an "Honorable Mention" from the California Community College Board of Governors. (III.B.1, III.B.2, III.B.3)

Through its plans and processes, the College maintains its physical resources, assuring the effective utilization and continuing quality necessary to support its programs and services, thereby achieving its mission and supporting innovation. As mentioned above, the Energy Conservation and Modernization Plan addresses the problems of aging infrastructure while propelling innovative solutions that support sustainability. The Facilities Management Five-Year Construction Plan addresses the needs of aging building and equipment, containing a Projects Priority Order list to which the College adheres. The Facilities Index serves as an effective tool for managing and tracking personnel needs and maintenance, which is the responsibility of the Facilities Department. (III.B.2, III.B.3)

Notable is the College's innovative, student-centered use of space on its campuses, reflecting a detailed and effective approach to planning and maintenance. The focus on student learning is evident in the Facilities Program Review 2015-2016, which identifies "learning support" as a component of the mission. The Facilities Department program mission describes its commitment to "providing and maintaining the physical place where learning is supported," claiming its goal is to "keep Glendale Community College in a condition conducive to learning and one that gains respect from the community." This goal is reflected in The Facilities Master Plan, which contains an impressive analysis of the College's space needs as well as a description of secondary effects. The detailed analysis of space needs is also captured in the Planning Data Template. Throughout the campuses, the use of space reflects the College's commitment to students and learning. For example, a facilities project that responds to student learning data and institutional improvements is the library public services redesign project, which will more effectively support student learning and studying. Among the many redesigned spaces and resources, the plan calls for creation of collaborative workspaces. This project made use of HSI STEM grant resources to identify student needs and to provide data in support of proposed changes. (III.B.2, III.B.3)

The College's long-range capital plans support institutional improvement goals and reflect projections of the total cost of ownership of new facilities and equipment. The Facilities Department's program review containing requests for staffing and other resources is vetted through the College's governance processes, then considered and ranked by the Budget Committee. Facilities Master Plan Principle 9 specifically speaks to planning for total cost of ownership. The College determines the total cost of ownership through applying the Facilities Index indicators. The Energy Conservation and Modernization Plan helps assure savings that partially support efforts to meet total cost of ownership. (III.B.4)

Conclusions

The College meets Standard III.B.

Recommendations to Meet Standard

None.

Recommendations for Improvement

None.

Standard III.C: Technology Resources

General Observations

The College's technology infrastructure is overseen by the Campus Computer Coordinating Committee (4Cs), which is tasked with developing the 5-year Technology Master Plan (TMP), prioritizing technology related resource requests identified through program reviews, and drafting computer and technology related policies. The Committee is comprised of 17 voting members with representation from Senate, Guild, Joint Faculty, CSEA, and Administration.

The infrastructure at the Verdugo Campus is maintained by 22 classified positions within the Information and Technology Services department (ITS), and is led by the Chief Information Services Officer (CISO). Together the department supports and maintains approximately 2,300 computers, 240 wireless access points, a modern data center that houses roughly 125 servers with zero downtime, and all of the College's mission critical software applications. These applications include Oracle E-Business, PeopleSoft, Moodle, and Exchange email. The department also ensures that every classroom meets a minimum technology standard of a computer, data projector, and screen.

The current CISO was brought in three years ago (fall 2013) at a time when technology resources were not meeting or just barely meeting the needs of the campus. There were many turnovers at all levels of the ITS organization. The 2007-2012 TMP had been stale for almost two years, critical systems, software, and equipment were not being effectively updated and maintained, and the campus lacked the leadership necessary to change directions. Within a year of the new CISO starting, the College had developed and implemented its 2014-2019 TMP and was gaining momentum in mitigating and remedying the vast array of infrastructure risks and failures. Moreover, through attrition, automation, workload balancing, ITS has been reorganized from an outdated, inefficient, application-driven department into a leaner, more collaborative, user-driven team.

The College's two satellite locations, the Garfield Campus and the Professional Development Center (PDC), are supported by decentralized ITS staff organized under the respective management structures in place at each location. The Garfield Campus is well equipped, managed, and maintained, with 30 classrooms and over 400 computers. The ITS supervisor is an active, voting member of the 4Cs who frequently collaborates with the CISO. The PDC location in Montrose was not visited by the team, but according to the Self-Evaluation Report, its three classrooms and six offices are equipped with approximately 80 desktop computers and two mobile laptop carts.

The College is also committed to supporting the use of its technology resources and provides a multitude of resources for students, faculty, and staff to receive technical support, specialized training, and professional development on the use of technology both in the office and the classroom.

Findings and Evidence

The team finds that the College effectively utilizes its 2014-2019 Technology Master Plan (TMP) to continuously assess, maintain, and replace its technology resources. Based upon an

inspection of the 2015 TMP project listing update, 2010-2016 4Cs meeting minutes, 2013-2017 ITS budgets, and interviews with ITS personnel, the team finds that the TMP is a living framework that is constantly updated as projects receive funding, are completed, and as new projects are identified. The TMP serves as a single point for programs and services to make technology resource requests; as of 2015 the TMP was tracking 122 projects, with the value of funded projects exceeding \$3.5M. This level of planning, project management, and funding has enabled the College to ensure that its technology infrastructure and technical services appropriately and adequately support its mission, operations, programs, and services. (III.C.1, III.C.2)

The team also finds that customer satisfaction with technology resources has improved since 2013. The spring 2015 Student Survey indicates that since 2011 the availability of online classes, quality of computer labs, and quality of technology are improving. Additionally, all measures on the fall 2015 Faculty and Staff Survey reflect a significant improvement, in most cases 20 percent or more to satisfaction ratings greater than 80 percent, since 2013. (III.C.1, III.C.2, III.C.3, III.C.4)

Additionally, based on tours of classrooms and computer labs at both the Verdugo and Garfield Campuses, a tour of the ITS Data Center, and a review of the PDC website, the team finds that the College's decentralized ITS function assures that technology resources at its three instructional locations, excluding the Baja Field Station which was not visited, are implemented and maintained to assure reliable access, safety, and security. According to 4Cs charter and 2007-2012 TMP, the 4Cs is responsible for developing and updating the College's disaster recovery, business continuity, computer replacement, and data security policies and plans. The ITS functions at each location have the responsibility for administering and executing those policies and plans to include systematic user password updates, firewalls, filtering software, software updates, data center security, uninterruptable power supplies or backup generators, and performing scheduled maintenance on computer equipment. (III.C.1, III.C.2, III.C.3)

Lastly, the team finds that the College has adequate policies and procedures that guide the appropriate use of technology in the teaching and learning processes, and provides appropriate instruction and training for all users of its technology resources. After reviewing the relevant policies and procedures, the team finds that the use of the College's technology resources is governed by Administrative Regulation 3720, Using Information Technology Resources at Glendale Community College and Administrative Regulation 3725, College Website. Further clarification and elaboration of these regulations are provided to users through various policies and guidelines developed and maintained by the 4Cs and posted on the College website, such as the ITS Security Policy, ITS Service Level Agreement, Student Guidelines for the Use of IT Resources, and Student Email Policy. Users with questions on the appropriate use of technology resources or who need technical support can contact the ITS Help Desk either online or in person. Moreover, based on interviews with various college personnel, the team finds that the College offers support, training, and professional development for students, faculty, and staff through a variety of channels, such as support for students with disabilities at the High Technology Center and Center for Students with Disabilities, the Staff Development Center, the Faculty Innovation Center for instruction and support with Moodle, the Online Wired Learning Academy for faculty teaching distance education, and the Library. The College also utilizes a

Web Oversight Committee to govern its website and the Committee on Distance Education, which provides governance and support for the College's online and hybrid courses. (III.C.4, III.C.5)

Conclusions

The College meets Standard III.C.

Recommendations to Meet Standard

None.

Recommendations for Improvement

None.

Standard III.D: Financial Resources

General Observations

The College completed its 2016-2017 budget for general funds in accordance with its AR6200 The District's Budget. The previous year's budget is used as baseline which can be decreased through resource reallocations or increased through resource requests. The Budget Reallocation Committee is a subset of the Budget Committee, and it is tasked with reviewing all accounts with a prior annual budget of \$6,000 or more. The Committee identifies potential monies to be reallocated either for the funding of existing operations or program review resource requests. Candidates for reallocation are either programs whose funds were not used in the previous year or the result of changes in operations and services. Programs and departments are given an opportunity to use program review data to appeal the Committee's reallocation recommendations before they are submitted to the president for approval.

Resource requests may include requests for personnel, goods, or services, and are driven by the program review process. Each program or department identifies resources needed to improve their effectiveness, completes a resource request form, and submits it to the appropriate Standing Committee for prioritization, (i.e., Academic Affairs, Student Affairs, Administrative Affairs, Campus Computer Coordination, and Classified Hiring Authorization). The Standing Committees, in turn submit their prioritized list of resource requests to the Budget Committee. The Budget Committee convenes an Expanded Budget Committee meeting bringing in additional representation from the College to prioritize the requests from each Standing Committee into a single prioritized list based on how well the request supports the district's mission and the urgency of the request, (i.e., health and safety issue, legally mandated, etc.). The Committee then determines which requests will be recommended to the superintendent/president for funding based on the availability of incremental funding, which may include funding made available through resource reallocations, or other sources of funding.

Once the superintendent/president approves, the College has a budget with the goals of supporting the College's mission and improving institutional effectiveness at its core. Each department's budget is developed through input and dialogue from a representative and inclusive base of constituents from across the institution. The result is a balanced consolidated budget that has clear links to student learning and service outcomes at the departmental level.

The College's independent certified public accountant (CPA) assists the district by preparing basic financial statements annually in accordance with accounting principles generally accepted in the United States of America, as prescribed by the Governmental Accounting Standards Board (GASB). The College's financial statements are examined by its CPA, who has given unqualified or unmodified opinions of the financial statements for each fiscal year ending June 30, from 2010 through 2015. The College also submitted its annual fiscal report and independent auditor's report to the ACCJC in each year of the review period.

Additionally, the College has its CPA audit compliant with requirements that could have a direct and material effect on each major federal award program and on internal control over compliance in accordance with the U.S. Office of Management and Budget (OMB) Circular A-133 Compliance Supplement. For the years ending June 30, 2011 and 2012 the auditor found

significant deficiencies on State awards, and for the year ending June 30, 2012 the auditor issued a qualified opinion on a Federal award. Since then the College has received unmodified opinions on all Federal and State awards, and as of June 30, 2014 has implemented all of the audit recommendations.

As a result of diligence, teamwork, and prudent financial stewardship, the College successfully navigated its way through the State's budget crisis earlier this decade and the uncertain State budget environment over the last several years. Fiscal years 2012 through 2014 proved to be especially challenging because in the midst of a 20 percent decrease in enrollment and reduced State apportionments, which amounted to a combined loss of \$20M in revenues, the State deferred apportionment payments of up to \$18M. However, the College responded swiftly to mitigate the impact of the budget cuts by cancelling winter inter-sessions, instituting pay cuts, layoffs, retirement incentives and hiring freezes, and controlling discretionary expenditures. Additionally, to preserve the College's solvency across those three years it issued a total of \$43M in Tax and Revenue Anticipation Notes.

The College's nimble financial strategy allowed it to manage through the crisis with a minimal impact on programs and services directly related to students and student learning. Throughout this three-year period, student enrollment held steady at around 15,000 FTES, and although faculty and staff were reduced by approximately 50 full-time equivalents, many of these positions had previously been underutilized. Additionally, for the entire review period including these three years, the College was able to maintain a minimum unrestricted general fund reserve of at least five percent.

The College finances its operations with a number of long-term obligations. According to the notes to its financial statements, as of June 30, 2015 the district had \$78.5M outstanding on its long-term debt, consisting of both general obligation bonds and certificates of participation, the proceeds of which were used to finance various construction projects on the Verdugo campus, a \$6.8M OPEB liability, and an aggregate net pension liability of \$70.1M. The district also maintained obligations for an early retirement incentive, compensated absences, load banking, in the amounts of \$425k, \$3.4M, and \$2.2M respectively.

The College enters into a variety of purchase, supply, service, warranty, and other agreements in compliance with the regulations and procedures of the Los Angeles County Office of Education, Division of School Financial Services (LCOE SFS). Additionally, legal counsel reviews contractual agreements with external entities as appropriate prior to their approval by the Board of Trustees.

Findings and Evidence

The team finds that throughout the review period, the College clearly defined and disseminated its policies and procedures for financial planning and budgeting as evidenced by the AR6200 The District's Budget, the 2013-2017 budget presentations to the Board of Trustees, 2010-2016 Budget Committee meeting minutes, 2010-2016 Governance Annual Reports, and the fall 2015 Faculty and Staff Survey. Furthermore, the team finds that the budgetary process is grounded in the College's mission and goals, through its Annual Goals and Educational Master Plan, and the entire organization had the opportunity to participate in the financial planning processes through

a representative based model. Moreover, the team finds that the budgetary process modified in 2015 to weight the Standing Committees' priorities allocated the district's limited resources more consistently with the expectations of the College. This planning and resource allocation process emphasizes the development, maintenance, and enhancement of the College's programs and services, while retaining a focus on sound fiscal stewardship. Based on a review of the 2010 to 2017 Budget Books, which contain budget-to-actual comparisons of the general fund, the team finds that the budgets portray a realistic assessment of financial resource availability and expenditure requirements, have a high degree of credibility and accuracy, are widely disseminated across the organization both in printed and electronic formats, and that the College's budget control processes reasonably ensure that expenditures do not exceed their respective annual budgets. Lastly, based on the external performance audits completed by the district's CPA, WRD Consulting Group, and the LCOE SFS, the team finds that the district has adequate procedures and controls in place to ensure that resources are used with prudence. (III.D.1, III.D.2, III.D.3, III.D.4, III.D.5, III.D.6)

Based upon the comprehensive internal control review completed by the College's CPA in 2009, and the various performance audits described in the preceding paragraph, the team finds that, the College regularly evaluates its financial management practices and uses the results to improve its internal control systems. Additionally, the team finds that the district's responses to the 2011 and 2012 fiscal year audit findings have been addressed comprehensively and in a timely manner. Consequently, the team finds that the College has adequate internal control systems in place, is in compliance with major federal program requirements, including Title IV of the Higher Education Act, and that these compliance and control systems are regularly evaluated and assessed for validity and effectiveness, the results of which are used for continuous improvement. Moreover, based on reviewing the College's various independent audit reports, the team found that all of the College's restricted or special purpose revenues, which include general obligation bonds, certificates of participation, Follet Bookstore rent, private donations to the Glendale Community College Foundation, and extramural grants or awards, are used with integrity and in a manner consistent with their intended purposes. Lastly, the College's external auditors have found the College to be in compliance with all Title IV regulations and requirements with no material findings in its administering of federal financial aid. Furthermore, the College proactively counsels all students who request loans and diligently manages its default rate as evidenced by its exemplary 3-year official cohort rates of 9.5% and 6.6% for 2012 and 2011, respectively. (III.D.5, III.D.7, III.D.8, III.D.10, III.D.14, III.D.15)

Upon a thorough inspection of the College's books and records and audited financial statements, the team finds that, throughout the entire review period, the College has maintained an average unrestricted general fund reserve of six percent of the prior year's unrestricted general fund expenditures or \$5M, unaudited. The team also notes that the districts combined balance of cash and cash equivalents and unrestricted investments, which is readily available cash held by the County on behalf of the College, was an average of \$7.8M for the review period, but dropped below the five percent minimum or below \$4M in fiscal years 2011 and 2014. The team understands that the commission recommends that the minimum five percent catastrophic reserve be held as cash and cash equivalents to facilitate immediate access to those funds in the event of a financial emergency. However, in consideration of the fact that the College has near immediate access to up to \$5M of TRAN through the County, and readily available access to

even more, the need to hold the reserve as a liquid asset may not be necessary. The difference is a philosophical one, where one can support the merits of expending cash today to mitigate future risks almost as convincingly as one can defend reserving the cash as a buffer against unforeseen future risks. As a result, the team finds that because of the College's access to immediate short-term financing, it sufficiently meets the purpose and intent of the reserve requirement through the maintenance of its unrestricted general fund reserve balance as opposed to holding an actual reserve of cash and cash equivalents. (III.D.1, III.D.9, III.D.11, ER 18)

After reviewing the College's 2010-2015 Annual Financial Reports, the team finds that the College possesses a number of short- and long-term debt obligations. The College has the financial resources to honor all of its liabilities, except its unfunded OPEB liability, and general obligations bonds, which are funded through property tax assessments and administered directly by the County. Nevertheless, upon reviewing unaudited post-closing trial balance reports and OPEB irrevocable trust cash deposit receipts from the College's Controller, the team estimates that the College's net OPEB obligation as of June 30, 2016 to be approximately \$7M. Furthermore, the College has set aside approximately \$5.3M of cash that it will deposit into the irrevocable trust over the next two years, and has an aggressive plan to use catch-up payments and current year revenues to amortize the remaining underfunded liability over the next five years. (III.D.12, III.D.13)

The team discussed with the Executive Vice President of Administrative Services and the Controller the contractual agreements the College has with external entities, and finds that they are consistent with the mission and goals of the College, and that the College has adequate procedures to ensure those agreements contained appropriate provisions to protect the College's interests in achieving its mission. (III.D.16)

Conclusions

The College meets Standard III.D and Eligibility Requirement 18.

Recommendations to Meet Standard

None.

Recommendations for Improvement

None.

STANDARD IV LEADERSHIP AND GOVERNANCE

Standard IV.A: Decision-Making Roles and Processes

General Observations

The College's broad-based participation of college constituents is supported by Board policies that describe the process and responsibilities of the planning and decision-making committees, including pathways for the advancement of program improvement and innovative initiatives. Through the leadership of the superintendent/president, college activities are reviewed, deliberated and acted upon during a participatory-style of governance, which includes committee meetings. Communication of those actions throughout the College community seems to help ensure a transparent system for college-wide decision-making.

Particularly strong was the response to Standard IV.A.1 in which multiple examples were provided to illustrate the multiple avenues to promote excellence on campus through innovation, and through the celebration and recognition of outstanding contributions to the College with a number of annual awards.

Findings and Evidence

The participatory governance system at the College provides a pathway for decision-making and has member representation from all college constituency groups, thus providing the opportunity for open participation by all college faculty, administration, employees, and students. Standing committees review ideas for campus improvement to the College Executive Committee, chaired by the superintendent/president. The College governance system supports effective institutional planning and implementation. Budget committee minutes reflect support of faculty initiatives to make improvements to their programs and services through program review.

The College provides numerous venues to encourage ideas to promote excellence on campus, including: staff development activities, grant writing, and through the Faculty Innovation Center (FIC). The FIC is a place for faculty to discuss pedagogy and technology and to share ideas that promote innovation in the classroom. In addition, The Student Equity Plan also supports initiatives on campus to close the achievement gap. The expansion of the Student Center and the new Multicultural Center are examples of such initiatives which demonstrate the collaborative work of various constituencies.

The evidence provided affirms the effectiveness of the participatory governance structure in supporting an environment that fosters institutional excellence through multiple avenues. A faculty and staff survey, as well as the visiting team's conversations with members of the different constituency groups, provided additional evidence that the process is clear to all constituencies. (IV.A.1)

Policies and procedures supporting participation in governance activities and defining the College's decision-making roles are in place at the College. From board policy to the operational level, the College provides information and evidence of the College community being able to participate in an open dialogue and an inclusive environment for decision-making. Examples

include Board Policy 2510, Participation in Local Decision-Making, Administrative Regulation 2511, College Governance, and the committee list known as the “Blue List.” Decision-making, and Responsibilities Handbook prescribe the authority and responsibilities for Board of Trustees, college superintendent/president, administrators and faculty, as well as students in the decision-making and governance protocol. This ensures all college constituents are able to participate in the College's participatory governance process. The visit to the College confirmed the institution's long tradition and value of participatory governance among all groups. Students, in particular, articulated clear understanding of the governance process and demonstrated active participation in all committees. (IV.A.2)

The College governance committee structure consists of five standing committees: College Executive, Academic Affairs, Student Affairs, Administrative Affairs, and the Institutional Planning Coordination Committee. All of these committee report actions to the College Executive Committee. Administrators and faculty have key roles in governance as described in policy. The Integrated Planning Handbook provides a description of the integrated model linking planning to program review and resource allocation. Faculty and administrators also provide input outside of the committee structure through the planning and program review processes and through submission of annual goals and budget requests. Each area vice-president and faculty representatives exercise their voices in governance committees, thus shaping institutional policies, planning and budget. (IV.A.3)

The Curriculum Committee of the Academic Senate, and the Academic Affairs committee share responsibilities for managing the curriculum development and review processes as outlined in the Curriculum Handbook and various Board Policies and Administrative Regulation (AR) 4000 and the Mutual Gains agreement. The responsibilities outlined in the policies and procedures are implemented in practice as evidenced by sample agendas and minutes from the Curriculum and Instruction Committee. The curriculum review process includes consultation with the articulation officer, SLOs committee and the Distance Education chairs. Evidence provided to the team include procedures for faculty and administrators input and recommendations about curriculum and student learning programs and services. Through the Academic Affairs Committee, the Academic senate, its Curriculum and Instruction Committee and SLO committee, faculty and academic administrators make recommendations about curriculum and student learning programs and services. (IV.A.4)

Through open dialogue and continuous communication, the College creates opportunities for relevant perspectives utilizing the participatory governance process and the administrative decision-making processes. Board policy 2510, Administrative Regulation 2511, and procedures outlined in the Integrated Planning handbook codified the College processes and timelines for decision-making. Meetings with the leaders of different constituencies confirmed that staff, faculty and students are able to provide input and individual perspectives as well as to engage with all college areas in the development of college-based services, budgets, and relevant policies. Changes are discussed by committees as appropriate. (IV.A.5)

The College-wide distribution of information and actions resulting from the decision-making process is evidenced by the use the governance web pages, and the monthly “Governance Update.” Other communications from college leaders are disseminated through the campus

publication “Chaparral”. The superintendent/president sends the email/newsletter communication “Across the College,” to the campus and sites at least three times a year. The Associated Student Government uses the student newspaper, “El Vaquero,” to reach students.

College communications are established not only by electronic means but also through departments and cabinet meetings. Perceptions of governance are assessed annually through a survey. At least 75 percent of employees indicated that they are aware of governance decisions. The visiting team meetings with leadership of the different constituency groups confirmed that there is sufficient information sharing and communication of actions taken by the various committees. (IV.A.6)

There is evidence that the College has periodically reviewed its leadership roles and governance and decision-making policies, procedures, and processes. For example, the Governance Review Committee addresses governance issues regularly. The results of the annual survey conducted by the Office of Research, Planning and Grants are shared and action plans are formulated to address any challenges. In addition, a survey of committees was initiated in 2014 focusing on the effectiveness of committees in relation to the mission, planning, and overall governance process. The process of reviewing board policies and administrative regulations is outlined in Board Policy 2410. These policies are reviewed once every three years on a staggered basis, with the goal of improving the effectiveness of processes and to assure integrity. (IV.A.7)

Conclusions

The College meets Standard I. A.

Recommendations to Meet Standard

None

Recommendations for Improvement

None.

Standard IV.B: Chief Executive Officer

General Observations

The superintendent/president is actively engaged in the institution and provides leadership in budgeting, organizational structure, and planning, as well as in selecting and developing personnel and assessing institutional effectiveness. The superintendent/president is “responsible to lead the College in fulfilling its mission...” The College superintendent/president reports to the Board of Trustees. The superintendent/president is evaluated annually by the Board of Trustees to assess if the superintendent/president is providing effective leadership. The evaluation of the superintendent/president includes a mechanism for feedback from all college constituency groups. The superintendent/president serves as the Chair of the College Executive Committee which is the committee that receives recommendations from the participatory committees.

Findings and Evidence

The superintendent/president meets weekly with the executive staff, and meets with other College leadership on a regular basis. In addition, each week the superintendent/president meets with the Administrative Executive Committee which is made up of the College’s executive leadership. (IV.B.1)

The administrative structure is appropriately staffed and organized relative to the purpose, size and complexity of the institution. Evidence supports that the superintendent/president delegates and empowers other administrators within the College according to their position and expertise. Reporting to the superintendent/president are the vice presidents, associate vice presidents, chief of college police, and the executive director of the foundation. The College’s Self-Evaluation Report provided evidence that staffing and organizational decisions regarding staffing structure are based on integrated planning that is driven by the program review process. (IV.B.2)

The College superintendent/president utilizes established policies and procedures in providing leadership to institutional improvement efforts. Through existing administrative and governance structures, the superintendent/president oversees institutional effectiveness efforts, from setting values, goals, performance standards and priorities to establishing, utilizing and evaluating an integrated planning and resource allocation processes that support student achievement and learning, which is outlined in Board Policies 2415, 2453, and 3250. (IV.B.3)

The job description for the superintendent/president assigns primary responsibility for the accreditation process to the president. In addition to the president’s leadership role, the team found that appropriate responsibilities are assigned to the Accreditation Liaison Officer and that participation in the accreditation process is appropriately shared across constituencies. (IV.B.4)

The superintendent/president assumes primary responsibility for ensuring consistent implementation of board policies, statutes, and other regulations as well as for budget oversight and management. The superintendent/president works with the Administrative Executive Committee weekly to carry out the administrative functions of the College. (IV.B.5)

The superintendent/president is engaged and participates effectively in the communities served by the College. For example, superintendent/president is a member of the Sunrise Rotary, Glendale Chamber of Commerce, and the San Gabriel Valley Economic Partnership. (IV.B.6)

Conclusions

The College meets Standard IV.B.

Recommendations to Meet the Standard

None.

Recommendations for Improvement

None.

Standard IV.C: Governing Board

General Observations

The College has a five-member elected board and a student Trustee elected by the students of GCC. The Board of Trustees provides effective leadership through a collective understanding of their roles and the constituency to whom they serve. The Board of Trustees has worked cooperatively with the superintendent/president to develop clear lines of authority at the College.

Findings and Evidence

The roles and responsibilities of the Board and the College administrative leadership are codified in the Board Policy 2200. The policy identifies 12 primary responsibilities which consist of assuring the academic quality, integrity, effectiveness, improvement of student learning and achievement, and plans for improving academic quality. The Board sets annual goals at its yearly retreats. The Board engages in a comprehensive self-evaluation and uses the results of the evaluation for improvement. Board Policy 2715 clearly states that Board members act as a whole and precludes individual action and/or decision-making by Board members in relation to college business. (IV.C.1, IV.C.2, ER 7)

Board Policy 2431, Superintendent/President Selection, establishes a search process to fill the position when necessary. This policy was revised in January 2015 and clearly defines the process for selecting the superintendent/president. The superintendent/president selection process includes the establishment of a screening committee which includes college constituency representation, members from the community, and student representation. (IV.C.3)

The Board holds regularly scheduled meetings that allow for public comment on general and specific agenda items. A review of Board meeting minutes demonstrates that Board members advocate for the College and are actively engaged in promoting the College to the greater community. Board members are active in statewide organizations and participate in Board development opportunities. (IV.C.4, ER 7)

Board policies are codified in Board Policy 2200. In reviewing Board minutes and agendas, the team verified that members of the Board of Trustees adhere to the responsibilities outlined in Board Policy. The responsibilities delineated in Board Policy 2210 establish the Board's role in setting policy with the acknowledgement that it has the ultimate responsibility for educational quality, legal matters, and financial integrity. (IV.C.5)

Board Policies and Administrative Regulations include policies specific to the Governing Board size, duties, responsibilities, structure and operating procedures. All policies and regulations are accessible to the public by being posted on the College's web site under the Board of Trustees link. (IV.C.6)

The Board of Trustees engages in a system to have regular review of board policies and administrative regulations. This process is outlined in Board Policy 2410. The system for regular review of policies and regulations was also confirmed through interviews with Board members and the College's superintendent/president. The Board of Trustees reviews, and revises Board Policies, as necessary, on a three-year cycle. (IV.C.7)

The review of Board agendas and minutes from regular Board meetings, as well as Board retreats, revealed the Board engages in a regular review of key indicators of student learning and achievement. These minutes and agendas reflect Board member dialogue around the Key College Success Indicators, Institutional Set Standards, GCC Student Success Scorecard, and Student Equity achievement data. (IV.C.8)

Board Policy 2740 outlines the ongoing training and development of Board members as well as orientation for new Trustees. Evidence, as outlined in Board documents, shows that each of the five board members participates in ongoing training and development including training provided through the Community College League of California and/or the Association of Community College Trustees. (IV.C.9)

The annual process for regular self-evaluations of the Board is clearly delineated in Board Policy 2745. The Board of Trustees conducts its annual self-evaluation during a public session in which they review data results from the preceding year and establish new annual goals. As part of the Board evaluation process the Board also reviews the results from the annual faculty and staff survey which helps inform the Board on their adopted focus and outcome measures for the following year. (IV.C.10)

The Board is in compliance with establishing a policy on Board member code of ethics and conflict of interest. This is codified in Board Policy 2715, Ethical Responsibilities of the Board, Board Policy 2717, Personal Use of Public Resources, and in Board Policy 2710, Conflict of Interest. The team found no evidence of any violations of the code of ethics or conflict of interest policy. (IV.C.11)

In alignment with the provisions provided in Board Policy 2430, the Board sets policy that delegates responsibility to the superintendent/president for the execution of policies and procedures as well as day-to-day operational control of the College. The superintendent/president is held accountable by the Board of Trustees through an annual performance evaluation as outlined in Board Policy 2435. (IV.C.12)

The Board is knowledgeable and engaged in the accreditation process and is regularly informed about the Eligibility Requirements, the Accreditation Standards, Commission policies, Federal regulations, and the College's accredited status. Since August 2010 the Board of Trustees receives monthly updates on accreditation through the College's Accreditation Progress Report, which is included as part of the Information Reports section of the agenda for each Board meeting. (IV.C.13)

Conclusions

The College meets Standard IV.C and Eligibility Requirement 7.

Recommendations to Meet the Standard

None.

Recommendations for Improvement

None.

Quality Focus Essay Feedback/Advice

The Glendale Community College (GCC) Quality Focus Essay (QFE) culminates the self-evaluation document and captures an honest and forthright plan to address areas for improvement that the College has identified as being particularly significant. Here, the College focused on (1) providing better integration of campus planning documents and (2) improving the use of learning outcomes assessments. These areas were identified through the self-evaluation writing process in which the Institutional Planning Coordination Committee analyzed gaps between Accreditation Standards and the College's current practices and policies. The College's QFE adequately divides each of these improvement areas into key tasks and provides clear and realistic steps to be taken to ensure the successful completion of the tasks.

The need to improve plan integration emerged from the College's identification of needs to better align planning document timelines, create consistencies in plan approval processes, improve the tracking of plan implementation, and improve linkages between the plans and resource allocation. The College seems to have successfully outlined the challenges associated with improvement and, more importantly, it appears to have created a plan that addresses each of the challenges. A clear and well-developed timeline is in place which includes measurable outcomes, timetables, and the responsible party for carrying out the plan. Moreover, the rationale for the action project is captured in four clearly articulated issues that the College has identified as having impacted its ability to consistently integrate its planning process. These issues inform the four key strategies of the action project. High-level measurable outcomes have been identified for the action project

The College might consider expanding its high-level measurable outcomes to include institutional efficiency and effectiveness metrics as well as student achievement and learning outcomes that could be realized through strengthened integration of planning and resource allocation processes. While the IPCC is identified as the responsible party to coordinate the action project, it may be helpful to identify specific responsible parties for the more specific action steps included in the table showing those action steps and timelines for the four major strategies. Where possible, measurable or observable outcomes should be developed for the specific action steps. Regarding the key strategy to communicate planning more widely, the College might consider developing additional methods beyond presentation to expanded audiences that provide for redundancy, synchronous and asynchronous communication at scale.

The College's efforts related to improving the use of learning outcomes assessments fall into the following categories: improvement of data quality, assessor proficiency and data quality, comprehensive and regular assessment, communication and use of data to drive institutional processes, basing awards on outcomes attainment, and assuring quality of student support services. Based on the team's observations, this improvement area is consistent with findings from Standards I, II, and III. Although the team found that the College met the Standards related to learning outcomes assessment, the team recommends (and concurs with this portion of the QFE) that the College can improve its effectiveness and service to students by meeting the tasks outlined in this improvement area. Specifically, the team believes that the College should

improve learning and support programs by formalizing and recording its widespread, but often informal efforts on the assessment of student learning outcomes.

The team found the improvement areas to be somewhat ambitious but certainly possible given the campus's ability to undertake significant tasks. The College dissected the two improvement areas into tasks that are to be met by clearly described steps. As required, these steps were accompanied by clear timelines, and the College is committed to meeting this timeline as far as is practical. This was confirmed by the team's visit to GCC in which the College clearly understood the timeline prescribed in the QFE and had accomplished all relevant steps.

The QFE establishes a high-level view for continuous quality improvement for the College. At this current stage of the QFE model, any recommendations provided by the visiting team should be considered as correlating information that can align with and/or provide support for the Action Projects.