



Assessment Committee
Minutes for October 11, 2023
9:00- 10:30 am
Operations Center (OC) 116

Meeting Participants

Committee Members Present

Greg Aycock, Caitlin Busso, Tami Comstock, Ashlee Johnson (co-chair), Daren Koch, Stephany Kyriakos, Lisa Martin, Jethro Midgett, Stephen Park, Aldo Yañez Ruiz, Timothy Russell, David Schlanger, and Gil Vela. Quorum: 6

Committee Members Not Present

Hayley Ashby, Eric Doucette, Zayed Hannan (ASNC rep.), and Tim Wallstrom.

Recorder

Charise Allingham

1. Call to Order

- 9:06 am

1.1 Welcome

2. Action Items

2.1 Approval of Agenda

- MSC (Stephany Kyriakos / Timothy Russell)

2.1 Conclusion

- Approved by consensus.

2.2 Approval of September 13, 2023, Minutes

- MSC (Timothy Russell / Stephany Kyriakos)

2.2 Conclusion

- Approved consensus.

3. Discussion Item

3.1 2023-25 NAC Charter

The NAC Report of Effectiveness has been reviewed by the Academic Senate. No recommendations were made specific to the committee. All Councils were directed to update the Accreditation Standards guiding the committees. Currently waiting for direction from the Academic Senate on the timeline for the standing committee charters. The Charter sections were discussed:

- Purpose
 - Student learning services and student support services were clarified.
- Charge

- Suggestion to add EMP Goal 3 (Equity)- Close all Equity gaps. The new process in Canvas gives access to disaggregated student learning data which can be used to implement and measure high-impact practices for equitable teaching and learning.
- Guiding Principles and Assumptions
 - The new standardization of the assessment process and the rubric will give us the ability to get a broader view of assessment we didn't have before.
 - The new process although standardized still allows faculty the freedom to choose the manner in which they assess the learning outcomes associated with their courses or programs.
 - New standards discussed (crossed out were suggested not to include as guiding standards):
 - 1.2. The institution establishes meaningful and ambitious goals for institutional improvement, innovation, and equitable student outcomes.
 - 1.3. The institution holds itself accountable for achieving its mission and goals and regularly reviews relevant, meaningfully disaggregated data to evaluate its progress and inform plans for continued improvement and innovation.
 - ~~1.5.~~ The institution regularly communicates progress toward achieving its mission and goals with internal and external stakeholders in order to promote understanding of institutional strengths, priorities, and areas for continued improvement.
 - Guides the whole institution.
 - 2.1. Academic programs at all locations and in all modes of delivery are offered in fields of study consistent with the institution's mission and reflect appropriate breadth, depth, and expected learning outcomes.
 - Suggestion this standard should guide the committee's deliverables.
 - 2.3. All degree programs include a general education framework to ensure the development of broad knowledge, skills, and competencies related to communication, quantitative reasoning, critical thinking, information literacy, civic responsibility, and the ability to engage with diverse perspectives.
 - Suggestion to include because assessment directly affects revision of GELOs and assessment should ensure learning for students.
 - 2.6. The institution uses delivery modes and teaching methodologies that meet student and curricular needs and promote equitable student learning and achievement.
 - ~~2.8.~~ The institution fosters a sense of belonging and community with its students by providing multiple opportunities for engagement with the institution, programs, and peers. Such opportunities reflect the varied needs of the student population and effectively support students' unique educational journeys.
 - Not directly guiding assessment, Student life focused.
 - 2.9. The institution conducts systematic review and assessment to ensure the quality of its academic, learning support, and student services

programs and implement improvements and innovations in support of equitable student achievement.

- 3.1. The institution employs qualified faculty, staff, administrators, and other personnel to support and sustain educational services and improve student success. The institution maintains appropriate policies and regularly assesses its employment practices to promote and improve equity, diversity, and mission fulfillment.
 - Focus on employment. Was included in the list because evidence suggested the responsibility of assessment of student learning outcomes be included in faculty job descriptions.
- Scope and Expected Deliverables
 - Need to work on Assessment V2- develop a long-term plan for continuous improvement and monitoring of outcomes, including PLOs and GELOs.
 - Trainings
 - Please provide any suggestions for deliverables for the next two years.
- Membership- membership may grow because we need a representative from each school and counseling now.
 - Counselors are assigned to schools. Counselors for some schools can function as a representative for counseling and or the school they represent.
 - Question if having more than one representative for each school is preferable? Academic Senate has two, a representative and an alternate for each school.
- Question: Are non-credit courses being assessed? Yes, most have the same outcomes as the credit courses. An area that will need to be addressed is apprenticeship, which needs to be assessed but doesn't have Canvas shells.
- The Charter will be an action item on the November 8th agenda.

3.1 Follow-up Items	3.1 Task of	3.1 Due by
Provide any suggestions for deliverables to the co-chairs	Committee members	Next meeting
Add deliverables to Charter	Co-chairs	ASAP
Send out a link to the Charter to the Committee	Charise	Once deliverables are added

3.2 Assessment Schedules (Homework)

Need to update our assessment schedule and include schedules for each school.

- The schedule should include each course and in what semester each outcome will be assessed.
 - Look at course offerings for the next two years. If a course is only offered once in two years, it would need to be assessed in the semester it is offered in.
 - Would be helpful to have a schedule template.
 -
 - The District Academic Standards Committee asked how Norco assesses the AOE's.
 - Historically the IE office has coordinated the assessment through Nuventive.

- Need to integrate the process of assessing program outcomes into Canvas, including GELOs.
- We have three years to catch up before the next accreditation visit.

3.3 Program Review Assessment Rubric/Feedback

The prior program review assessment rubric was shared. This rubric no longer applies. The new Assessment form and dashboards in Nuventive were shown.

- Question- Will disciplines be able to see how many sections are assessed in a semester?
 - Will check with Nuventive to see if this is possible to pull into the dashboard.

Discussion about data for courses that are taught by only one faculty. Currently, all disaggregated data will be masked in these cases.

- Faculty would like to see the data, especially for courses that are only offered once every two years.
- Request to bring the discussion to the Academic Senate.
- Does this need to be determined by each discipline? Please discuss this with your disciplines/schools.

New to the dashboard is the ability to look at outcome mastery by declared major.

4. Information Items

4.1 Area Updates

- Accreditation: Feedback for the Midterm report is due October 12th.
- Academic Schools:
 - Counseling: introducing a new course GUI-47A. This is a one-unit course that focuses on career exploration and decision-making.
 - Social & Behavioral Sciences- Discussion about the new accreditation standards. Concern that it isn't reasonable to consider continuous improvement because impossible to meet. The accreditors set the standard not us.
 - Institutional Effectiveness-
 - Our Business and Management school currently has a site visit for the Accrediting Council of Business Schools and Programs (ACBSP), the IE office has been utilized for data and assessment support for the visit.
 - IE has noticed a need to inform the college of our role and will be working on informing the college of the IE office's responsibilities.
 - LRC- Will be updating the data that was shared with the committee last semester. LRC is hoping to increase funding with support, please show support for the LRC when possible.
 - Student Services- Assessment section built in Nuventive.

4.2 Assessment Dashboard Updates

Dashboards were shared during the rubric/ feedback item above.

4.3 Assessment Training Schedule

Will send out to committee

5. Good of the Order

- Welcome to returning members, Stephen Park and Gil Vela.

6. Future Agenda Topics

7. Adjournment

- 10:31 am

Next Meeting

Date: November 8, 2023



Report of Effectiveness 2022-2023

Governance Entity:

Norco Assessment Committee

Charge:

The charge of the Assessment Committee is to facilitate assessment of student learning in instructional programs, and student and learning support services to support the assessment of Guided Pathways. The Assessment Committee is primarily responsible for assessing and coordinating the listed Educational Master Planning objectives below:

- 2030 Goal 8: (Effectiveness, Planning, and Governance) Develop institutional effectiveness and integrated planning systems and governance structures to support ongoing development and continuous improvement as we become a comprehensive college. •
 - 2025 Objective 8.1 Make program, student, and effectiveness (including assessment) data available, usable, and clear so critical data is visible in real time.

Sponsoring Council/Senate:

IEGC/Academic Senate

Co-chairs:

Ashlee Johnson and Greg Aycock

Members:

Hayley Ashby, Greg Aycock (co-chair), Caitlin Busso, Tami Comstock, Eric Doucette, Ashlee Johnson (co-chair), Daren Koch, Stephany Kyriakos, Bibiana Lopez, Brian Morales (ASNC Rep.) Jethro Midgett, Lisa Martin, Timothy Russell, David Schlanger, and Tim Wallstrom.

Evaluation of the Survey of Effectiveness:

The purpose of the survey of effectiveness is to provide a mechanism by which members of Norco Assessment Committee (NAC) could self-evaluate the effectiveness of the committee's planning and decision-making processes. The survey included thirteen (13) questions answered on a six (6) point Likert Scale and one (1) open ended question.

The survey received a total of five (5) participants, all of whom responded to 100% of the Likert Scale questions and one of whom responded to the open-ended question.

Results of the NAC Survey of Effectiveness indicated that 100% of members who participated in the survey either agree, or strongly agree, with twelve (12) of the thirteen (13) Likert Scale questions. As a result, there is evidence to suggest that,

(1) [the] agenda and minutes are provided far enough in advance of meetings, (2) agenda items are completed within the meeting time, (3) members are given adequate information to make informed recommendations or decisions, (4) all members are encouraged to be actively involved, (5) discussions are collegial, (6) differing opinions are respected, (7) participation is meaningful and important, (9) the charge is understood by the members, (10) members work toward fulfilling the charge, (11) the work has made an impact on its assigned EMP Goals, (12) the purpose of the governance entity aligns well with the college mission, and that (13) overall [members are] satisfied with [NAC's] performance.

However, when considering whether (8) [they] regularly communicate with members of [their] constituent group regarding key issues discussed and actions taken during meetings, one (1) member disagreed while the other four (4) either agreed or strongly agreed.

Lastly, in response to the open-ended question on recommend[at]ions to help the committee function more effectively, one participant suggested that NAC, along with its members, are a great team but clarification on rapidly changing meeting modality requirements would be helpful.

In Summary, results indicated that NAC's planning and decision-making processes were highly effective throughout the 2022- 2023 Academic Year.

EMP Goal Alignment and Objective Alignment:

The purpose of this section is to report on progress made towards the committee's EMP objectives and evaluate the appropriateness of objective assignments.

Progress:

Currently NAC is the operational committee charged with leading implementation of 2030 Goal 8: Objective 8.1 which aims to:

Make program, student, and effectiveness (including assessment) data available, usable, and clear so critical data is visible in real time.

The committee has made a great deal of progress towards this goal during the 2022-2023 academic year. Specifically, NAC completed development, gained approval, and began implementation of Norco College's outcomes assessment data collection process, which is expected to make assessment data available, usable, clear in a way that is accessible by Faculty in real time.

Alignment:

The committee's current Objective (8.1) is still in alignment with NAC's scope and purview and its work in this area is ongoing. However, with the recent adoption and implementation of the new outcomes assessment data collection process, there may be an opportunity for NAC to support work in Goal 3 (Equity) Close all student equity gaps by using disaggregated student learning data to implement and measure high impact practices for equitable teaching and learning. There may be opportunity in the future to further expand the Committee's work in this area.

Assessment of Scope and Deliverables:

The purpose of this section is to self-assess the completion of deliverables defined by NAC's charter during the academic year.

According to the charter, NAC worked towards the completion of four main deliverables throughout the 2022-2023 Academic year. A self-assessment of the progress made on each deliverable is described below:

1. Deliverable: Update committee charter and submit to Academic Senate for approval.
 - Status: Complete
 - Rational:
 - NAC approved its 2021-2022 charter on October 13, 2021 (Fall 2021) and gained approval by NC Academic Senate on December 6, 2021 (Fall 2021). In Fall 2022 the committee elected to extend the 21-22 charter through Spring 2023 based on guidance from NC Academic Senate on the intended two-year term length for standing committee charters.
 - In addition to the term extension, the committee also updated its membership policy, found in the membership section of the charter, to allow all members of the Assessment Committee including co-chairs [administrators, staff, students] to vote as long as a majority (quorum) of faculty are present at any specific meeting. The purpose of the update was to support the committee's 2020-2021 membership expansion intended to increase collaboration on outcomes assessment between instructional, student service, and LLRC areas.
 - The updated charter did not require an additional approval from the Academic Senate since there were no changes to its scope and deliverables and the membership policy update was NAC's purview as a standing committee of the Academic Senate according to Article VI of the Academic Senate Bylaws.
 - Because of this, the committee considers this deliverable complete.
2. Deliverable: Update Assessment structure of the Nuventive platform.
 - Status: Ongoing
 - Rational:
 - Throughout the 2022-23 AY the co-chairs of NAC have been meeting biweekly with the Nuventive-assigned contact and other employees in the company to assist in the process of transitioning to Canvas and the resulting changes that needed to be made in Nuventive.
 - This has involved direction to Nuventive regarding: necessary dashboards, protection of data in the process of transitioning to new platform, design of assessment section of Program Review platform
 - The NAC was kept updated at each meeting with the progress being made, and Academic Senate approved the full implementation of Canvas assessment in December 2022.
3. Deliverable: Develop training for integrating SLO assessment in Canvas.

- Status: Complete
 - Rational:
 - A process to integrate SLO assessment into Canvas was developed by NAC and its sub-group (LFM). After gaining approval by the Academic Senate the team developed training materials and began training Faculty throughout NC.
 - Training materials have been posted on NAC's website in written and video demonstration form.
 - In addition to general training materials, a variety of synchronous training sessions have been offered to all Faculty including, Assessment Tuesdays (Co-Chair Office Hours), Department trainings, Discipline trainings, One-on-One meetings, and College-Wide training ([Spring 2023 FLEX](#)).
 - Training will need to be updated and continue to be offered as time progresses. However, the initial development specified in this deliverable has been complete.
4. Deliverable: Map SLOs to PLOs/GELOs in Nuventive.
- Status: Tabled
 - Rational:
 - Planning for SLO assessment in Canvas has been very time-intensive and has slowed the implementation of PLO assessment.
 - There is a possibility that PLO assessment may not utilize mapping of SLOs to PLOs as the method of assessment. Once SLO assessment methodology is completed, PLO assessment will be addressed.



Charter for Assessment Committee (NAC)

2023-2025

This Charter is established between the Assessment Committee and the Academic Senate to structure the process and planned outcomes included herein during the two-year period of the 2023-2025 academic years.

Purpose

The Norco College Assessment Committee is a standing committee of the Academic Senate. The purpose of the Assessment Committee is to support and encourage assessment of student learning in all instructional programs, and student and learning support services. Assessment is defined as the process by which data are used to ensure students are learning the outcomes set by the institution, and the use of those data for the purpose of improving student learning, faculty pedagogy, and student and learning support services. When necessary, the Assessment Committee will make recommendations to the Academic Senate to facilitate improvements in the assessment process and in student learning overall.

Charge

The charge of the Assessment Committee is to facilitate assessment of student learning in instructional programs, and student and learning support services to support the assessment of Guided Pathways.

The Assessment Committee is primarily responsible for assessing and coordinating the listed Educational Master Planning objectives below:

2030 Goal 8: (Effectiveness, Planning, and Governance) Develop institutional effectiveness and integrated planning systems and governance structures to support ongoing development and continuous improvement as we become a comprehensive college.

- 2025 Objective 8.1 Make program, student, and effectiveness (including assessment) data available, usable, and clear so critical data is visible in real time.

Guiding Principles and Assumptions

The guiding principles for the Assessment Committee are:

1. Improvement of student learning should be the primary focus of any assessment effort.
2. Assessment should occur anywhere student learning is occurring, including instruction, student services, library & learning resources center and any other area involving student learning.

Guiding Principles and Assumptions

3. Faculty, as subject matter experts, are given freedom to choose the manner in which they assess the learning outcomes associated with their courses or programs.
4. The Assessment Committee is the primary governance structure overseeing the process of measuring student learning at the college.

Accreditation Standards guiding the Assessment Committee:

- 1.2. The institution establishes meaningful and ambitious goals for institutional improvement, innovation, and equitable student outcomes.
- 1.3. The institution holds itself accountable for achieving its mission and goals and regularly reviews relevant, meaningfully disaggregated data to evaluate its progress and inform plans for continued improvement and innovation.
- 2.1. Academic programs at all locations and in all modes of delivery are offered in fields of study consistent with the institution's mission and reflect appropriate breadth, depth, and expected learning outcomes.
- 2.3. All degree programs include a general education framework to ensure the development of broad knowledge, skills, and competencies related to communication, quantitative reasoning, critical thinking, information literacy, civic responsibility, and the ability to engage with diverse perspectives.
- 2.6. The institution uses delivery modes and teaching methodologies that meet student and curricular needs and promote equitable student learning and achievement.
- 2.9. The institution conducts systematic review and assessment to ensure the quality of its academic, learning support, and student services programs and implement improvements and innovations in support of equitable student achievement.

Equity

What is your committee/group's role in order to close racial equity gap?

Our role is to assess student learning and support and guide improvements in pedagogy and practices that will result in closing student learning gaps.

Scope & Expected Deliverables

The scope of work is to oversee student learning in instruction and student and learning support services so that all faculty will achieve their learning outcomes benchmarks and students become prepared for the next step in their education or employment. Provide assessment support to institutional groups. Specific deliverables for the 2023-25 academic years are:

1. Create Assessment V2 Plan of Action.
2. Increase participation in Canvas assessment.
3. Implement an approach for PLO Assessment.

Membership

The Assessment Committee will ideally be comprised of faculty members that are representative of the school structure.

- Faculty Chair – (Academic Senate)
 - Member of Program Review Committee
 - Participate in Guided Pathways-related activities
 - Member of Governance and Institutional Effectiveness Council
 - Attend Academic Senate to report on Assessment Committee
- Administrative Chair - (Administration)
 - Member of Program Review Committee
 - Participate in Guided Pathways-related activities
 - Member of Governance and Institutional Effectiveness Council
- Faculty Committee Members – One faculty member from each school. If more than one faculty member from the same school is part of the committee, only one faculty can vote. One of the faculty should represent CTE programs and one faculty should be a counselor.
- Student Services Representative
- Learning Resource Center Representative
- Institutional Effectiveness Representative
- Student Representative

All members of the Assessment Committee including co-chairs are allowed to vote as long as a majority (quorum) of faculty are present at any specific meeting.

Meeting Time/Pattern

Meetings are held on the second Wednesday of the month from 9:00am - 10:30am during the Fall and Spring semesters. Contact the Chair/Co-Chair(s) or designated facilitator to place an item on a future agenda.

Roles of Chairs and Members

The Assessment Committee Co-Chairs are accountable to the Academic Senate to ensure continuity of dialogue between governance tiers. Chairs are responsible for preparing agenda and facilitating meetings based on best practices and guidelines for effective facilitation. The co-chairs do not typically vote on action items, but in the case of a tie the faculty co-chair would vote to break the tie.

Members are recognized as stakeholders with important expertise and perspectives relevant to the strategic charge of the Assessment Committee that can help to achieve the stated deliverables. Members are expected to actively attend and participate in all meetings, deliberations, and decision-making processes of the Assessment Committee. While representing the perspectives of the constituency group to which they belong members are expected to engage in effective dialogue with Assessment Committee peers with the intention of finding consensus on all issues that come before the Assessment Committee. Since this is a

Roles of Chairs and Members

standing committee of the Academic Senate, only faculty are voting members of the Assessment Committee.

In addition, members may be asked to participate in and /or lead trainings. Also part of the responsibilities of being an assessment committee member is to take the lead for their department and/or school for any initiatives or decisions made by the committee.

Meeting Procedures and Expectations

The co-chairs and members of the Assessment Committee will adhere to participatory governance best practices as follows:

- Meeting agendas are issued in advance of meeting times.
- Meeting agendas are organized to achieve milestones established in the charter and prioritize actions pending, actions required, and problem solving to move the work of the group forward.
- Members endeavor to:
 - appropriately prepare for meetings based on the meeting agenda.
 - arrive promptly and stay for the duration of entire meetings.
 - participate in a problem-solving approach where the interests of all participants are considered in developing proposals and recommendations and, where appropriate, distinguish between constituency versus college-wide perspectives.
- welcome all ideas, interests and objectives that are within the scope of the charter.
- actively listen to engage in respectful and constructive dialogue.
- work with a spirit of cooperation and compromise leading to authentic collaboration.
- move forward once a consensus-based decision has been made.
- continue to progress with the members who are present at each meeting.
 - follow through on tasks that are committed to outside of scheduled meetings.

Accreditation Standards

With Review Criteria and Suggestions for Evidence

June 2023

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Standard 1: Institutional Mission and Effectiveness

The institution has a clearly defined mission that reflects its character, values, organizational structure, and unique student population. The mission outlines the institution’s explicit commitment to equitable student achievement and serves as a guiding principle for institutional planning, action, evaluation, improvement, and innovation.

1.1. The institution has established a clearly defined mission that appropriately reflects its character, values, structure, and unique student demographics. The institution’s mission articulates its commitment to ensuring equitable educational opportunities and outcomes for all students.

Review Criteria:

- The institution’s mission appropriately reflects the community and students it serves.
- The institution’s mission appropriately reflects the nature and structure of the institution (public, private, non-profit, corporate, etc.).
- The institution’s commitment to equitable educational outcomes is informed by an understanding of the characteristics and needs of its students.
- The institution’s mission demonstrates alignment with ACCJC’s *Policy on Social Justice*.

Possible Sources of Evidence Could Include:

- Documents or webpages that articulate the overall mission and purpose of the institution (mission statement, vision statement, values statements, goals statements, strategic plans, factbooks, key performance indicators, etc.)
- Minutes from meetings, retreats, or other events at which the mission is discussed
- Evidence that shows engagement with internal and external stakeholders around the institution’s overall mission and purpose (annual reports, presentations, surveys, etc.)

1.2. The institution establishes meaningful and ambitious goals for institutional improvement, innovation, and equitable student outcomes.



Review Criteria:

- The institution establishes its goals in a process that is appropriate for its character and context.
- The institution has clearly defined institutional goals that align with its mission, are appropriately forward-looking, and include consideration of equitable student outcomes.
- The institution's goals align with key initiatives within its scope of responsibility.

Possible Sources of Evidence Could Include:

- Documentation of procedure/process for setting and reviewing institutional goals
- Documentation illustrating institutional goals and assessment of progress toward them
- Documentation of meaningful discussion of equity data and actions to close equity gaps

1.3. The institution holds itself accountable for achieving its mission and goals and regularly reviews relevant, meaningfully disaggregated data to evaluate its progress and inform plans for continued improvement and innovation.

Review Criteria:

- The institution has established and published standards for student achievement (i.e., institution-set standards) in accordance with Commission policy.
- The institution regularly reviews and discusses qualitative and quantitative data to evaluate its progress toward achieving the mission, enhancing understanding of students' experience, informing short and long term planning, and implementing improvements as needed.
- The institution regularly reviews meaningfully-disaggregated data, identifies equity gaps, and engages in planning and improvement to close these gaps.

Possible Sources of Evidence Could Include:

- Documentation of how institution-set standards and assessment of student learning are used to support the institution as it evaluates progress towards its mission
- Examples of improvements and/or innovations implemented as a result of discussions of progress toward the mission
- Minutes or other documentation of meaningful discussion of disaggregated data, equity gaps, and action plans in response to the data

1.4. The institution's mission directs resource allocation, innovation, and continuous quality improvement through ongoing systematic planning and evaluation of programs and services.

Review Criteria:

- Institutional systems for comprehensive planning are designed to support accomplishment of the mission and lead to institutional innovation and improvement.
- Institutional systems for planning are integrated such that information from program planning informs processes for resource allocation, decision-making, and short- and long-term operational planning.
- Institutional systems for planning are designed to occur on a regular basis, include appropriate participation from institutional constituencies, and are informed by relevant data and information.

Possible Sources of Evidence Could Include:

- Examples of procedures/processes detailing comprehensive integrated planning systems (handbooks, planning platforms, etc.)
- Examples of completed institutional plans, program reviews, and/or similar institutional planning documents
- Examples of improvements and innovations emerging from the institution's comprehensive planning systems
- Evidence of prioritizing and funding resource allocations that arise through program review

1.5. The institution regularly communicates progress toward achieving its mission and goals with internal and external stakeholders in order to promote understanding of institutional strengths, priorities, and areas for continued improvement.

Review Criteria:

- The institution regularly communicates the results of its progress assessments with internal and external stakeholders, as appropriate to its character and context.
- Institutional evaluation reports and program reviews can be accessed by constituencies.
- Data and evidence related to institutional strengths and areas for development are used to inform and document discussions of institutional priorities.

Possible Sources of Evidence Could Include:

- Examples of regular communication related to the institution's evaluation of its progress toward achieving mission (published reports, presentation materials, meeting minutes, factbooks, external newsletters, website content, press releases, conference presentations, etc.)
- Examples demonstrating how data and evidence related to institutional strengths and areas for development are used to inform institutional priorities (minutes showing discussions of data; planning documents; budget assumptions; resource prioritization and allocation documents, etc.)

Required Documentation – Institutional Mission and Effectiveness

Within the Institutional Self-Evaluation Report, the institution will provide narratives and a variety of evidence sources to describe and demonstrate alignment with each Standard. Institutions must also include documentation of the required items below. This documentation can be included as supporting evidence for the Standard narratives if appropriate, or they may be provided as stand-alone files. Peer Review Teams will confirm these items during the comprehensive review process using a checklist.

- Institutional procedures/practices for periodic review of mission/mission-related statements, including provisions for revision (if/when revisions are needed) that allow for participation of institutional stakeholders, as appropriate for the character and context of the institution
- Documentation of the governing board's approval of the institutional mission
- Procedures/processes for setting institutional goals, including provisions for the inclusion of input from relevant institutional stakeholders, as appropriate for the character and context of the institution
- Documentation that the institution has established standards and goals for student achievement (i.e., institution-set standards) in accordance with Commission policy and practices for monitoring institutional performance, including standards and goals for course success, degree and certificate attainment, transfer, job placement rates, and licensure examination pass rates

Standard 2: Student Success

In alignment with its mission, the institution delivers high-quality academic and learning support programs that engage and support students through their unique educational journeys. Academic and learning support programs promote equitable student success, and the institution evaluates student learning and achievement data to inform improvements and advance equitable outcomes.

2.1. Academic programs at all locations and in all modes of delivery are offered in fields of study consistent with the institution's mission and reflect appropriate breadth, depth, and expected learning outcomes.

Review Criteria:

- Consistent with the institution's mission, academic programs are structured to lead to degrees, certificates, transfer, employment, or other similar credentials.
- The institution's processes for curriculum design and development ensure all academic programs align with the institution's mission.
- The institution's processes for curriculum design and development reflect generally accepted practices in higher education for ensuring breadth, depth, and rigor appropriate to the level of instruction (e.g., associate or baccalaureate level) and across all modalities.

Possible Sources of Evidence Could Include:

- Examples from the institution's curriculum development and approval processes (including processes for distinguishing lower and upper division content, if applicable)
- Examples illustrating the curriculum review cycle and criteria by which existing courses are reviewed and updated to ensure breadth, depth, and rigor appropriate to the content level
- Catalog listings of academic programs outlining expected learning outcomes

2.2. The institution, relying on faculty and other appropriate stakeholders, designs and delivers academic programs that reflect relevant discipline and industry standards and support equitable attainment of learning outcomes and achievement of educational goals.

Review Criteria:

- The institution's processes for curriculum design and development include appropriate faculty oversight for ongoing review, monitoring, and revision of programs in order to close identified gaps in student achievement.
- The institution's processes for curriculum design and development includes dialogue around student equity and maximizing equitable student success outcomes.
- The institution defines student learning outcomes for courses and academic programs (including degree and certificate programs).
- Development of learning outcomes includes consideration of feedback from workforce/industry partners, as appropriate for the institution's mission and program discipline.
- The institution provides students with accurate, current, and consistent student learning outcomes for the courses and programs in which they are enrolled.

Possible Sources of Evidence Could Include:

- Examples of how student learning and achievement data inform ongoing curriculum design and development
- Processes for establishing and maintaining currency and relevancy of learning outcomes (curriculum review, industry advisory discussions, etc.)
- Sample syllabi and corresponding course outlines

2.3. All degree programs include a general education framework to ensure the development of broad knowledge, skills, and competencies related to communication, quantitative reasoning, critical thinking, information literacy, civic responsibility, and the ability to engage with diverse perspectives.

Review Criteria:

- The institution has a rationale for general education, developed with appropriate input from faculty, which serves as the basis for inclusion of courses in general education and is listed in the catalog.
- The institution's general education philosophy reflects its degree requirements and is consistent with expected norms in higher education for lower division coursework (and upper division coursework, if applicable).
- The institution's general education offerings provide opportunities for students to engage with the arts and humanities, sciences, mathematics, and social sciences.

Possible Sources of Evidence Could Include:

- General education philosophy, as documented in institutional policy, catalogs, and/or other official publications
- Documents and/or narrative detailing process for arriving at and reviewing philosophy for general education (including faculty input into general education)
- Documents and /or narrative outlining curricular processes that determine a course's inclusion in general education
- Documents and/or narrative detailing expected learning outcomes of general education component and indicating assessment results are used
- Demonstration of the institution's commitment to global awareness and cultural competency
- Examples of how concepts named in the Standard are addressed throughout the curriculum and/or supported through student and learning support services

2.4. The institution communicates clear, accurate, and accessible information regarding programs, services, and resources that foster success in students' unique educational journeys.

Review Criteria:

- The institution provides students with accurate, current, and consistent student learning outcomes for the courses and programs in which they are enrolled.
- The institution has mechanisms for ensuring effective communication with its students in multiple modalities regarding the programs, services, and resources available to support the student journey.
- The institution regularly reviews its communication practices, policies, procedures to ensure clarity, consistency, accuracy, and relevance.

Possible Sources of Evidence Could Include:

- Program information (from catalog, website, etc.) showing program learning outcomes for degree and certificate programs
- Documents outlining institution's processes for communicating learning outcomes to students
- Sample syllabi and corresponding course outlines
- Information (from catalog, website, etc.) regarding available student support services and learning support resources
- Samples of student-facing communications in multiple formats, modalities, and (if applicable) languages, tailored to meet the needs of specific student populations
- Examples of how the institution evaluates the effectiveness of its student-facing communications (communication survey results, website/social media analytics, processes for ensuring consistency of messages across multiple communication platforms, etc.)
- Examples of changes/improvements in communication--in messaging, format, or modality resulting from evaluations

2.5. The institution holds itself accountable for students' success by scheduling courses in a manner that ensures degree and certificate programs can be completed in the expected period of time.

Review Criteria:

- The institution schedules classes in alignment with student needs and program pathways to ensure students have the opportunity to complete programs (including baccalaureate programs, if offered) within a reasonable period of time.
- The institution evaluates the degree to which scheduling facilitates timely completion of degrees, certificates, and transfer.
- The institution reflects on time-to-completion data in program review and institutional evaluation, and devises plans to improve completion rates.

Possible Sources of Evidence Could Include:

- Documentation and/or narrative detailing how the institution's scheduling processes ensure programs can be completed in a timely manner
- Recommended sequencing or pathway maps, as published in the catalog or other student-facing documents
- Enrollment management plans that take into consideration time to completion and program pathways
- Analysis of student achievement and/or progression data that demonstrates how the institution evaluates the effectiveness of its scheduling, pathways planning, and enrollment management practices

2.6. The institution uses delivery modes and teaching methodologies that meet student and curricular needs and promote equitable student learning and achievement.

Review Criteria:

- The institution regularly evaluates the effectiveness of its delivery modes and teaching methodologies to supporting equitable student learning and achievement, and uses results to guide improvements.
- Institutions have practices in place to ensure ongoing alignment with federal requirements for distance education and correspondence education, as defined in ACCJC's *Policy on Distance Education and on Correspondence Education* (if applicable).

Possible Sources of Evidence Could Include:

- Program reviews that disaggregate student learning assessment data and student achievement data by mode of delivery
- Examples of improvements to delivery modes and/or teaching methodologies there were made in order to address gaps in student learning and achievement
- Institutional reports on diverse and changing needs of students and resulting plans for developing or improving delivery modes and teaching methodologies
- Local guidelines that establish expectations for effectiveness and quality in distance education and/or correspondence education (if applicable)

2.7. The institution designs and delivers equitable and effective services and programs that support students in their unique educational journeys, address academic and non-academic needs, and maximize their potential for success. Such services include library and learning resources, academic counseling and support, and other services the institution identifies as appropriate for its mission and student needs.

Review Criteria:

- The institution designs and delivers effective processes for identifying students' academic, non-academic, personal wellness, and basic needs.
- The institution designs and delivers effective intake and onboarding services such as orientation, registration, counseling, educational planning, financial aid workshops, and/or similar services that maximize preparation, success, and retention.
- The institution designs and delivers effective learning support resources such as library collections, library instruction, learning labs, and tutoring services in a variety of modalities (face to face, hybrid, online, etc.) dependent on institutional mission and student need.
- The institution designs and delivers effective student support services such as counseling, academic advising, first year experience, veterans services, disability services, mental health services, etc. in a variety of modalities (face to face, hybrid, online, etc.) dependent on institutional mission and student need.
- The institution provides clear information and supports for students regarding transfer and career opportunities.
- The institution's documentation of and communication to students (catalogs, policies, procedures, etc.) regarding support services and expectations for their use are clear and consistent.
- The institution systematically collects and analyzes disaggregated data to evaluate the effectiveness of its support services and learning support resources in supporting equitable student success and uses the results for planning and improvement.

Sources of Evidence Could Include:

- Communication to students regarding supports (catalogs, handbooks, policies/ procedures related to student-facing services such as Financial Aid, Admissions and Records, FERPA, or similar)
- Disaggregated data used to determine students' needs and appropriate supports/services
- Documentation of how the institution evaluates services to ensure their effectiveness in maximizing student preparation, success, and retention (program review, survey results, planning documents, etc.)
- Documentation/evidence of how the institution evaluates the effectiveness of its student support services and library/learning support resources (program review metrics, disaggregated data, institution-set standards and/or similar program outcomes related to student success outcomes)
- Evidence outlining how the institution monitors students' progress towards their educational goals (early alert or similar tools, survey results, pathways-related discussions, etc.)
- Examples of institutional innovations to support students (changes to tutoring, use of mixed support modalities, etc.)

2.8. The institution fosters a sense of belonging and community with its students by providing multiple opportunities for engagement with the institution, programs, and peers. Such opportunities reflect the varied needs of the student population and effectively support students' unique educational journeys.

Review Criteria:

- The institution creates formal and informal opportunities for students to engage with the institution, programs, and peers (e.g., cultural, academic, clubs, political, ethnicity-based engagement, networking, athletics, internships, career trainings).
- The institution establishes co-curricular and/or student engagement activities based on the needs of the students and community it serves, including the needs of student populations that have been historically under-resourced.
- If these programs are offered the institution ensures the quality of such programs and frequently assesses activities and programs (qualitative/quantitative).

Possible Sources of Evidence Could Include:

- Examples of student engagement opportunities in multiple modalities including those related to student life, diversity, equity, and career training
- Qualitative and quantitative data used to evaluate the effectiveness of programs (program reviews, assessments of learning outcomes and/or service area outcomes, student surveys, event attendance, etc.)
- Examples of how activities increase student success and retention (if applicable)

2.9. The institution conducts systematic review and assessment to ensure the quality of its academic, learning support, and student services programs and implement improvements and innovations in support of equitable student achievement.

Review Criteria:

- The institution follows established processes that include analysis of data related to student learning (i.e., outcomes assessment results) and achievement (e.g., course completions and degree/certificate completions), disaggregated for student subpopulations and/or learning modalities as appropriate.
- Faculty and other educators engage in dialogue about learning and achievement data, disaggregated for student subpopulations and/or learning modalities as appropriate, in order to guide program improvement and curriculum development, address achievement gaps, and inform institutional goal-setting.
- The institution's dialogue about disaggregated learning and achievement data informs institutional goal-setting.

Possible Sources of Evidence Could Include:

- Documentation of processes for design and evaluation of curriculum
- Documentation of processes for program review and outcomes assessment, including consideration of how disaggregated data are incorporated, analyzed, and used for improvement
- Examples of completed reviews and/or assessments outlining how results inform improvements in curriculum design, service delivery, and/or teaching and learning practices to support equitable achievement

Required Documentation – Student Success

Within the Institutional Self-Evaluation Report, the institution will provide narratives and a variety of evidence sources to describe and demonstrate alignment with each Standard. Institutions must also include documentation of the required items below. This documentation can be included as supporting evidence for the Standard narratives if appropriate, or they may be provided as stand-alone files. Peer Review Teams will confirm these items during the comprehensive review process using a checklist.

- Policies and/or other documentation regarding transfer of credit into and out of the institution
- Documentation of minimum degree requirements (60 units for AA, 120 units for BA)
- Policies/procedures related to program discontinuance, demonstrating that the institution provides enrolled students with opportunities for timely completion in the event of program elimination
- Policies related to catalog, communication, recruiting, enrollment, admissions, etc.
- Documentation that the official catalog provides information regarding the purpose, content, requirements, and expected learning outcomes of degree and certificate programs
- Policies/processes for student complaints, demonstrating how the institution communicates process to students and handles complaints with due process
- Verification that student records are stored permanently, securely, and confidentially, with provision for secure backup
- Policies/practices for release of student records
- Documentation of alignment with *ACCJC Policy on Institutional Compliance with Title IV* (if applicable)
- Documentation of agreements with other external parties regarding the provision of student and/or learning support services, if applicable
- Documentation showing how the institution distinguishes pre-collegiate curriculum from college-level curriculum (if applicable)
- Documentation of compliance with Federal standards for clock-to-credit hour conversions (if applicable)
- Policies and/or other documentation related to expectation of conformity with specific codes of conduct, worldviews, or beliefs (if applicable)
- Policies and/or other documentation related to credit for prior learning and competency-based credit (if applicable)
- Documentation and/or other evidence demonstrating alignment with *ACCJC Policy on Distance Education and on Correspondence Education* (if applicable)

Standard 3: Infrastructure and Resources

The institution supports its educational services and operational functions with effective infrastructure, qualified personnel, and stable finances. The institution organizes its staffing and allocates its physical, technological, and financial resources to improve its overall effectiveness and promote equitable student success. The institution actively monitors and assesses resource capacity to inform improvements to infrastructure and ensure long-term health and stability.

3.1. The institution employs qualified faculty, staff, administrators, and other personnel to support and sustain educational services and improve student success. The institution maintains appropriate policies and regularly assesses its employment practices to promote and improve equity, diversity, and mission fulfillment.

Review Criteria:

- The institution has a process to determine the staffing levels and organizational structure it needs to support its mission, educational programs, and operations.
- The institution plans for the recruitment of personnel in accordance with its institutional mission and goals.
- The institution uses appropriate hiring criteria (including minimum qualifications criteria for the system in which it operates and/or degree level, if applicable) to ensure all employees are qualified for their roles.
- Faculty job descriptions are appropriate for the level of instruction offered, and include the responsibility for teaching and learning, curriculum oversight, and the assessment of student learning outcomes.
- The institution verifies the education (including equivalency of degrees for non-U.S. institutions), training, and experience of all new hires to ensure they possess the minimum qualifications outlined in job descriptions.
- The institution tracks and evaluates its record in employment equity and diversity.
- The institution regularly reviews its policies and/or procedures for equitable hiring practices to ensure currency and relevancy.

Possible Sources of Evidence Could Include:

- Policies, procedures, or processes that guide the institution's determination of staffing needs
- Policies, procedures, or operational guides outlining hiring practices
- Job announcements with position descriptions for faculty, administrators, and staff
- Policies, procedures, and tools used in recruitment, screening, and hiring
- Policies and procedures related to transcripts evaluation and certifying equivalency
- EEO reports, plans, goals, etc.
- Results from evaluation of the effectiveness of hiring policies, processes, and procedures

3.2. The institution supports its employees with professional learning opportunities aligned with the mission and institutional goals. These opportunities are regularly evaluated for overall effectiveness in promoting equitable student success and in meeting institutional and employee needs.

Review Criteria:

- The institution has methods to identify employees' professional learning needs relevant to educational services and operational functions, including professional learning opportunities designed to support institutional efforts to close student achievement gaps.
- The institution evaluates its training and professional learning offerings and uses the results to improve effectiveness in supporting employee needs.

Possible Sources of Evidence Could Include:

- Policies, schedules, resources, agendas, or other artifacts related to employee orientation, onboarding, and ongoing professional learning processes
- Employee handbooks/manuals
- Records of professional development opportunities offered, evaluation of impact, and use of data to inform offerings and resources for professional learning
- Sample presentations or other artifacts from trainings related to job functions and/or other professional development events (equity and diversity training; technology use and cybersecurity trainings; federal or state-mandated trainings, etc.)

3.3. The institution evaluates its employees regularly, using clear criteria that align with professional responsibilities and reflect the institution's mission and goals.

Review Criteria:

- The institution regularly and systematically evaluates all of its employees based on their professional responsibilities and uses this information to foster employees' development and success. This process is continuous and ongoing in support of the mission.
- The institution has methods to determine the kinds of support its personnel need to be successful in their roles.

Possible Sources of Evidence Could Include:

- Procedures and documentation related to employee evaluation

3.4. The institution develops, maintains, and enhances its educational services and operational functions through the effective use of fiscal resources. Financial resources support and sustain the mission and promote equitable achievement of student success.

Review Criteria:

- The institution has resources to support essential program needs, as well as educational improvement and innovation when warranted.
- Funds are allocated in a manner to help achieve the institution's stated goals for student learning.
- The institution's resource allocation process provides a means for setting priorities for funding.
- The institution manages its resources in order to sustain educational services and improve institutional effectiveness at all locations where over 50% of a program is offered.

Possible Sources of Evidence Could Include:

- Annual financial reports (including Audited financial statements)
- Budget allocation model or process
- Trends in major budget categories, annual budget carryover decisions, or similar planning documents
- Examples of the enhancement of programs or services funded through the budget allocation model or process

3.5. The institution's mission and goals are the foundation for financial planning. Financial information is disseminated to support effective planning and decision-making and provide opportunities for stakeholders to participate in the development of plans and budgets.

Review Criteria:

- The institution considers its mission and goals as part of the annual fiscal planning process.
- The institution's processes are used to ensure appropriate stakeholder participation in financial planning, prioritization, and budget development.
- Individuals involved in institutional planning receive accurate information about available funds, including the annual budget showing ongoing and anticipated fiscal commitments.
- Sound financial planning, including a realistic expectation of financial resource availability, is a foundational element of the institution's plans and goals.

Possible Sources of Evidence Could Include:

- Documentation of how the budget development process ties resource allocation to the mission, institutional goals, and/or program review and planning
- Procedures that outline processes and timelines for financial planning and budget development, including responsible parties and opportunities for input from institutional stakeholders
- Examples of how budget proposals, resource allocation decisions, and/or financial decisions are reported to institutional stakeholders
- Documentation of coordination of institutional planning with grants and other alternative funding sources
- Other documents used during institutional planning that identify available or potential financial resources and/or funding sources

3.6. The institution ensures the integrity and responsible use of its financial resources and regularly evaluates its fiscal outcomes and financial management practices to promote institutional mission fulfillment.

Review Criteria:

- The institution has effective internal and external control mechanisms in place to ensure that dependable, accurate, and timely financial information is available for sound financial decision-making.
- Audits demonstrate the integrity of financial management practices, and audit findings and/or compliance issues are addressed in a timely manner.
- Information about budget, fiscal conditions, and audit results are communicated with stakeholders as appropriate to the institution's mission and structure.

Possible Sources of Evidence Could Include:

- Budgets, financial reports, audit reports, and/or similar documents
- Finance department program review, including evaluation of effectiveness of internal controls
- Practices for evaluating the effectiveness and integrity of financial management practices, and the results of such evaluations
- Annual external audit reports and findings
- Audits of any foundations that are not separately incorporated
- Examples of timely corrections of external audit reports and findings
- Minutes of meetings when audits and findings are discussed and responses are planned

3.7. The institution ensures financial solvency. When making short-range financial plans, the institution considers its long-range financial priorities and future obligations to ensure sustained fiscal stability.

Review Criteria:

- The institution reviews its past financial results as part of planning for current and future fiscal needs.
- The institution continually monitors, evaluates, and adjusts its institutional budgets and cash management strategies to ensure both short-term and long-term financial solvency.
- The institution has reasonable plans for payments of long-term liabilities and obligations (health benefits, insurance costs, building maintenance costs, other post-employment benefit obligations, other college-incurred debts, etc.) and considers these plans in annual budget development and other short-term fiscal planning.
- The institution ensures that locally incurred debt repayment schedule does not have an adverse impact on meeting all current and future financial obligations.

Possible Sources of Evidence Could Include:

- Analysis of multi-year budget projections and cash flow projections
- Procedures for short and long-term management of the institution's cash and budgets
- Reports outlining institutional obligations for future total employee compensation expenditures (actuarial reports, employment agreements, collective bargaining agreements, management contracts, including any buy-out provisions, etc.)
- Budgets, plans, and/or amortization schedules that demonstrate how the institution accounts for payments of both short-term liabilities and long-term and/or future obligations

3.8. The institution constructs and maintains physical resources to support and sustain educational services and operational functions. The institution ensures safe and effective physical resources at all locations where it offers instruction, student services, and/or learning supports.

Review Criteria:

- The institution aligns planning and maintenance of facilities and other physical resources with the institutional mission and goals and needs of programs and services.
- The institution has processes and/or procedures in place to ensure the safety of all facilities, including procedures for reporting of unsafe physical facilities.
- The institution evaluates the effectiveness and sufficiency of its facilities and equipment on a regular basis, taking utilization and other relevant data into account, and uses the results to improve.

Possible Sources of Evidence Could Include:

- Long-term planning documents related to physical resources
- Plans pertaining to evaluation/prioritization of scheduled maintenance needs of physical facilities
- Documentation of evaluation of use of facilities such as a facilities inventory
- Procedures or systems used for reporting concerns for facility safety, security or maintenance
- Documentation related to regular inspections and maintenance of physical resources
- Documentation from evaluation/review of effectiveness of physical resources operations (grounds, transportation, housekeeping, maintenance, etc.)
- Facilities utilization/occupancy assessment reports

3.9. The institution implements, enhances, and secures its technology resources to support and sustain educational services and operational functions. The institution clearly communicates requirements for the safe and appropriate use of technology to students and employees and employs effective protocols for network and data security.

Review Criteria:

- The institution aligns technology planning, implementation, and maintenance with the institutional mission and goals.
- The institution's technology infrastructure is appropriate to support educational services and operations.
- The institution clearly communicates guidelines/rules for appropriate use of its technologies to all users.
- The institution's networks are secure and data is protected.
- The institution regularly evaluates its technology infrastructure (including network security) to ensure ongoing effectiveness in supporting educational services and operations.

Possible Sources of Evidence Could Include:

- Technology plans, educational master plans, or program reviews addressing technology needs
- Documentation of procedures for incidents of security threats and corresponding resolutions
- Publications containing acceptable use policies or guidelines (employee handbooks, student handbooks, Board policies, etc.)

3.10. The institution has appropriate strategies for risk management and has policies and procedures in place to implement contingency plans in the event of financial, environmental, or technological emergencies and other unforeseen circumstances.

Review Criteria:

- The institution has policies and procedures in place that will mitigate emergencies and unforeseen occurrences that would significantly impact availability of its resources.
- The institution has sufficient insurance to cover its needs. If the institution is self-funded in any insurance categories, it has sufficient reserves to handle financial emergencies.
- The institution routinely reviews and updates their insurance coverages.
- The institution has protocols for back-up and recovery of sensitive data systems, including student and employee information systems.

Possible Sources of Evidence Could Include:

- Policies or procedures for risk management
- Records of self-insurance for health benefits, workers compensation, and unemployment
- Contingency plans for financial, environmental, technological, and other emergencies

Required Documentation – Infrastructure and Resources

Within the Institutional Self-Evaluation Report, the institution will provide narratives and a variety of evidence sources to describe and demonstrate alignment with each Standard. Evidence sources will vary from institution to institution. Institutions must also include documentation of the items below. These required items can be included as supporting evidence for the Standard narratives, or they may be provided as stand-alone files. Peer Review Teams will confirm these items during the comprehensive review process using a checklist.

- Written policies and procedures for human resources, including hiring procedures
- Employee handbooks or similar documents that communicate expectations to employees
- If applicable, written code of professional ethics for all personnel including consequences for violations
- Annual financial audit reports (3 prior years, including any auxiliary organizations)
- Practices for resource allocation and budget development (including budget allocation model for multi-college districts/systems)
- Policies around Title IV including the most recent three-year student loan default rates
- Policies guiding fiscal management (e.g., related to reserves, budget development)
- Any agreements that fall under ACCJC’s policy on contractual relationships with non-accredited organizations
- Policies, procedures or agreements (e.g., AUAs) related to appropriate use of technology systems

Standard 4: Governance and Decision-Making

The institution engages in clear and effective governance practices that support the achievement of its mission. Governance roles and responsibilities are delineated in widely distributed policies, and institutional decision-making processes provide opportunities for meaningful participation and inclusion of relevant stakeholders.

4.1. The institution upholds an explicit commitment to principles of academic freedom, academic integrity, and freedom of inquiry.

Review Criteria

- The institution communicates its commitment to principles of academic freedom and freedom of inquiry to relevant stakeholders, including students.
- The institution communicates clear expectations for academic integrity and freedom of inquiry to relevant stakeholders, including students.
- The institution follows clearly communicated procedures for addressing instances of academic dishonesty and violations of its principles of academic freedom and freedom of inquiry.

Possible Sources of Evidence Could Include:

- Policies, procedures, employee/student handbooks, and/or similar documents outlining the institution's commitment to academic freedom and academic integrity
- Policies, procedures, employee/student handbooks, sample syllabi, and/or similar documents showing how the institution communicates expectations for academic integrity
- Policies, procedures, employee/student handbooks, sample syllabi, and/or similar documents showing how the institution communicates the consequences for academic dishonesty

4.2. Roles, responsibilities, and authority for decision-making are clearly defined and communicated throughout the institution. The institution's structure for decision-making provides opportunities for stakeholder participation and ensures the inclusion of relevant perspectives.

Review Criteria:

- Structures for decision-making are appropriate for the institution's mission and organizational structure.
- Procedures for institutional decision-making are documented and widely available to relevant stakeholders.
- Roles, responsibilities, and opportunities for participation in decision-making are clearly defined.

Possible Sources of Evidence Could Include:

- Written documents (policies, procedures, handbooks, etc.) outlining role and practices for institutional decision-making
- Decision-making committee charters, bylaws, or other documentation of committee charge
- Decision-making committee meeting minutes and agendas
- Examples of a structure and or decision that has advanced the mission
- Examples of decision-making processes involving different institutional constituency groups

4.3. The institution's decision-making structures are used consistently and effectively. Institutional decision-making practices support a climate of collaboration and innovation that advances the mission and prioritizes equitable student outcomes.

Review Criteria:

- The institution holds itself accountable for implementing its decision-making practices consistently to ensure inclusion of appropriate stakeholders and shared understanding of decisions.
- Decision-making practices result in decisions that support institutional innovation and advance the mission of the institution.
- The institution evaluates its decision-making practices and makes improvements when needed to improve effectiveness.

Possible Sources of Evidence Could Include:

- Periodic assessment of structures and processes
- Work accomplished using decision-making structures and processes to support the mission
- Examples of ideas that have been advanced through the decision-making structures and processes and implemented, with documented result(s)/outcome(s)
- Minutes/reports tracking the progress of ideas from inception to implementation, including documented result(s)/outcome(s)
- Reports of regular evaluation of decision-making policies/procedures and documented result(s)/outcome(s)
- Structures/processes illustrate accountability and action

4.4. Acting through policy, the governing board takes responsibility for the overall quality and stability of the institution, and regularly monitors progress towards its goals and fiscal health.

Review Criteria

- The institution has appropriate policies that delineate the governing board's accountability for academic quality and achievement of equitable outcomes.
- The governing board regularly reviews key indicators of student learning and achievement and institutional plans for improving academic quality and equitable outcomes.
- The institution has a policy manual or other compilation of policy documents that delineates the governing board's role and responsibility in ensuring the financial stability of the institution.
- The governing board regularly reviews key fiscal information and documents regarding the stability of the institution.
- The governing board has a system for evaluating and revising its policies on a regular basis.

Possible Sources of Evidence Could Include:

- Policies that describe the authority and responsibilities of the board
- Board meeting minutes demonstrating regular review of key indicators of student learning and achievement and institutional plans for improving academic quality
- Board meeting minutes demonstrating regular review of key fiscal information and documents regarding the stability of the institution
- Policy and/or procedure for review of board policies
- Minutes or other documentation showing regular review of board policies

4.5. The governing board selects and evaluates the institution’s chief executive officer (CEO). The governing board gives the CEO full authority to implement board policies and ensure effective operations and fulfillment of the institutional mission.

Review Criteria

- The governing board sets clear expectations for regular reports on institutional performance from the chief administrator.
- The governing board has policies outlining the delegation of administrative authority to the institution’s chief administrator.
- The governing board adheres to its policies for delegation of administrative authority to the institution’s chief administrator.

Possible Sources of Evidence Could Include:

- Board policies or processes for selection and evaluation of the chief administrator
- Policy outlining delegation of authority from the governing board to the chief executive officer

4.6. The governing board functions effectively as a collective entity to promote the institution’s values and mission and fulfill its fiduciary responsibilities. The governing board demonstrates an ability to self-govern in adherence to its bylaws and expectations for best practices in board governance.

Review Criteria

- The institution’s governing board outlines its expectations for working as a collective unit in support of the mission.
- The governing board demonstrates the ability to act in the best interest of the institution, independent from undue influence.
- Once a collective decision has been reached, board members, individually, demonstrate their support for board policies and decisions.
- The institution’s governing board has documented procedures for self-governance and/or addressing behavior that does not align with its policies.
- The governing board improves its own effectiveness through orientations, professional development, and regular board self-evaluation.

Possible Sources of Evidence Could Include:

- Policy or bylaws that describe the ways in which the board may make decisions or act
- Evidence of votes or other board actions taken to promote the institution's values and missions
- Results from board evaluations (if applicable)
- Bylaws, policy, and/or procedures for conducting board evaluations
- Completed board evaluations
- Agenda and/or presentations from new board member orientations and ongoing trainings

Required Documentation – Governance and Decision-Making:

Within the Institutional Self-Evaluation Report, the institution will provide narratives and a variety of evidence sources to describe and demonstrate alignment with each Standard. Institutions must also include documentation of the required items below. This documentation can be included as supporting evidence for the Standard narratives if appropriate, or they may be provided as stand-alone files. Peer Review Teams will confirm these items during the comprehensive review process using a checklist.

- Governing board policies/procedures for selecting and regularly evaluating its chief executive officer
- Governing board policies/procedures/bylaws related to Board Ethics
- Governing board policies/procedures/bylaws related to conflict of interest

Assessment Rubric 2021-24

Assessment Review	4	3	2	1	0
What percent of SLO Assessment has been complete? (Section 1)	100%-90%	89.9%-80%	79.9%-70%	69.9%-60%	59.9%-0%
What percent of SLO to PLO Mapping has been complete? (Section 2)	100%-90%				89.9%-0%
Is there strong evidence to support the PLO analysis? (Section 3)	Evidence is clearly used to support analysis.	Evidence is somewhat used to support analysis.	Evidence is used but may not support analysis.	Evidence does not support analysis.	No Evidence is used.
Is there evidence of reflection on program alignment to Career and Transfer? (Section 4)	There is clear evidence of reflection on PLO alignment to Career and Transfer	There is adequate evidence of reflection on PLO alignment to Career and Transfer	There is minimal evidence of reflection on PLO alignment to Career and Transfer	Evidence provided does not show reflection on PLO alignment to Career and Transfer	No reflection is provided.
Data Review	4	3	2	1	0
Is there evidence that achievement data have been reviewed including equity gaps, and a data-based action plan has been created?	There is clear evidence that achievement data have been thoroughly reviewed including a trend of at least a three years or outcomes are compared to the college overall. Action plan is clearly aligned with data analysis	There is adequate evidence that achievement data have been thoroughly reviewed including a trend of at least a three years or outcomes are compared to the college overall. Action plan is clearly aligned with data analysis	There is minimal evidence that achievement data have been thoroughly reviewed including a trend of at least a three years or outcomes are compared to the college overall. Action plan is clearly aligned with data analysis	There is inadequate evidence that achievement data have been thoroughly reviewed including a trend of at least a three years or outcomes are compared to the college overall. Action plan is clearly aligned with data analysis	No data analysis is provided.