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MAY 15 2013

*Accrediting Commission for
Community and Junior Colleges*

Follow-Up Visit Report

Merced College
3600 M Street
Merced, CA 95348-2898

A Confidential Report Prepared for the Accrediting Commission
For Community and Junior Colleges
This report represents the findings of the evaluation team that visited

Merced College
on
April 22, 2013

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Follow-Up Visit Report

DATE: May 8, 2013
TO: Accrediting Commission for Community and Junior Colleges
FROM: Sandra Mayo, Team Chair
SUBJECT: Report of Follow-Up Visit Team to Merced College, April 22, 2013

Introduction:

A comprehensive visit was conducted to Merced College in March 2011. At its meeting of June 8-10, 2011, the Commission acted to require Merced College to submit a Follow-Up Report, followed by a visit. The 2012 Visiting Team, Dr. Jackie L. Fisher, Sr.; Dr. Phoebe Helm; and Dr. Sandra Mayo, conducted the site visit to Merced College on April 12, 2012.

At its June 2012 meeting, the Commission acted to require Merced College to submit another Follow-Up Report, followed by another visit in twelve months. The Visiting Team of Dr. Sandra Mayo and Mr. Raj Bajaj conducted the site visit to Merced College on April 22, 2013. The purpose of the team visit was to verify through examination of evidence that the March 15, 2013 Follow-Up Report prepared by the college is accurate; to determine if sustained, positive improvements had been made at the institution; and to determine that the institution has addressed the recommendations made by the comprehensive evaluation team, resolved the deficiencies noted in those recommendations, and now meets the Eligibility Requirements, Accreditation Standards, and Commission policies.

In general, the team found that the college had prepared well for the visit by arranging for meetings with the individuals and groups agreed upon earlier with the team chair and by assembling appropriate documents on the college's website. Over the course of the day, the team met with the Superintendent/President of the college, three members of the Board of Trustees, the Accreditation Liaison Officer, the Standing Accreditation Committee, the Academic Senate, the Senior Staff, the Director of Human Resources, Program Review and SLO coordinators, as well as faculty and staff representing a variety of areas.

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

Recommendation 1: Program Review

In order to meet the standard and ensure that progress continues toward achieving the Sustainable Continuous Quality Improvement level of the Accrediting Commission for Community and Junior Colleges' rubric for program review, the team recommends that the college continue to apply the recommendations of the 1999 and 2005 comprehensive evaluation teams, fully implement its new program review process, and ensure that the process is ongoing, systematic and used to assess and improve student learning and achievement and that the results

of program review are used to continually refine and improve program practices. (I.B.2, I.B.3, I.B.5, II.A, II.A.5, II.C.2, III.D.3)

Recommendation 3: Integrated Planning, Evaluation, and Resource Allocation, and Decision-Making Process

In order to meet the standard and ensure that the college progresses toward the Sustainable Continuous Quality Improvement level of the Accrediting Commission for Community and Junior Colleges' rubric for planning, the team recommends that the college continue to apply the recommendations of the 1999 and 2005 comprehensive evaluation teams and ensure that its established planning processes included ongoing and systematic evaluation and planning with clearly established timelines to refine its key processes and improve student learning. The team recommends that the college conduct dialogue about institutional effectiveness that is ongoing, robust and pervasive, continue collecting data, and ensure that analyses of the data are widely distributed and used throughout the institution, that there is ongoing review and adaptation of evaluation and planning processes; that there is a consistent and continuous commitment to improving student learning; and that educational effectiveness is a demonstrable priority in all planning structures and processes. (I.A.4, I.B.2, I.B.3, 4, II.A.2, III.A.2, III.A.6, III.B.2.b, III.C.2, III.D.1.a)

Recommendation 4: Communication

In order to meet this standard, the team recommends that the College improve communication by engaging in dialogue that is inclusive, respectful, intentional informed, and documented and about institutional quality and improvement. The dialogue should purposefully guide institutional change. This dialogue must include the use of the participatory governance process to develop and implement a plan for effective communication links so that information and recommendations are disseminated to all constituent groups. (I.A.4, I.B.1, I.B.2, I.B.3, I.B.4, I.B.5, I.B.6, I.B.7, III.A.4.c)

Recommendation 5: Governing Board

In order to meet the standard, the team recommends that the Board model to the college its commitment to continuous improvement, develop and implement a written comprehensive Board development plan that includes, but does not rely primarily on travel and attendance at conferences, and specifically includes delegation of authority to the CEO (policy) without interference in the operation of the college, an examination of the participatory governance processes and the extent to which the Board's behavior supports those governance structures, accreditation standards for Board performance; and analysis of the governing Board's 2010 self-evaluation and a plan for improvement. (IV.A.2.a, b; IV.A.3, IV.A.4, IV.A.5, IV.B.1.f, IV.B.1.g, IV.B.1.i, IV.B.1.j)

Recommendation 8: Human Resources

In order to meet the standard, the team recommends that the college develop and implement an organizational structure that includes a fully functional human resources division and develop, implement, and evaluate a Faculty and Staff Diversity Plan in order to adequately assess its record in employment equity and diversity consistent with its mission. The team recommends that processes for hiring classified and management staff be integrated with Institutional Planning. The College also needs to systematically assess the effective use of human resources

and use the results of the evaluation as the basis for improvement. (III.A.1.b, III.A.3, III.A.4.a-c, III.A.6.)

Visiting Team Evaluation of College Responses to the Recommendations:

Recommendation 1: Program Review

In order to meet the standard and ensure that progress continues toward achieving the Sustainable Continuous Quality Improvement level of the Accrediting Commission for Community and Junior Colleges' rubric for program review, the team recommends that the college continue to apply the recommendations of the 1999 and 2005 comprehensive evaluation teams, fully implement its new program review process, and ensure that the process is ongoing, systematic and used to assess and improve student learning and achievement and that the results of program review are used to continually refine and improve program practices. (I.B.2, I.B.3, I.B.5, II.A, II.A.5, II.C.2, III.D.3)

Findings and Evidence:

After the comprehensive visit in March 2011, the College Council formed a task force to evaluate the existing program review process and make recommendations for improvement. The College Council also developed a draft Integrated Program Review Handbook to document its efforts in response to this recommendation. After meeting with employees and attending meetings, the team found that the revised program review process involved comprehensive reviews and annual reviews for every instructional and non-instructional area/department. Also, the revised program review process incorporated implementation and assessment of student learning outcomes and service area outcomes. The team was able to verify through meetings with employees and examining the college's website (MC4Me) that the college was documenting its progress in satisfying this recommendation.

However, after conducting interviews and reviewing documents, the team confirmed that the college had fully integrated the planning and program review processes, but had not yet met the expectations of the Commission to ensure that the process was ongoing and systematic. The team was able to confirm that all constituent groups have accepted the newly revised integrated planning and program review process, but the evaluation team noted that the college must complete a minimum of one complete program review cycle before it has fully satisfied the Commission's recommendation.

Since the April 2012 visit, the College has completed the *Integrated Planning, Program Review, and Shared Governance Handbook*. The team was able to confirm that all college departments are expected to follow the provisions for planning, program review and resource allocation as outlined in the *Handbook*.

The revised program review processes and forms ensure that the dialogue about student learning is ongoing, pervasive, and robust. Documentation of the dialogue is systematically included in the program review process. Cohort Assessment Trainers (CATs) serve as a resource to faculty to facilitate program review and the SLO assessment process. Student Services has a Student Services Program Review Oversight Committee and Student Services Master Planning

committees to provide support, peer review and feedback. Administrative Services sends program reviews to the Administrative Services Program Review Oversight Committee.

Conclusion:

After conducting interviews and reviewing documents, the team confirmed that although the college has a fully integrated the planning and program review processes and has made significant progress, not all programs have completed enough of the assessment cycle to have evaluated the outcomes. The College partially meets the Standard.

Recommendation 3: Integrated Planning, Evaluation, and Resource Allocation, and Decision-Making Process

In order to meet the standard and ensure that the college progresses toward the Sustainable Continuous Quality Improvement level of the Accrediting Commission for Community and Junior Colleges' rubric for planning, the team recommends that the college continue to apply the recommendations of the 1999 and 2005 comprehensive evaluation teams and ensure that its established planning processes included ongoing and systematic evaluation and planning with clearly established timelines to refine its key processes and improve student learning. The team recommends that the college conduct dialogue about institutional effectiveness that is ongoing, robust and pervasive, continue collecting data, and ensure that analyses of the data are widely distributed and used throughout the institution, that there is ongoing review and adaptation of evaluation and planning processes; that there is a consistent and continuous commitment to improving student learning; and that educational effectiveness is a demonstrable priority in all planning structures and processes. (I.A.4, I.B.2, I.B.3, 4, II.A.2, III.A.2, III.A.6, III.B.2.b, III.C.2, III.D.1.a)

Findings and evidence:

The team was able to verify through interviews and review of documents that the college continues to make improvements in its efforts to ensure that the resource allocation and decision-making processes have become more transparent to all employees and Board members.

The team was able to verify that the establishment of permanent hiring priorities for the hiring of faculty, staff and administrators has been integrated with planning, program review, and resource allocation.

In April 2012, the team was able to confirm that the establishment of the College Council resulted from the Accreditation Resolution Action Plans. A primary function of the College Council is to manage all participatory governance organizational structures. Additionally, the College Council identifies professional development needs of members serving on participatory governance committees.

The College Council continues to ensure that the college's decision making process is based on the collection and analysis of data and both the data and analysis are widely distributed throughout the institution.

The team was able to verify that the college utilizes data as an integral component of the decision-making process. Also, data are applied in assessing student learning outcomes and service learning outcomes. Additionally, the College Mission Statement includes a commitment to "continuously improving methods of providing an accessible, affordable and relevant education..."

Conclusion:

The college has achieved the attainment of the Sustainable Continuous Quality Improvement level of the Accrediting Commission for Community and Junior Colleges' planning rubric. The college continues to provide evidence that utilizing data in planning, decision making, and resource allocation has improved its institutional effectiveness. The College meets the Standard.

Recommendation 4: Communication

In order to meet this standard, the team recommends that the College improve communication by engaging in dialogue that is inclusive, respectful, intentional informed, and documented and about institutional quality and improvement. The dialogue should purposefully guide institutional change. This dialogue must include the use of the participatory governance process to develop and implement a plan for effective communication links so that information and recommendations are disseminated to all constituent groups. (I.A.4, I.B.1, I.B.2, I.B.3, I.B.4, I.B.5, I.B.6, I.B.7, III.A.4.c)

Findings and evidence:

The team confirmed through interviews and evidence that communications has significantly improved at the college. This improvement can be attributed to the Campus Digest, periodic emails to the campus community from the President, and from statewide organizations, as well as budget forums, program review and the integrated planning process.

There has been a change in the college leadership and the leadership style of the new president seems have improved the attitude of the college community. Due to challenges experienced in April 2012, and due to changes in the reporting structure and other issues, individual meetings were set up with members of the Senior Staff and other high level positions. The messages from the various individuals made it clear that the communication challenges of the past had stayed in the past and that the various constituencies are communicating well within their organizations and across their organizations.

Conclusion:

The team found that the communication among constituent groups had improved significantly. There was no mention of concerns about retaliation, there appears to be a real sense of collegiality in the discussions with the various team members. The College meets the Standard

Recommendation 5: Governing Board

In order to meet the standard, the team recommends that the Board model to the college its commitment to continuous improvement, develop and implement a written comprehensive Board development plan that includes, but does not rely primarily on travel and attendance at conferences, and specifically includes delegation of authority to the CEO (policy) without interference in the operation of the college, an examination of the participatory governance processes and the extent to which the Board's behavior supports those governance structures, accreditation standards for Board performance; and analysis of the governing Board's 2010 self-evaluation and a plan for improvement. (IV.A.2.a, b; IV.A.3, IV.A.4, IV.A.5, IV.B.1.f, IV.B.1.g, IV.B.1.i, IV.B.1.j)

Findings and evidence:

The team met with three of the seven governing Board members. There has been significant turnover in membership of the Board since the teams visit in April 2012. Of the three Board members who met with us, two had only been on the Board for two years; one was in her first year on the governing Board. Of the remaining four, one has been on the Board for 16 years; the others were relatively new to Board membership.

The Board has regular training to ensure understanding of their role and responsibilities. The Board made it clear that each member has the responsibility to ensure that all members are held accountable for their actions to ensure confidentiality and proper "Board behavior and actions." The Board members latest training was in January 2013 with the Community College League.

Because the team had received an email with attachments indicating that there were still problems with Board interference in college governance and decision making process, the team chair indicated having some concerns about whether all Board members understood their role. The newest Board member indicated that although she had been on a Board in the past, being involved with the Community College District was a new experience for her. Because she wanted to understand how the college made decisions regarding budget and the allocation of resources, she had requested permission to observe budget committee meetings and meetings where resource prioritization was taking place. As the discussion progressed, she became quite concerned that her actions might be construed as inference by the Commission. The team chair explained that although it was clear from the conversation that she was observing and not participating, it could be construed by others that her accessibility would allow individuals to bypass the "chain of command." She appeared to understand the concern and assured the chair she had an agreement that she would not participate in the process even if asked for input.

Another Board member indicated that she felt that when she took concerns to this president, he actually listened, where she had felt that the past president just "blew her off"

Conclusion:

The College has met the Standard.

Recommendation 8: Human Resources

In order to meet the standard, the team recommends that the college develop and implement an organizational structure that includes a fully functional human resources division and develop, implement, and evaluate a Faculty and Staff Diversity Plan in order to adequately assess its record in employment equity and diversity consistent with its mission. The team recommends that processes for hiring classified and management staff be integrated with Institutional Planning. The College also needs to systematically assess the effective use of human resources and use the results of the evaluation as the basis for improvement. (III.A.1.b, III.A.3, III.A.4.a-c, III.A.6.)

Findings and evidence:

The college presented the visiting team with the *Merced Community College District Equal Employment Opportunity Plan*, approved by the College Council: March 26, 2013; approved by the Board of Trustees: April 2, 2013.

The team verified that the district hired a director of Human Resources. The Director position is a manager at the “Dean” level. Additionally, a support structure and staff for the director has been developed. One of the first tasks of the director was to assist in revising the staffing plan. One of the items that she is most proud of is a form that is now used to request new positions, fill vacancies and adjust position duties. New positions must be linked to program review and assessment of student learning or service outcomes. The filling of vacancies must also be justified and linked to program review and institutional effectiveness.

Conclusion:

The College has met the Standard.