



ACCREDITING COMMISSION for COMMUNITY and JUNIOR COLLEGES

Western Association of Schools and Colleges

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MEMO TO: Dr. Victor Jaime, Superintendent/President
Imperial Valley College
P. O. Box 158
Imperial, CA 92251

FILE

FROM: Barbara A. Beno, President *Barbara A. Beno*

DATE: Monday, April 28, 2015 IVC
PRESIDENT'S OFFICE

SUBJECT: Enclosed Report of the External Evaluation Team

Previously, the chairperson of the External Evaluation Team (Evaluation Team) that recently visited Imperial Valley College sent you a draft External Evaluation Report (Report) affording you the opportunity to correct errors of fact. The Commission now has received the final version of the Report, a copy of which is enclosed for you. Please examine the enclosed Report.

- If you believe that the Report contains inaccuracies, you are invited to call them to the attention of the Commission. To do so, you should submit a letter stating recommended corrections to the ACCJC President by noon **Monday, May 18, 2015**, in order to be included in Commission materials. The letter may also be sent electronically in Word or PDF.
- If the institution also wishes to submit additional material on issues of substance and to any Accreditation Standard deficiencies noted in the report, it should exercise care, keeping in mind the Commission cannot read and absorb large amounts of material on short notice. Material should arrive at the ACCJC office by noon **Monday, May 18, 2015**.
- ACCJC policy provides that, if desired, the Chief Executive Officer (CEO) may request an appearance before the Commission to discuss the Report. The Commission requires that the institution notify the Commission office by noon **Monday, May 18, 2015**, or earlier, of its intent to attend the meeting. Any written materials must be handled as provided in the paragraph above.

The next meeting of the Accrediting Commission will be held on **June 3-5, 2015**, at the Hilton Oakland Airport, Oakland, California. The enclosure, "Procedures for an Institutional Chief Executive Officer's Appearance before the Commission," addresses the protocol of such appearances. If the institution does request to be heard at the Commission meeting, the chairperson of the Evaluation Team will also be asked to be present to explain the reasons for statements in the Report. Both parties will be allowed brief testimony before the Commission deliberates in closed session.

Please note that the Commission will not consider the institution as being indifferent if its CEO does not choose to appear before the Commission.

The enclosed Report should be considered confidential and not given general distribution until it has been acted upon by the Commission and you have been notified by letter of the action taken.

BAB/tl

Enclosure

cc: Dr. Nicholas Akinkuoye, Accreditation Liaison Officer (w/o enclosure)



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Procedures for an Institutional Chief Executive Officer's
Appearance Before the Commission

The Commission considers institutional accreditation actions in January and June of each calendar year. ACCJC policy provides that when the Commission is deliberating or acting upon matters that concern an institution, it will invite the Chief Executive Officer (CEO) of the institution to meet with the Commission in Executive Session.¹ The appearance is for the purpose of discussing issues of substance and any Accreditation Standards deficiencies noted in the report. There is no requirement that the CEO attend the Commission meeting. If the Commission is considering institutional action as a result of an evaluation team visit, and if the CEO elects to attend the meeting, the Commission will also invite the Chair of the Evaluation Team (Team Chair) or designee to attend.

An institution must send written notification to the ACCJC office at least 15 days before the scheduled Commission meeting if the CEO wishes to attend. The institution should bear in mind the evaluation of the institution is based upon the conditions at the institution at the time of the team visit.

At the meeting, the institutional CEO will be invited to make a brief presentation, followed by questions from the Commission. The CEO is expected to be the presenter, and should consult with Commission staff if there are plans to invite other representatives to join the CEO. On the day of the Commission meeting, ACCJC staff will escort the CEO (and additional representatives) to and from the designated waiting area to the meeting at the appropriate time. An institution's presentation should not exceed five (5) minutes. The Commission reserves the right to establish a different time limit on such presentations.

The Team Chair or designee will also attend the presentation, normally by conference call. The Commissioners may ask questions of the Team Chair after college representatives have exited. The Team Chair will then be excused, and the Commission will continue its deliberations in closed session.

The CEO will be notified in writing of the subsequent action taken by the Commission.

¹ Policies that are relevant to this process are the *Policy on Access to Commission Meetings*, *Policy on Commission Actions on Institutions*, *Policy on Commission Good Practice in Relations with Members Institutions*, and *Policy on the Rights and Responsibilities of ACCJC and Member Institutions*.

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*Accrediting Commission for
Community and Junior Colleges*

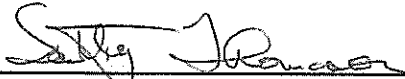
Follow Up Visit Report

**Imperial Valley College
380 E. Aten Road
Imperial, CA 92251**

This report represents the findings of the External Evaluation Team that visited
Imperial Valley College on March 16, 2015

Submitted to:
The Accrediting Commission for Community and Junior Colleges

Submitted by:



Scotty Thomason
Team Chair

Superintendent/President College of the Siskiyous



Michael Bowman

Dean Research and Planning Ohlone College

Date: April 2, 2015

To: Accrediting Commission for Community and Junior Colleges

From: Scotty Thomason, Team Chair

Subject: Report of Follow-Up Visit to Imperial Valley College, March 16, 2015

Introduction:

An External Evaluation team visit was conducted to Imperial Valley College in March 2015. At its meeting of June 4-6, 2014, the Commission acted to require Imperial Valley College to submit a Follow-Up Report followed by a visit. The visiting team, Scotty Thomason and Michael Bowman, conducted the site visit to Imperial Valley College on March 16, 2015. The purpose of the team visit was to verify that the Follow-Up Report prepared by the College was accurate through examination of evidence, to determine if sustained, continuous, and positive improvements had been made at the institution, and that the institution has addressed the recommendations made by the External Evaluation Team, resolved the deficiencies noted in those recommendations, and meets the Eligibility Requirements, Accreditation Standards and Commission policies.

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 in the meeting room used by the team. Over the course of the day, the team met with the President of the College, Vice President of Academic Services, Vice President for Business Services, Director of Finance, President of the Academic Senate, Chair of College Council, Dean of Health and Science(CART Co-Chair), Director of Institutional Research and members of the faculty and staff.

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

Recommendation 1: In order to fully meet the Standard, the team recommends that the College consistently link the institutional goals and objectives detailed in the Educational Master Plan with operational plan goals and resource allocations, including technology resources, in order to assess progress toward meeting institutional goals. In addition, the College should establish a planning calendar that identifies all planning activities, committees, and the roles of various College plans, and includes institutional effectiveness assessment and improvement cycles. (I.B.3, II.C.1b, IV.A.5)

Recommendation 8: In order to meet the Standard, the team recommends the College develop a financial strategy that will result in balanced budgets that have ongoing revenues to meet or exceed its ongoing expenditures without the use of reserves; maintain the minimum prudent reserve level; and address funding for its long term financial commitments and its retiree health benefits costs. (III.D.1.a, III.D.3.a, and III.D.4, IV.B.1.c, IV.B.2.d.)

Team Analysis of College Responses to the 2014 External Evaluation Team Recommendations

Recommendation 1: In order to fully meet the Standard, the team recommends that the College consistently link the institutional goals and objectives detailed in the Educational Master Plan with operational plan goals and resource allocations, including technology resources, in order to assess progress toward meeting institutional goals. In addition, the College should establish a planning calendar that identifies all planning activities, committees, and the roles of various College plans, and includes institutional effectiveness assessment and improvement cycles. (I.B .3, II.C.1b, IV.A.5)

Findings and Evidence:

The follow-up report reveals that the college has been diligent in its response to recommendation #1. Beyond the notable efforts completed for the April 2014 follow-up report, the college has continued its focus on integrating and strengthening its planning processes and its assessment and improvement cycles. Each of the recommended measures has been addressed and, more importantly, has been incorporated into the culture of the college, boding well for ongoing and effective planning, assessment, and continuous improvement.

The follow-up visit of March 2015 specifically focused on the continued implementation and effectiveness of the college's Strategic Planning Online (SPOL) tool, the assessment processes for institutional goals and objectives, and the integration of planning and resource allocation. In addition to addressing the three primary issues, the college also provided additional detail about procedures that support planning noted in the prior report that needed improvement.

The college was able to verify that a full assessment cycle of planning has been completed and was linked to resource allocation and institutional goals. The assessment was then used to drive the subsequent year's planning. This process was facilitated using SPOL. Although the software itself has not been fully implemented, the template for planning within SPOL became the basis for a paper planning process for 2014-15. The SPOL template does require linkage among program review, institutional goals, resource allocation, and future assessment of program outcomes.

SPOL is an integrated planning tool with four modules, and the college is in the midst of entering paper reviews into the planning program. It also uses the assessment, budget, and accreditation modules, but their full implementation will occur over time. The templates for planning, assessment, and budget were used to define the most recent paper process. Departments were prompted to address annual objectives, tasks, and resource needs, all of which were aligned with institutional goals and accreditation standards. SPOL also supports requests for enhancement funding to implement planned improvements. The requests for enhanced funding to carry out new initiatives or activities must be intended to improve quality, effectiveness, or outcomes, and

these requests require specific justification—aligned with institutional goals and Accreditation Standards—in order to be forwarded through the governance process for consideration.

The amalgamation of all the annual plans and budget requests also allows the college to forecast emerging needs for future years' planning. Of particular note is the college's enrollment management and planning process, which is very comprehensive and drives the faculty hiring prioritization. Using input from student services about student need and emerging majors, college growth targets, prior fill rates, scheduling cycles to ensure opportunities for degree completion, labor market changes, community interest, and waitlist activity, an enrollment plan is created prior to the faculty prioritization process. This enrollment management data also feeds into program review, specifically to alert the College to programs that are declining or not performing well.

It should be noted that the process of converting from a paper process to SPOL's online process for program review has required substantial focused effort college wide. Despite the SPOL vendor's skepticism around tackling four modules at once, the college rose to the task of implementing this new technology, migrating data from paper to electronic, providing constituent training, and completing a full year's assessment cycle following the SPOL integrated planning templates. In that process the College also had to address procedural shortcomings such as the lack of effectiveness of some campus committees and an inefficient calendar system—both of which are now resolved.

A comprehensive evaluation of campus committees revealed that, for some committees, attendance, composition, and effectiveness were less than stellar. Under the leadership of the Academic Senate and College Council, strong measures were undertaken to provoke more robust participation and to streamline and improve the work of the committees. Additionally, bylaws were rewritten to engage wider participation from among the college community. Some committees were dissolved or re-purposed, and all committees are subject to annual evaluations of both effectiveness and outcomes. The college revised its College Hour from two days a week, on Tuesdays and Thursdays, to four days a week, Mondays through Thursdays. The College Hour is essentially free of any conflicting scheduled classes, removing an oft-cited justification for non-attendance. Admittedly there are always going to be some less-than-effective committees or committee members, but both the Vice President for Academic Services, Academic Senate, and College Council are committed to monitoring the work of committees and committee members.

In response to the initial accreditation visit, the college improved its planning calendar in 2013-14. However, it became apparent that the static paper calendar that had been created required even further improvement to be fully effective. The College responded to that need with the creation of a dynamic online calendar, implemented September 2014. This calendar not only integrates the planning, budget, and assessment cycles, but also includes all College activities and events, notably those events that mesh with the planning process—committee and

department meetings, for example. Importantly, in the midst of all the detail, it is evident that all the planning cycles have been laid out to appropriately lead into one another and to align with important College planning events so as to establish planning processes that are integrated among themselves and with committee, department, and governance schedules.

With the move to SPOL, templates were created and implemented for program review that made the process more effective and robust—and also more integrated with the resource allocation process. As a part of program review, reviewers are prompted to create department goals that are specific, measurable, attainable, relevant, and time limited—SMART goals. These goals must align with institutional goals and emerge from the appropriate and substantial data provided by Institutional Research.

Program review begins with data and asks for responses to program health, achievement, and effectiveness based on the data. Data must be assessed in light of prior year's goals and must relate the effectiveness of those goals in increasing student achievement or program effectiveness. The College has institutional standards against which data is evaluated, and there is comparative data for like colleges. Importantly, the templates assign responsibility and accountability for each of the goal's planned objectives, link those objectives to institutional goals, identify resource needs, assign completion dates, and require completion of assessments.

Through program review, departments are able to request enhanced resource allocations to facilitate planned improvements. All such requests must be entered into SPOL as a part of a program improvement, and they are filtered through a prioritization process that looks back to alignment of the allocation with the institutional goal and Accreditation Standards. According to the college, SPOL is the single data source for funding, and no decisions are made if the data does not come from SPOL. This prioritization and approval process is not yet fully converted to the online format in SPOL, but there is both evidence of its effectiveness and buy-in by the college community. The online process is expected to be completed for the 2016-17 planning cycle but, again, the transitional process that requires response to the SPOL templates ensures integration of planning and resource allocation. Guiding this transition is the Educational Master Planning Committee (EMPC) and Continuous Accreditation Readiness Team (CART), which are representative of all college constituent groups.

Assessment of institutional effectiveness—including program review, institutional goals and objectives, planning processes, budget allocations, and the process of assessment itself—is a developing process, most of which has been subject to revision and improvement since the site visit in 2013. Nonetheless, the processes are in place, are data-driven, are more effective, and are now a part of the college culture. An assessment cycle has been successfully completed and has been integrated within the subsequent planning cycle. The multiple revisions to procedures and processes indicate the college's drive to "do it right." The ability and willingness to assess outcomes and to assess the planning processes reflect an understanding of a planning cycle that is dynamic, ongoing, and continually able to be improved.

The College has invested itself in creating and re-creating an effective planning and assessment process that is integrated, data-driven, drives resource allocation, and is ongoing. The process, as yet, is still a fledgling, although it has fully completed a one-year cycle and has satisfied the spirit of the recommendation. Continued assessment and improvement of the process will satisfy the spirit of the standard.

Conclusion:

The College has resolved this Recommendation and meets the Standard.

Recommendation 8: In order to meet the standard, the team recommends the College develop a financial strategy that will result in balanced budgets that have ongoing revenues to meet or exceed its ongoing expenditures without the use of reserves; maintain the minimum prudent reserve level; and address funding for its long term financial commitments and its retiree health benefits costs. (III.D.1.a, III.D.3.a, III.D.4, IV.B.1.c, IV.B.2.d.)

Findings & Evidence:

The College has developed a financial strategy that results in balanced budgets, maintains minimum prudent reserve levels, and addresses long-term financial commitments including other post-employment benefits costs.

The College has evaluated and addressed the 72 recommendations from the 2012 FCMAT Report. They have implemented many of the recommendations and have created Action Plans to accomplish several other recommendations.

Strategic Planning Online (SPOL) has greatly enhanced planning, budget development, and budget monitoring. The College has established integrated planning processes and data mining infrastructure that supports sustainable program review and enrollment management.

The College has revised the College's classified employees salary schedule which has resulted in immediate cost savings, and is financially sustainable.

The College's Faculty Obligation Number continues to be comparatively "High" because of the lack of a sufficient pool of qualified Adjunct Faculty in the college's service area. The College has experienced some decrease in its number of Full Time Equivalent Faculty due to normal attrition as well as to its having offered retirement incentives.

The college's long term debt has also been decreased through the paying off of one of its Certificate Of Participation's with a second expected to be paid off in the near future.

The College's building construction and renovation program and its emphasis on building to LEED (Leadership in Energy and Environmental Design) standards has led to significant reduction in energy costs on campus.

The College's Enrollment Management Plan has been successfully implemented and supports systematic review of the planning and decision making processes. The College is completing financial forecasting with realistic budget assumptions and a conservative approach to projecting Full Time Equivalent Student revenue, including growth. The College attained full restoration in fiscal year 2013-2014 and also grew its enrollment by 1%.

For FY 2014-2015, the College adopted a balanced budget that has ongoing revenues meeting or exceeding ongoing expenditures. The multi-year budget is based on conservative revenue projections and realistic expenditure amounts. Data based forecasting indicates that the College's reserves will continue to be at 5% or greater.

The College has implemented an interim process for making contributions to its OPEB costs in addition to the "pay as you go method". Additionally, the first contribution above this amount of \$30,000 from FY 2013-2014 is slated to be combined with 30% of the amount that the ending balance from FY 2014-2015 exceeds the Board Directed Minimum Reserve of 5% and will be combined and used to create an Other Post Employment Benefits Trust in FY 2015-2016.

Conclusion

The College has resolved this Recommendation and meets the Standard.

