



**WE ARE IVC!**



**FOLLOW UP REPORT**  
November 1, 2021

Submitted by:  
Imperial Community College District,  
Imperial Valley College  
380 East Aten Road • Imperial, CA 92251

Submitted to:  
Accrediting Commission for Community  
and Junior Colleges  
10 Commercial Boulevard • Suite 204 • Novato, CA 94949

**Follow-Up Report**

**Submitted by**

**Imperial Community College District  
380 East Aten Road  
Imperial, CA 92251**

**Submitted to:**

**Accrediting Commission for Community and Junior Colleges  
Western Association of Schools and Colleges**

**November 1, 2021**

## Certification of the Accreditation Follow-Up Report

**To:** Accrediting Commission for Community and Junior Colleges,  
Western Association of Schools and Colleges

**From:** Lennor M. Johnson, Ed. D.  
Interim Superintendent/President  
Imperial Community College District  
Imperial Valley College  
380 E. Aten Road  
Imperial, California 92251

I certify there was broad participation/review by the campus community, and I believe the report accurately reflects the nature and substance of this institution.

Signatures:

  
Lennor Johnson (Oct 22, 2021 12:15 PDT)

Dr. Lennor M. Johnson, Interim Superintendent/President

Oct 22, 2021

Date

  
Mark Edney (Oct 22, 2021 13:00 PDT)

Mark Edney, President, ICCD Governing Board

Oct 22, 2021

Date

  
Javier Melara (Oct 22, 2021 14:31 PDT)

Javier Melara, President, Associated Student Government

Oct 22, 2021

Date

  
Richard Epps (Oct 22, 2021 14:47 PDT)

Richard Epps, President, IVC Academic Senate

Oct 22, 2021

Date

  
Norma Nuñez

Norma Nuñez, President, IVCC/CCA/CTA/NEA

Oct 22, 2021

Date

  
Frances Arce-Gomez

Frances Arce-Gomez, President, CSEA

Oct 22, 2021

Date

  
Joe Henderson (Oct 22, 2021 13:44 PDT)

Joe Henderson, President, PTFA

Oct 22, 2021

Date

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## I. REPORT PREPARATION

In the ACCJC action letter dated February 1, 2021, the Accreditation Commission found that Imperial Valley College (IVC) has addressed Compliance Requirement 1, corrected deficiencies, and meets Standards I.B.2, II.A.3, and II.B.3. However, the Commission found continued noncompliance with Standards I.B.7 and I.B.9 (Compliance Requirement 2). The College was granted a Good Cause Extension. To address the noncompliance, the College is required to submit a Follow-Up Report by November 1, 2021, as well as receive a follow-up visit from a peer review team on November 16, 2021.

Throughout the follow-up report preparation process, Dr. Jia Sun (Accreditation Coordinator), Dr. Christina Tafoya (Accreditation Liaison Officer), and Linda Amidon (Administrative Assistant), conducted several meetings with Vice President Dr. Catherine Webb (ACCJC Institutional Staff Liaison) to discuss the follow-up report and visit. At the first meeting (February 24, 2021), after hearing the guidance of Dr. Webb, we isolated and identified three campus metasystems as the focus for this follow-up report. At the second meeting (April 29, 2021), we developed a structure for the report with the assistance of Dr. Webb. At the third meeting (May 27, 2021) we reviewed and collected feedback from Dr. Webb on a preliminary draft of this report. We would like to extend our warmest appreciation for the assistance provided by the ACCJC and the Commissioners through Dr. Webb's assignment. Dr. Webb is an excellent liaison and was very helpful.

Concurrent with the follow-up report preparation process, IVC also engaged in two rounds of visits with a California Community College Institutional Effectiveness Partnership Initiative Partnership Resource Team (PRT) during the spring 2021 semester. These PRT visits (March 22, 2021 and May 6, 2021) were scheduled to help the institution address the ACCJC recommendations by identifying key issues and producing recommendations and best practices about evaluation of institutional processes and systems. The areas of focus were **Standards I.B.7, I.B.9 College Recommendation 2:** *In order to meet the standard, the Commission requires the College to improve the evaluation of processes and systems that are currently in place.* Institutional representatives and groups that attended the PRT meetings included: President's Cabinet, Academic Senate representatives, College Council representatives, Strategic Educational Master Planning Committee (SEMPC) representatives, Institutional Effectiveness, Institutional Research, and Outcomes and Assessment Committee representatives.

Institutional recommendations and activities from the initial visit were geared towards communication, participatory governance, institutional planning, and inclusion of faculty voices in all efforts [I.01]. Additionally, the Superintendent/President completed an Institutional Innovation and Effectiveness Plan addressing the needs of the institution in support of the advancement of these efforts and recommendations made by the team. Discussions regarding the PRT visits were held at meetings of the Strategic Educational Master Planning Committee (SEMPC).

At the conclusion of both PRT meetings, there were recommendations proposed which supported changes to the governance committee structure and a unifying evaluation process, as well as technological solutions for integrated planning. The College considered these recommendations

as part of its work to address Compliance Requirement 2 and has addressed the improvements made throughout the development of this follow-up report.

Following receipt or notification of the Good Cause Extension, the Continuous Accreditation Readiness Team (CART) immediately began work on developing the follow-up report and preparation for the campus visit. Below is a brief summary of agenda items:

- March 4, 2021 - CART briefed on the ACCJC action/recommendation and discussed the actions needed to address the recommendation.
- April 2, 2021 - CART developed and approved a schedule for the writing and approval of the follow-up report.
- April 16, 2021 - CART reviewed and agreed to an outline format for the follow-up report.
- May 21, 2021 - CART reviewed and approved a first draft of the follow-up report.
- June 4, 2021 – CART reviewed and approved a revised second draft of the follow-up report.

**Key Personnel involved in the development and preparation of the follow-up report:**

VP for Academic Services/Accreditation Liaison Officer	Dr. Christina Tafoya
Administrative Assistant to the VP for Academic Services	Mrs. Linda Amidon
Faculty Accreditation Coordinator	Dr. Jia Sun
Interim Associate Dean of Institutional Effectiveness, Equity, and Student Success	Ms. Yolanda Cataño
Dean of Arts, Letters & Learning Services	Mrs. Betsy Lane
Faculty SLO Coordinator	Mr. Kevin Howell
Continuous Accreditation Readiness Team	CART Members

## II. RESPONSE TO THE COMMISSION ACTION LETTER

### Compliance Recommendation and Associated Sub-Standards

*Standards I.B.7, I.B.9 (College Recommendation 2 – Compliance): In order to meet the standards, the Commission requires the college to improve the evaluation of processes and systems that are currently in place, and ensure they are more systematic and routine.*

*Standard I.B.7. The institution regularly evaluates its policies and practices across all areas of the institution, including instructional programs, student and learning support services, resource management, and governance processes to assure their effectiveness in supporting academic quality and accomplishment of mission.*

#### **2019 External Evaluation Team Findings:**

“The team noted, *due to the lack of evidence, IVC does not engage in regular evaluation of all policies and practices across all areas of the institution* (emphasis added). Strategies are implemented to address performance gaps and evaluated through program review; however, the College does not have systems in place to regularly evaluate its policies and practices to assure their effectiveness in supporting academic quality and accomplishment of the mission” (External Team Report 23).

“There are no formalized procedures that outline how policies or other governance structures should be evaluated. The team found that the budgetary process is outlined, *but there is no evidence that there is an evaluation of this process and that it is being performed on a regular basis* (emphasis added). The team suggests the College should improve the evaluation of processes and systems that are currently in place, and ensure they are more systematic and routine” (External Team Report 24).

*Standard I.B.9. The institution engages in continuous, broad based, systematic evaluation and planning. The institution integrates program review, planning, and resource allocation into a comprehensive process that leads to accomplishment of its mission and improvement of institutional effectiveness and academic quality. Institutional planning addresses short- and long-range needs for educational programs and services and for human, physical, technology, and financial resources.*

#### **2019 External Evaluation Team Findings:**

“The team confirmed that IVC engages in an annual evaluation process through the Program Review process; however, continuous, broad based, and systematic evaluation and planning *related to institutional processes, policies, practices, services and programs is somewhat limited and inconsistent* (emphasis added). The team suggests the College should consider improving the evaluation of processes and systems that are currently in place, and ensure they are more systematic and routine” (Evaluation Team Report 24).

The College initiated addressing the remaining compliance recommendation with a series of meetings to reflect on college processes and determine what was lacking in the initial follow-up

report to demonstrate continuous, broad-based, systemic, regular, and routine evaluation of these processes. These conversations occurred within CART, within the President's Cabinet, within College Leadership Council, and with an expanded Deans' Council. Through these meetings the College verified that most institutional processes already undergo continuous, broad-based, systemic, regular, and routine evaluation to some level; therefore, our task was to ensure that all institutional processes enjoy this level of evaluation routinely on a regular cycle and to clearly document these evaluations. The evaluations need a higher level of self-reflection in order to contextualize and document that the institutional processes effectively ensure the policies and practices support academic quality and accomplish the mission.

The College focused on reworking the three major campus metasystems that span the entirety of the organization. In documenting the improved and formalized evaluation and planning related to these three metasystems, the College consistently examines all relevant institutional processes, policies, practices, services, and programs. These metasystems running productively ensures the College is effectively supporting academic quality and accomplishing the mission. These three metasystems are:

- Learning and Service Area Outcomes
- Program Review, Planning, and Budget Allocation
- College Governance Structure

Each section below starts with a description of the metasystem and then follows with the evaluation and planning that is in place for the metasystem with examples of improvements that are a result of the evaluation and planning process, ensuring the support of academic quality and accomplishing the mission.



### III. THE LEARNING AND SERVICE AREA OUTCOMES METASYSTEM

#### Description

Imperial Valley College’s learning and service area outcomes metasystem is a distinct component that feeds into program review. The College has improved the annual program review procedures in part by integrating learning outcomes, program review, and the related budget planning. The learning outcomes process usually starts with individual instructors assessing course-level student learning outcomes (CSLO) for their courses. The CSLOs are then aggregated and reported to the department chairs. Once CSLO data are collected, individual course leads conduct meetings for courses with all instructors of that course to discuss the aggregated CSLOs for that particular course. The discussion of the outcomes is then documented on what is called the “Closing the Loop” form [[III.01](#)].

“Closing the Loop” refers to the use of assessment results to improve student learning or service to students through collegial dialog informed by the results of instructional learning or student service outcome assessment. It is part of the continuous cycle of collecting assessment results, evaluating them, using the evaluations to identify actions that will improve student learning and services to students, implementing those actions, and then cycling back to collecting assessment results, etc.

Once completed and collected, department chairs/coordinators facilitate the discussion of all of the “Closing the Loop” assessment results during departmental meetings in order to evaluate the effectiveness of departmental course offerings and determine if any changes are necessary for either the instructional methods for particular courses or the CSLOs. The department chairs/coordinators use aggregated CSLO data to complete program learning outcomes (PLOs), which are assessed at least once every three years. Service area outcomes (SAOs) follow a corollary process that focuses on improving services to students and business processes. Each portion of the assessment, discussions, and planning occur within a scheduled three-year cycle. Institutional learning outcomes (ILOs) are assessed annually using a student survey.

## SLO, PLO, APR, and CPR Three-Year Cycle

Year One →

- Planning Cycle of SLOs Completed by Fall
- Percentage of SLOs Assessed and Loop Closed for Fall and Spring Semesters
- PLO Assessment Tools Updated by Fall
- SLOs Used for APR

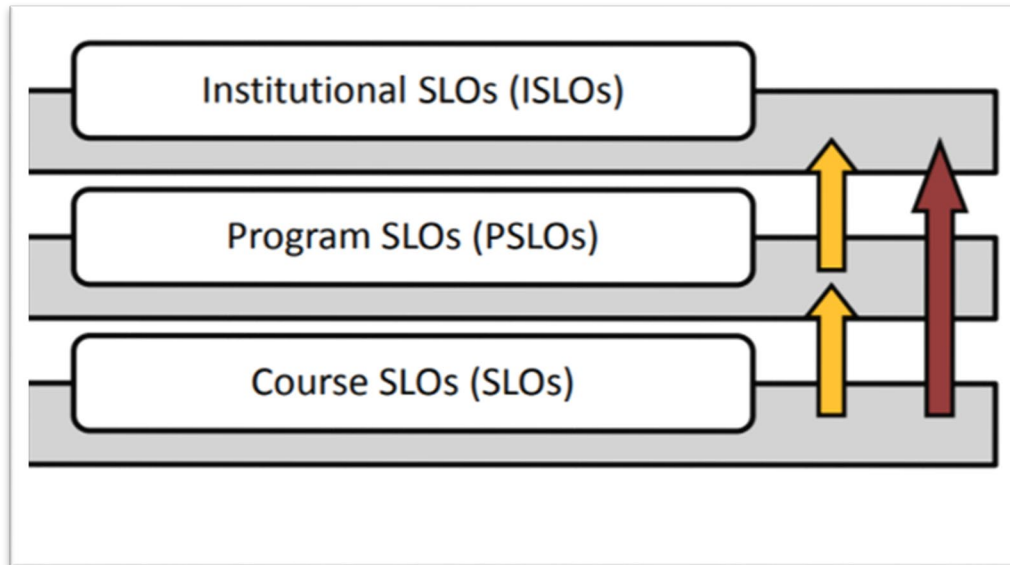
Year Two →

- Percentage of SLOs Assessed and Loop Closed for Fall and Spring Semesters
- SLOs Used to Support APR
- PLOs Assessment Completed in Spring Semester to Support Year Three Fall CPR
- All SLOs Should Be Assessed by the End of the Spring Semester

Year Three →

- PLO Assessment Data Collected from Spring Semester of Year Two Uploaded to PLO Form
- Alignment Map of SLOs, PLOs, and ILOs Completed and Added to the PLO Form
- PLO Form and Alignment Map Support the CPR.

CSLO/PLO/ILO/SAOs datasets are utilized in the completion of the annual program review (annual updates) and the comprehensive program review (three-year cycle). The processes for annual program review (APR) and comprehensive program review (CPR) are discussed in detail in the subsequent metasystem (section IV of this report). Following the completion of program review reports by departments, the reviews are approved by area deans and vice presidents. The final aggregate effectiveness metrics on the learning and service area outcomes metasystem are collected and reviewed by the new Institutional Effectiveness and Development Committee (IEDC), which feeds the information to Integrated Consultation Council (ICC).



### Evaluation and Planning

The College determined that the external team’s finding of the “somewhat limited and inconsistent” evaluation occurred within the Learning and Service Area Outcome Metasystem because of the inconsistency of the tools used and the complete reliance of the process on an individual coordinator rather than the College developing a comprehensive approach involving a designated tool and a responsible committee. In the past, as the faculty Student Learning Outcomes Coordinator changed, the process would change around that individual and the tool(s) that individual selected rather than a cohesive evaluation by the institution. This made it difficult for an institutional-wide evaluation to occur since the information was not as accessible and as clear as it needed to be.

The difficulty in using SPOL was a key factor that contributed to the frequent changes to tools used in the learning outcomes assessment process. For the last several years the College has been using a Canvas shell to collect learning outcomes assessment data [III.02; III.03]. However, the external evaluation team that visited the College in 2019 found this process “resulted in little connection between the collection of assessment data and program review and that learning outcomes were being under-utilized in institutional processes.” This issue has now been addressed with the implementation of Nuventive for outcomes and assessment in fall 2021 [III.04]. Nuventive allows for learning outcomes assessments to be directly linked to our program review and planning process with mapping that ensures the entire process is advancing the College mission.

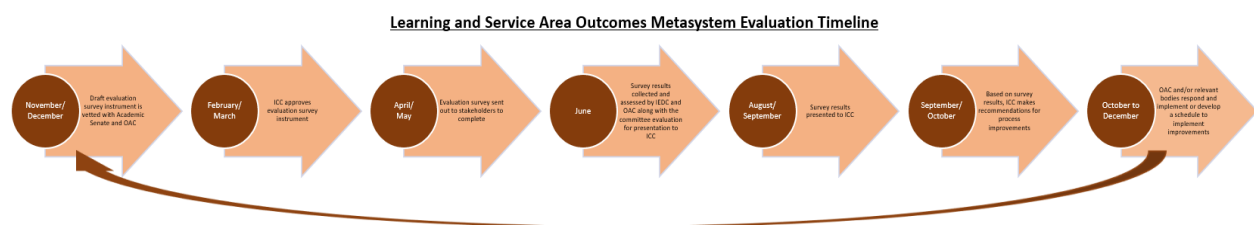
The Learning and Service Area Outcomes Metasystem is overseen primarily by the Outcomes and Assessment Committee (OAC). The OAC was developed as a reorganization of a former committee called the Student Learning Outcomes Committee. OAC developed as a subcommittee of the Academic Senate, being a participatory governance committee that includes representatives from faculty, classified staff, administration, and students. The Student Learning Outcomes (SLO) Coordinator is a faculty member who serves as the OAC committee chair. The

SLO Coordinator guides the process set by the OAC by working directly with faculty, especially department chairs/coordinators, as well as classified staff and administrators, throughout the academic year [III.05].

The process of evaluating the learning and service area outcomes metasytem is conducted primarily by the OAC annually. For the 2021 academic year, this evaluation occurred during the final meeting of the spring semester [III.06] and the first meeting during the fall semester [III.07]. The OAC determined that the committee will set the cycle to evaluate the overall process, including the tools, forms, sites, and documents related to learning outcomes at the beginning of each fall semester with a follow-up evaluation of the process in spring semester. Previously, the College tended to simply make modifications to any piece of the process as feedback came in. Now, OAC will have formal discussion and action on a specific timeline. This information will then route to the Institutional Effectiveness and Development Committee. This information will be captured in the self-evaluation and then route to the IEDC.

The OAC is central in evaluating the Learning and Service Area Outcomes Metasystem because the committee plays several key roles in the overall process. At the end of each spring semester, the OAC completes a committee self-evaluation, which is typically reviewed and finalized at the beginning of the following fall semester. This self-evaluation reviews the performance of the committee as well as its main role of overseeing the Learning and Service Area Outcomes process. The OAC annually reviews the fundamental components of the process. The timeframe and process for CSLOs/PLOs/ILOs/SAOs are evaluated through committee discussion [III.08]. The survey questions used for the ILOs are evaluated annually by the OAC and updated based on that review [III.09]. This evaluation process is summarized for the year within several fields on the instrument used for the committee self-evaluation [III.10].

One example of the action seen as a result of the evaluation by OAC of the Learning and Service Area Outcomes Metasystem is the improvement realized related to the creation of the “Closing the Loop” form mentioned earlier in this report. This form documents the final steps of course learning outcomes assessment and records further improvements that resulted from that process. Its title derives from the fact that its purpose is to “close the loop” on the continuous quality improvement cycle [III.11].



As part of the new governance structure (described more in section V of this report and in the Outcomes and Assessment Handbook), the Institutional Effectiveness and Development Committee (IEDC) aggregates the committee self-evaluations and other crucial information, such as the evaluation survey, and uses them to gauge the overall effectiveness of the processes in supporting academic quality and accomplishing the College mission. The results of institutional process evaluations are reported back to the originating committee and up to the new

Integrated Consultation Council, which will confirm effectiveness or respond with recommended improvements aligned with the Comprehensive Master Plan.

#### **IV. THE PROGRAM REVIEW, PLANNING, AND BUDGET ALLOCATION METASYSTEM**

##### **Description**

The College engages in a holistic periodic review of each academic and service area program as a means to engage every part of the district in self-reflection, planning, and resource allocation. Through the process of program review, the College determines its own effectiveness in meeting the needs of the students and using resources effectively. Therefore, the College considers program review essential for driving institutional planning, budget development, and program accountability. Program review uses statistical data to describe the program/unit in terms of student contact, learning outcomes and staff assigned to the unit. Per the Program Review Handbook [[IV.01](#)], the purpose of program review is to examine programs/units for:

- Institutional effectiveness
- Integration of objectives with college planning and budgetary processes
- Viability and relevancy to the College Mission, Vision and Value
- Alignment with current plans and initiatives (Vision for Success, Student Equity, Guided Pathways, etc.), as well as to the IVC Strategic Educational Master Plan

Each unit completes a comprehensive program review every three years with annual program review updates occurring each year in between. The program review cycle kicks off each year starting in the fall semester. Academic programs use the APR template while all other non-instructional programs use the Service Area Program Review (SAPR) template [[IV.02](#); [IV.03](#)]. The components that comprise a unit's program review generally include the following.

- Statistical data that describe the program/unit in terms of student contact, learning outcomes and staff assigned to the unit
- SLO/SAO/PLO summaries
- Alignment with Vision for Success Goals
- Survey results that indicate the customers' degree of satisfaction with the program or service, learning outcomes, and suggestions for improvement

In addition, the comprehensive program review includes a self-study of the program/unit that addresses its long-term goals, functions and services with evidence supporting one or more institutional goals, and an evaluation of academic/student data and/or survey results. The self-study also includes recommendations for improvement as well as a work plan that outlines resources required for implementation based upon analysis of data and identifies one or more institutional goals the resource supports. Service areas complete a SWOT analysis as part of the self-study while academic areas complete a thorough analysis of enrollment, student outcomes, and linkage to existing college plans.

Through program review, programs/units review, analyze, and assess the content, currency, direction, and quality of all programs and services to continuously improve the unit. Specifically, each unit's program review will:

- Ensure that all college programs and services are functioning in support of the College’s student-centered mission
- Ensure that all program goals, objectives, and resource requests align with one or more institutional goals and objectives
- Promote steady improvement in the quality and currency of all college programs and services with the use of S.M.A.R.T. goals
- Provide a body of evidence of institutional effectiveness at all levels for accreditation
- Support the integration of the College mission in all programs and services
- Facilitate self-analysis of each unit’s functions and its relationship to college goals and the internal and external conditions that impact its operation
- Note areas of strength and acknowledge accomplishments
- Note areas in need of improvement to alert the college to concerns/issues in time for proactive solutions
- Provide a vehicle for information-based, timely, collegial consultation for budget consideration to support the development and improvement of all college programs and services

The program review process also serves as a basis for annual resource request prioritization and budget planning. Following review by the area administrator and vice president, budget enhancement requests documented in program reviews are submitted to the resource allocation committees and incorporated into the College’s annual budget process. The budget enhancement process is linked to each program review as the final step to request new or additional resources based on the findings and planning done through program review. The Institutional Research department collects the budget enhancement requests and groups them into categories for review.

The budget enhancement requests in each category are prioritized through a series of meetings, which end in recommendations to President’s Cabinet on which requests should be funded. Then, President’s Cabinet makes final determinations on which requests will be funded and the funding source. As part of the new governance structure described in detail in section V, the budget enhancement process is expected to be simplified to a five-step progression: From the program level, outcomes are fed to the Dean/VP level and then to the new Integrated Consultation Council for final recommendations to the President’s Cabinet for review and approval.

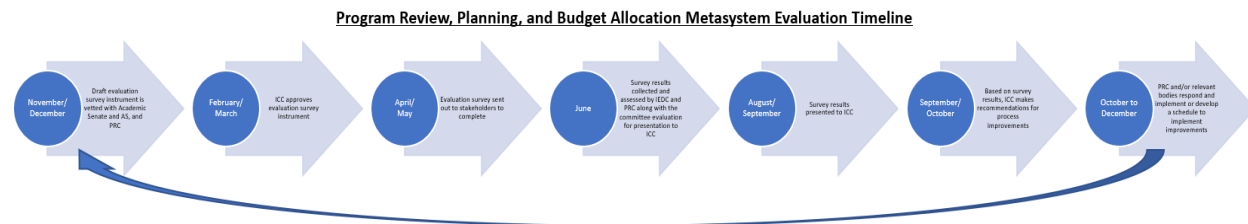
### **Evaluation and Planning**

After evaluation of the process, the College determined that the external team finding of the “somewhat limited and inconsistent” evaluation occurred with the Program Review, Planning, and Budget Allocation Metasystem because of the lack of a uniform tool or an outline within the participatory governance system of how processes like program review fit within the overall planning and budgetary allocation processes. This made it difficult for an institution-wide evaluation to occur since the information was not as accessible and clear as it needed to be. This need has now been addressed through a participatory governance reorganization and through the implementation of Nuventive for program review and integrated planning in fall 2021.

Prior to the governance restructuring (discussed more in section V), the Strategic Educational Master Planning Committee (SEMPC) performed annual evaluations of the program review process [IV.04; IV.05]. Through this process, SEMPC collected information on the satisfaction levels of all program review completers and support staff to improve the annual process. Those results were presented to SEMPC each fall and used to make recommendations [IV.06]. Through the evaluations, a persistent dissatisfaction became evident with the existing system, Strategic Planning Online (SPOL) [IV.07; IV.08], and through the support of President's Cabinet, SEMPC provided direction to committee members to begin exploring other software programs to replace SPOL [IV.09]. The decision to select Nuventive was supported through the PRT feedback related to the best options for program review software tools.

The PRT provided the College two main recommendations, which included updates to the governance committee structure (see section V) and evaluation of a technological solution for integrated planning. The institution investigated purchasing a new software system with the goal of choosing by the end of spring 2021. The College eventually was able to determine that two systems, eLumen and Nuventive, were the best options to consider for replacing SPOL. Both new software systems were presented to various stakeholders on campus. Demonstrations of both systems were provided during these presentation sessions [IV.10]. Utilizing the evaluation rubric template provided by the PRT, a survey was conducted to evaluate the eLumen and Nuventive systems, and of the respondents, more than half preferred Nuventive [IV.11]. Implementation of the new integrated planning software began in July 2021 with the first use cycle in the 2021-22 academic year. This software tool improvement illustrates an example of action following evaluation by SEMPC of the institution-level process for program review and integrated planning [IV.12].

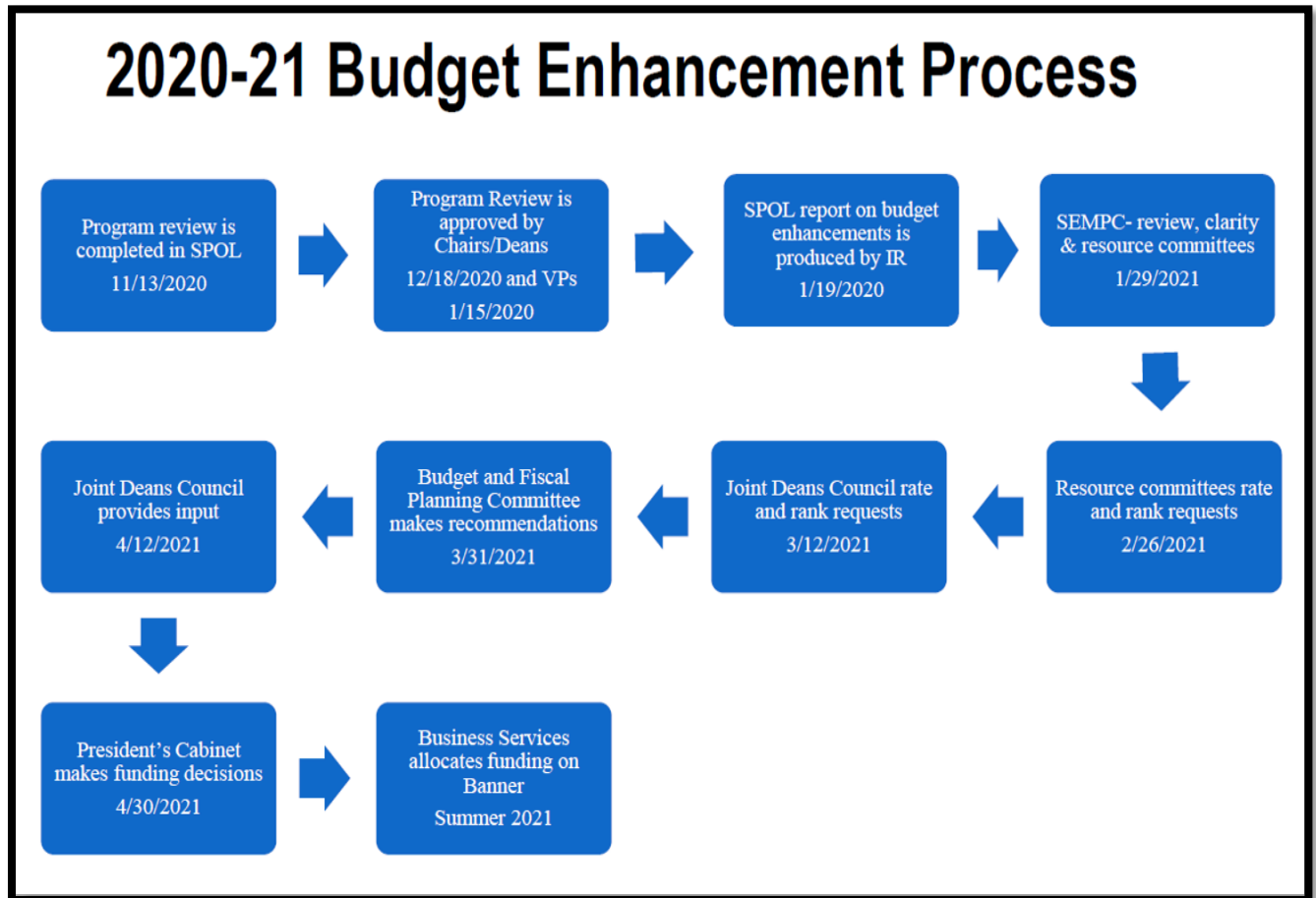
With the transition from SEMPC to a dedicated Program Review Committee (PRC) under the new governance structure, the PRC will now be primary in the program review evaluation efforts. As described in the Program Review Handbook, IEDC aggregates the committee self-evaluations and other crucial information, such as the metasytem evaluation survey, and uses them to assist the College in gauging the overall effectiveness of the processes in supporting academic quality and accomplishing the College mission. Through creating a specialized PRC and expanding the evaluation beyond the PRC, the College has taken steps to improve the alignment of the evaluation process with the College mission.



Specifically, the current process of evaluating program review functions has been expanded to include a metasytem survey that includes a measure of satisfaction of the Nuventive software with additional questions on the evaluation of the current three-year cycle, the budget enhancement process, and a mechanism for providing feedback to the PRC to ensure that the process includes a continuous quality improvement loop.

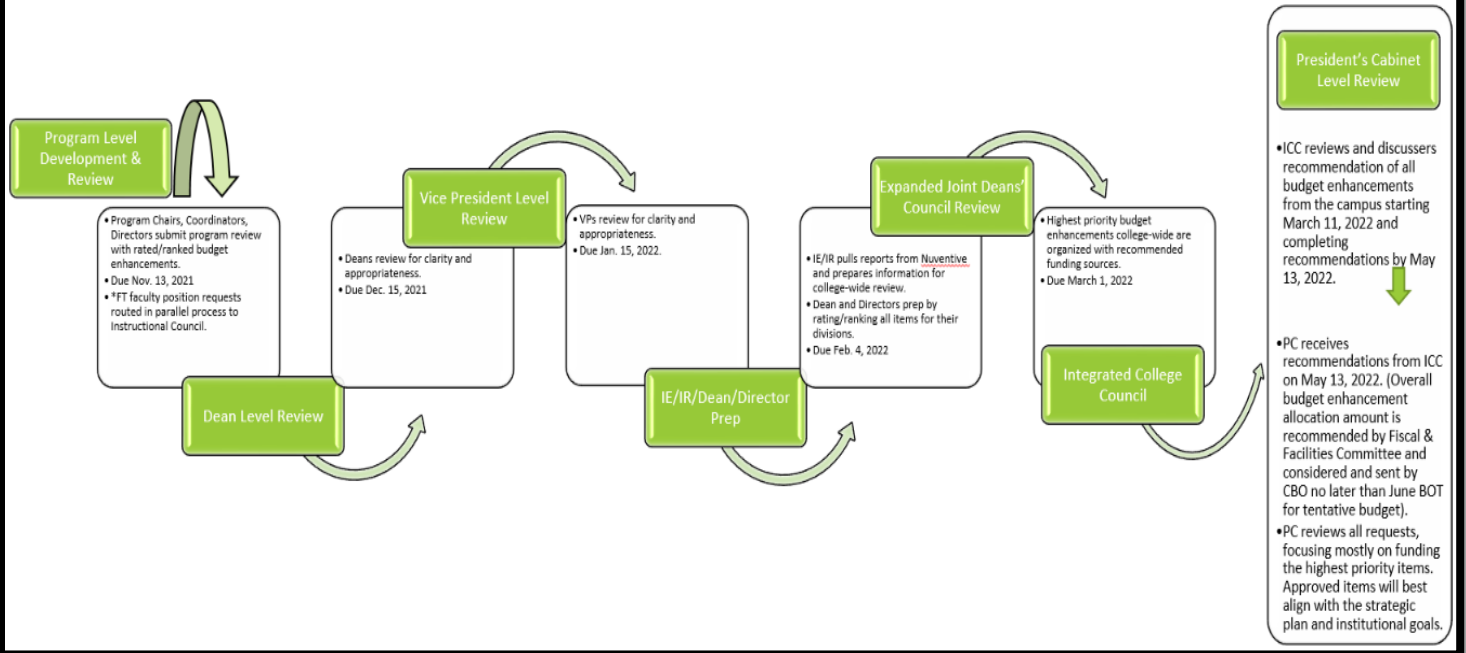


The flowcharts below illustrate the institutional improvements that were achieved in the Program Review, Planning, and Budget Allocation Metasystem between 2020-21 and 2021-22 years as a result of the institution-level evaluation and resulting action to ensure academic quality and accomplishment of the mission. The improvements include the removal of the resource committees and the addition of ICC as a final recommending body with college-wide representation.



# 2021-2022

## Program Review & Budget Enhancement Process



## V. THE GOVERNANCE STRUCTURE METASYSTEM

### Description

The College's governance structure has developed over time and has the tell-tale signs of an organization that has experienced periods of rapid growth. This has resulted in a structure that was not designed to meet the existing College needs, but rather was added to organically as needs became evident. As a result, the College decided to engage in a thoughtful and purposeful governance reorganization.

Along with reorganizing the governance structure, the College has endeavored to reduce college-wide meeting time conflicts, redundancies in committee charge, and to address the College's desire to increase transparency and representation from all stakeholders. The design of these endeavors is reflected in the new Governance Handbook [V.01]. The handbook provides an overview of governance at the college as well as integrated planning efforts. The handbook provides a guide to keep the actions of the College's governance structure aligned with the College's Comprehensive Strategic Plan, Accreditation Standards, Governing Board goals, constituency representative's input, and District policies and procedures.

### Evaluation and Planning

After evaluation of the process, the College determined that the external team finding of the "somewhat limited and inconsistent" evaluation occurred with the Governance Structure Metasystem because of the lack of a central committee to oversee and ensure quality of all institutional processes and verify progress toward the institution's comprehensive plans. In order to effectively respond to the compliance recommendation, the College determined that there was a critical need to overhaul its governance structure. This need became apparent because of the lack of an overarching governance committee that would be responsible for institution-level review and planning. This body was needed to provide institution-level recommendations for strategic planning, policies and procedures, problem management, and campus communication. This body has taken shape now to dissolve the College Council and create the Integrated Consultation Council (ICC). In addition to ICC, the governance reorganization has led to the dissolution of SEMPC and Professional Development Committee in favor of a distinct Program Review Committee and another new group called the Institutional Effectiveness & Development Committee.

The governance reorganization discussions occurred across various campus committees based on the need for improvement to the current college system evaluation and planning process. A major theme of these discussions was the need to develop a type of "coordinating council". It was suggested that this council would be modeled after a similar committee at the College of the Desert, which is composed of department chairs and area leads. The council evaluated the policies and procedures across all areas of the institution. The Continuous Accreditation Readiness Team (CART) and College Council held discussions related to the current governance structure on April 16, 2019 [V.02], and September 25, 2019 [V.03], respectively. Those two

committees ultimately recommended that the College undertake a reorganization of the governance committee structure in order to improve college evaluation and planning processes.

While plans to form a “coordinating council” were initially captured in 2019 [V.04], the realization of these plans was delayed due to the need to respond to the COVID-19 pandemic during 2020. In the spring of 2021, the College President/Superintendent presented draft plans for the formation of the Integrated Consultation Council (ICC), which was designed to serve as the top-level committee for participatory governance and institutional planning for the College. ICC has the primary role in assuring that all constituents are represented and participating in institution-level decision-making. Overall, ICC provides recommendations based on input from all constituent groups and communicates those recommendations to all constituents with basic functions of:

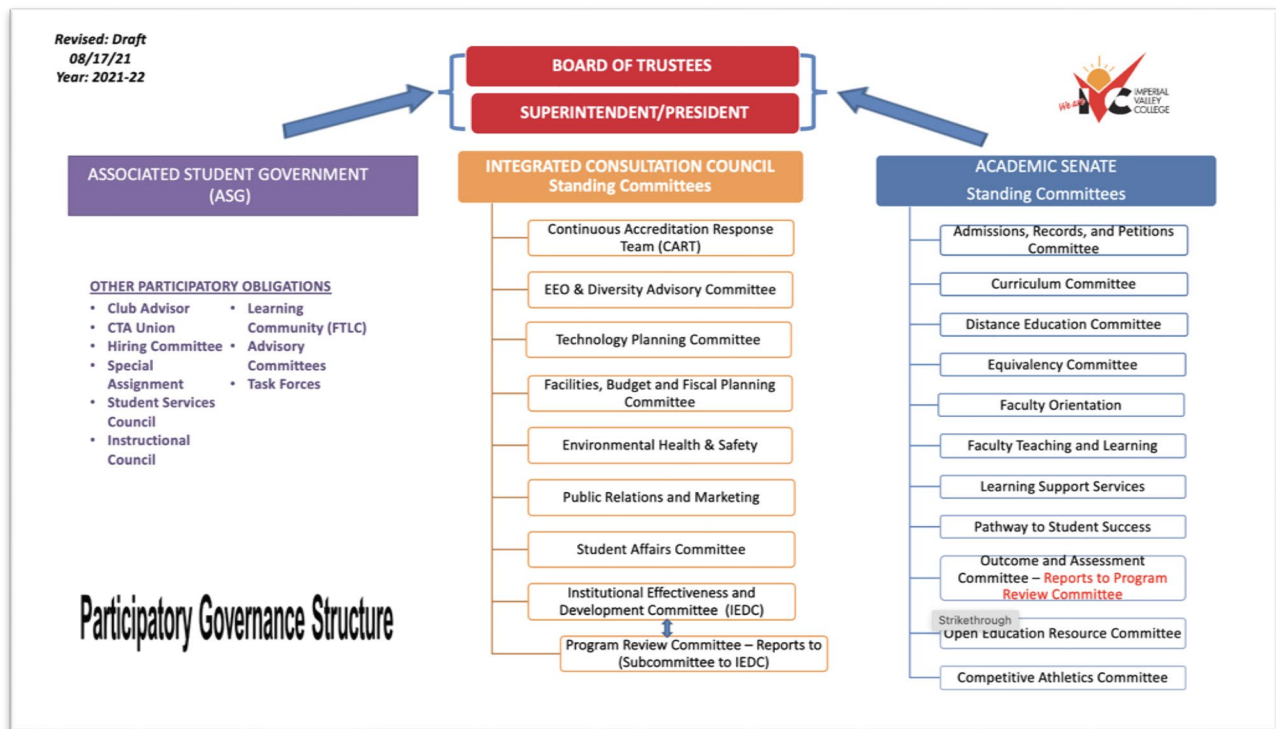
- Reviewing and revising the College Mission on a tri-annual basis
- Receiving information from all college committees and task force groups
- Establishing subcommittees and task force groups as deemed necessary
- Periodically reviewing the Governance Handbook and recommending modifications, if necessary, to improve institutional effectiveness
- Receiving, reviewing, and establishing institutional priorities and goals based on program review data
- Systematically evaluating progress being made by the ICC standing committees to achieve agreed-upon institutional goals in alignment with the College Mission
- Providing oversight and being responsible for integrating all institutional plans and documents and communicating these to the campus community
- Addressing college-wide problems that may diminish our environment of trust which inhibits well-coordinated efforts and focus on students
- Prioritizing institutional budget enhancement requests
- Reviewing and making recommendations regarding college policies and procedures

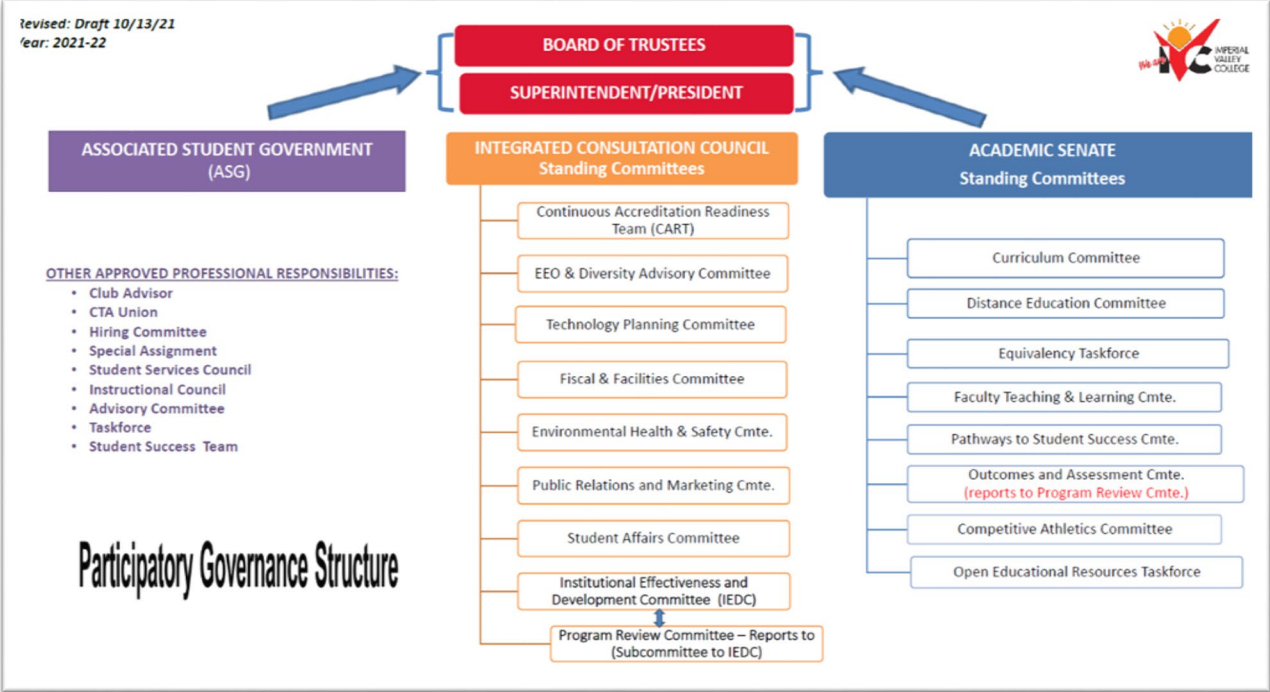
The plan for ICC’s formation was presented with an overall plan for a new proposed governance structure. Feedback and approval was provided by Academic Senate, College Council, Continuous Accreditation Readiness Team, Associated Student Government, and SEMPC [V.05; V.06; V.07; V.08; V.09].

Once the committee was established, ICC functioned as part of the evaluative process for the governance metasytem [V.10]. By following the philosophy of collegial consultation, the ICC aims to include the structures and processes for decision-making that engage all campus stakeholders: students, staff, faculty, and administrators, in reaching and implementing decisions that further the primary mission of the College—to educate students and place learning at the core of our existence.

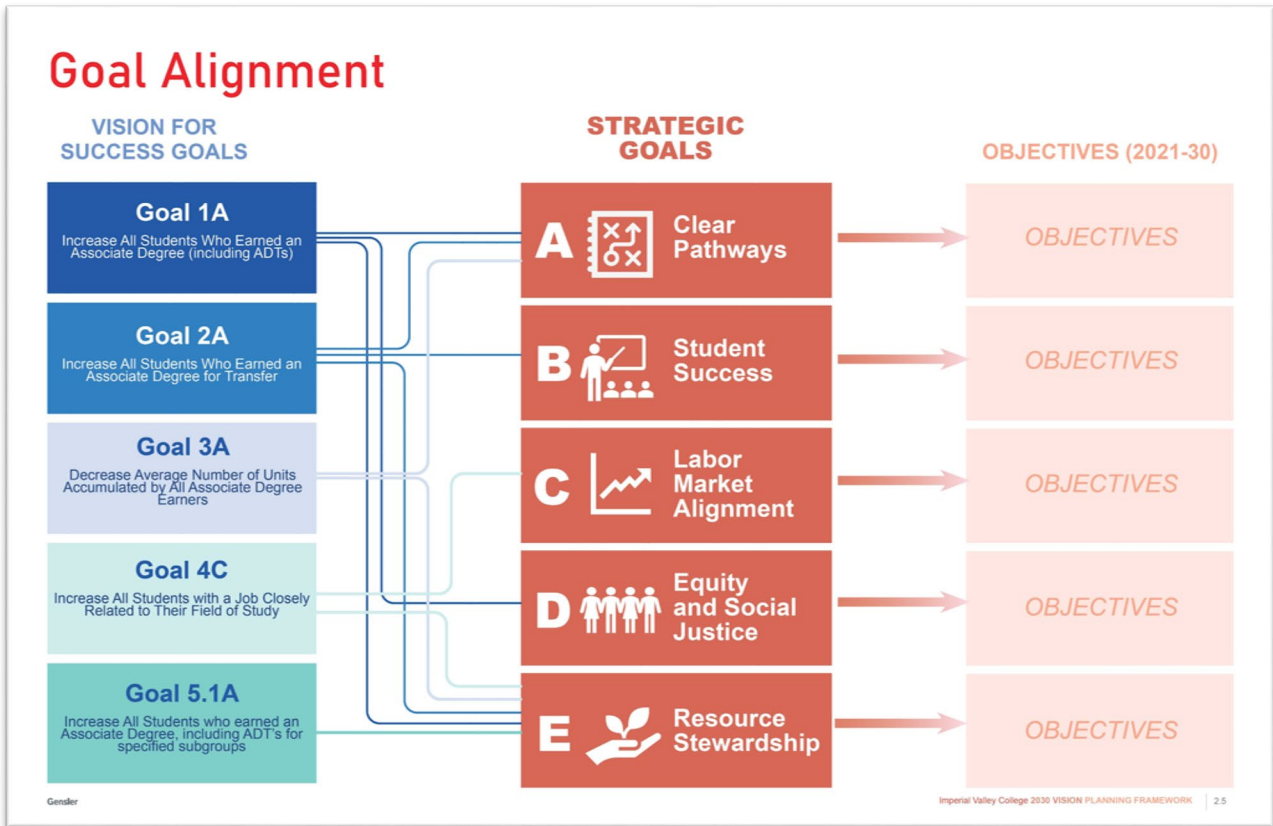
ICC serves as the overarching committee to evaluate the revamped governance structure. Since ICC has a cross-constituent membership, this ensures that all stakeholders will be able to weigh in on the effectiveness of the governance metasytem. The composition of ICC includes a number of representatives from various sectors in the institution [V.11].

The subcommittees under the proposed governance structure have undergone substantive changes also that are still under review. The two graphics below show the changes implemented between August 2021 and October 2021 while feedback was still being captured. The Competitive Athletics Committee, Public Relations and Marketing Committee, and Student Affairs Committee have remained the same. Minor reorganizations have been made to the Facilities, Environmental Health and Safety Committee with the removal of facilities and renaming Budget and Fiscal Planning to Fiscal and Facilities Committee. The Professional Development Committee will no longer serve as a subcommittee and all members and work have been placed under IEDC. The new Program Review Committee (PRC) will also report to IEDC. OAC remains a subcommittee of the Academic Senate but will report to the PRC.

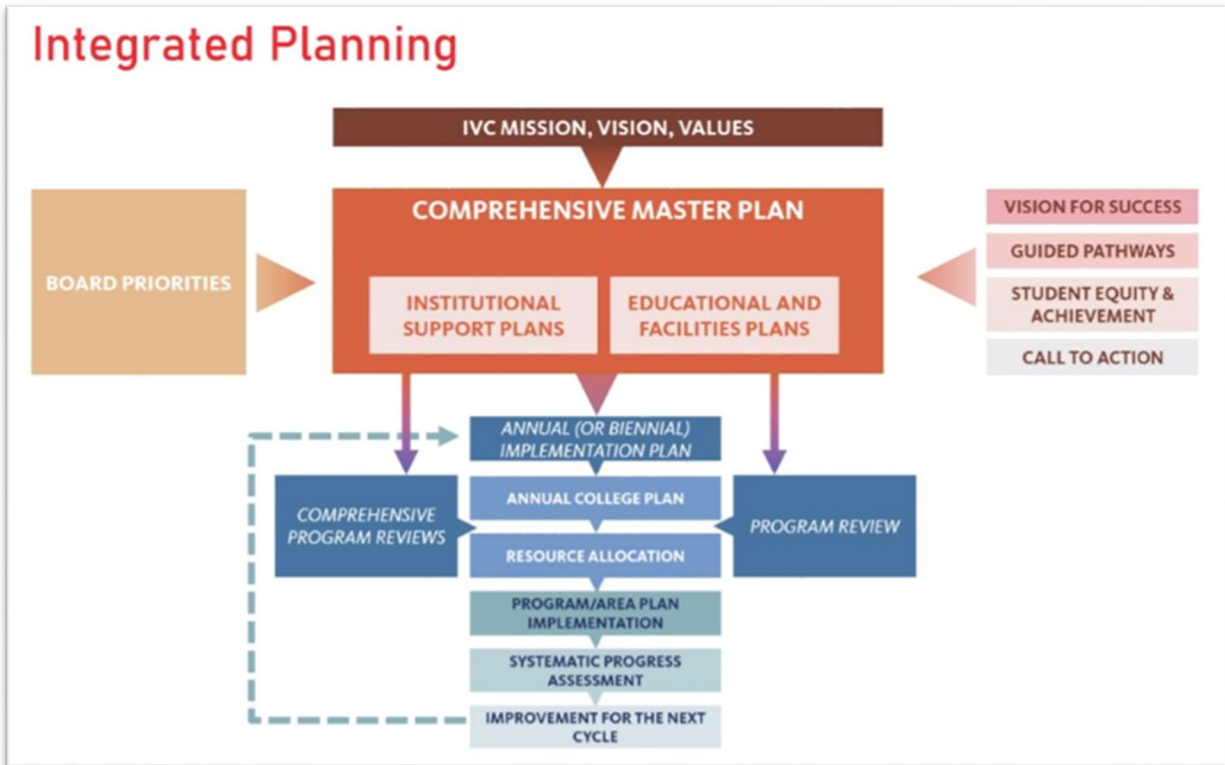




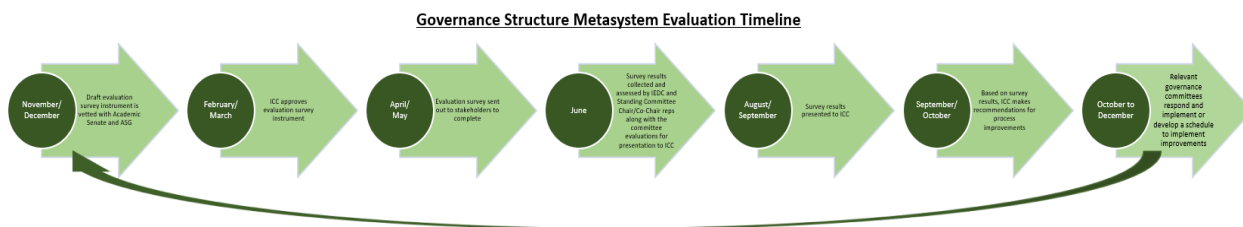
The governance reorganization comes in tandem with the College’s 2030 Comprehensive Master Plan (CMP) [V.12]. In 2020-21, the College collaborated with the community in a five-step planning process to develop the CMP, which was then presented to all leadership bodies, including the Board of Trustees, Academic Senate, College Council, College Leadership Council, Instructional Council, Student Services Council, and the Associated Student Government. The CMP was adopted by the Board of Trustees on July 21, 2021 [V.13]. The CMP developed five strategic goals in alignment with the College’s vision for success goals.



As part of the CMP, the College has included institutional, education, and facilities plans that are congruent to Board priorities and in alignment with the College’s mission, vision, and values. Important to note is that as part of the intended outcomes of the CMP, the College will consider new mission, vision, and values in the upcoming year. IVC’s Integrated Planning Model is informed by the Vision for Success, Guided Pathways, Student Equity and Achievement plan, and the program review plan. It also meets Board Policies (BP) and Administrative Procedures (AP) 2510 Participation in Local Decision-Making, 3225 Institutional Effectiveness, and 3250 Institutional Planning [V.14; V.15; V.16]. Going forward, IEDC will be charged with the execution and implementation of the CMP under the umbrella of institutional effectiveness. Moreover, ICC will have oversight on this process for integrated planning as shown in the graphic below.



Each spring, ICC will arrange a college-wide survey regarding the effectiveness of the governance metasystem. This process will ensure comprehensive evaluation of the extent to which the framework of the new proposed governance structure as a whole supports the College’s goals, mission, and strategic priorities. ICC will review the results of the survey as well as the self-assessment forms completed annually by the standing participatory governance committees. IEDC will be responsible for drafting the survey instrument for campus-wide input.



Regular evaluation of the governance metasystem will take place in late spring of each year using the aggregate results of the committee self-assessments and the metasystem survey. This evaluation will be used to assess how well participatory governance is allowing for collaborative goal-setting and problem-solving processes and communication that involves representatives from appropriate constituent groups who engage in decision-making.



## Appendices

### I. **Report Preparation**

I.01 PRT Summary of Initial Visit

### III. **The Learning and Service Area Outcomes Metasystem**

- III.01 Closing the Loop Form
- III.02 Emails from SLO Coordinator 10/11/17 and 12/7/17
- III.03 OAC Minutes 3/9/21
- III.04 OAC Minutes 10/12/21
- III.05 SEMPC Minutes 3/5/21
- III.06 OAC Minutes 6/8/21
- III.07 OAC Minutes 9/14/21
- III.08 OAC Minutes 4/13/21
- III.09 Outcomes and Assessment Handbook
- III.10 OAC Self-Evaluation
- III.11 Academic Senate Minutes 5/5/21

### IV. **The Program Review, Planning, and Budget Allocation Metasystem**

- IV.01 Draft Program Review Handbook
- IV.02 Academic Program Review Template
- IV.03 Service Area Program Review Template
- IV.04 2018-19 Program Review Evaluation
- IV.05 2019-20 Program Review Evaluation
- IV.06 SEMPC Minutes 12/4/20
- IV.07 2018-19 Program Review Evaluation, Questions 5 and 7
- IV.08 2019-20 Program Review Evaluation, Questions 5 and 7
- IV.09 SEMPC Minutes 9/6/19
- IV.10 eLumen and Nuventive Presentation Sessions
- IV.11 eLumen and Nuventive Survey Results
- IV.12 SEMPC Minutes 4/2/21

### V. **The Governance Structure Metasystem**

- V.01 Draft Governance Handbook
- V.02 CART Minutes 4/16/19
- V.03 College Council Minutes 9/25/19
- V.04 CART Minutes 10/18/19
- V.05 Academic Senate Minutes 3/31/21 and 5/5/21
- V.06 CART Minutes 4/16/21
- V.07 College Council Minutes 3/24/21 and 4/28/21

- V.08 Associated Student Government Minutes 4/12/21 and 5/10/21
- V.09 SEMPC Minutes 6/4/21
- V.10 ICC Minutes 9/10/21
- V.11 ICC Membership Composition
- V.12 2030 Vision Comprehensive Master Plan
- V.13 Board Minutes 7/21/21
- V.14 Board Policy and Administrative Procedure 2510 Participation in Local Decision-Making
- V.15 Board Policy and Administrative Procedure 3225 Institutional Effectiveness
- V.16 Board Policy 3250 Institutional Planning

## Glossary of Acronyms

AP	Administrative Procedure
APR	Annual Program Review
BP	Board Policy
CART	Continuous Accreditation Readiness Team
CMP	Comprehensive Master Plan
CPR	Comprehensive Program Review
CSLO	Course Student Learning Outcome
ICC	Integrated Consultation Council
IEDC	Institutional Effectiveness and Development Committee
IEPI	Institutional Effectiveness Partnership Initiative
ILO	Institutional Learning Outcome
IVC	Imperial Valley College
OAC	Outcomes and Assessment Committee
PLO	Program Learning Outcome
PRC	Program Review Committee
PRT	Partnership Resource Team
SAO	Service Area Outcomes
SAPR	Service Area Program Review
SEMPC	Strategic Educational Master Planning Committee
SLO	Student Learning Outcomes
SMART	Specific, Measurable, Attainable, Relevant, Time-Limited
SPOL	Strategic Planning Online