**Midterm Report**

Submitted by

**Imperial Community College District, Imperial Valley College**

**380 East Aten Road**

**Imperial, CA 92251**

To

**Accrediting Commission for Community and Junior Colleges**

**Western Association of Schools and Colleges**

**March 15, 2016**

Victor M. Jaime, Ed. D., Chief Executive Officer

Dr. Nicholas O. Akinkuoye, Chief Instruction Officer and Accreditation Liaison Officer

Imperial Community College District Board of Trustees:

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**Imperial Valley College**

**Certification of the Accreditation Midterm Report**

Date: March 15, 2016

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

From: Imperial Community College District

Imperial Valley College

380 East Aten Road

Imperial, CA 92251

The Accreditation Midterm Report is submitted to assist in the determination of the Institution’s accreditation status.

We certify that there was broad participation by the campus community and we believe the Accreditation Midterm Report accurately reflects the nature and substance of this institution.

Signed:

Victor M. Jaime, Ed. D., Chief Executive Officer Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Jerry D. Hart, President, District Board of Trustees Date

Edalaine Joy Tango-An, President, Associated Student Government Date

Dr. Michael Heumann, President Academic Senate Date

Mary Jo Wainwright, President, CCA/CTA/NEA Date

Michael Capeci, President, PFTA/CCA/CTA/NEA Date

Yethel Alonso, President, CSEA, Chapter 472 Date

Yethel Alonso, Chair, College Council Date

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**REPORT PREPARATION**

In early spring 2013, Imperial Valley College’s focus centered on preparing for the 2013 comprehensive evaluation visit, pre-planning for the Follow-Up Report due March 15, 2014, and gearing up for the 2014-2015 program review and planning cycle. However, mindful that similar activities would be repeated the following spring and thus impact focus on the Midterm Report, the college also began work on the 2016 Midterm Report. In February 2013, the Continuous Accreditation Readiness Team (CART) conducted a preliminary review of the college’s 2013 Comprehensive Self-Evaluation Actionable Improvement Plans, and regular review of this component of the Midterm Report continued through April 2015.

Report writing teams were confirmed in May 2015, and assignments initiated in June 2015, followed by the development of outlines for each team’s response to assigned sections of the report. The work of the writing teams was completed when the teams submitted final section drafts to the report editors in the fall of 2015. The section drafts were consolidated and a draft of the full report developed in late 2015, and then circulated in early 2016 to the President’s Cabinet and the participatory governance groups. The final report was approved by President’s Cabinet in February 2016, and accepted by the college Council and by the Academic Senate that same month, followed shortly thereafter by Board of Trustees certification. (RP 1.01 College Council Minutes, \_\_\_/\_\_\_/16;[[1]](#endnote-1) RP 1.02 Academic Senate Minutes, \_\_/\_\_/16;[[2]](#endnote-2) RP 1.03 Board Minutes, \_\_/\_\_/16[[3]](#endnote-3))

**Midterm Report Timeline**

Spring 2013Review the 2013 Self-Evaluation actionable improvement plans; develop a chart reflecting the actionable improvement plans and the individuals or committees responsible for each plan; update the chart to identify: plan status, additional key individuals, and supporting evidence.

Fall 2013Continue review and update of the actionable improvement plans chart; refer plans that correspond to the FCMAT recommendations action plans to the Strategic Technical Assistance Response Team (START).

Spring 2014 START reports on status of FCMAT recommended action plans; continue review and update of the actionable improvement plans chart; develop the Midterm Report timeline and subsequently merge with timelines for the 2015 Follow-Up Report and the 2014-2015 program review and planning cycle.

Summer 2014 Update and present the merged timeline to President’s Cabinet and the new CIO/ALO.

Fall 2014 Further review and revise the merged timeline; continue review and update of the actionable improvement plans chart, including focused review of plans related to the college website; review Recommendations 2, 3, 4, 5, and 6 from the 2013 ACCJC Evaluation Team Report; develop a preliminary assignment list for Midterm Report writing teams; receive confirmation from ACCJC that the 2016 Midterm Report will be based on the 2002 Accreditation Standards.

Spring 2015 Continue review and update of the actionable improvement plans chart; review ACCJC guidelines for preparing a midterm report and assemble associated documents; confirm writing team leaders and members and provide associated documents; implement Glip collaboration software to manage preparation of the Midterm Report and facilitate training; meet to define team roles and assignments; update the Midterm Report timeline.

Fall 2015 Teams meet on a regular basis and submit section drafts to report editors; consolidate section drafts and develop the first draft of the 2016 Midterm Report.

Spring 2016 Editors review draft report and evidence is linked; circulate the report to President’s Cabinet and participatory governance groups; President’s Cabinet and participatory governance groups accept the report; finalize the report.

Board of Trustees certifies the Midterm Report; final report delivered to ACCJC.

**Midterm Report Contributors**

Participatory Governance

Dr. Michael Heumann, President, Academic Senate

Yethel Alonso, President, College Council; President, CSEA

Jill Nelipovich, SLO Coordinator; Basic Skills Coordinator

Gaylla Finnell, DE Coordinator

Edalaine Joy Tango-An, President, Associated Student Government

Participatory Governance Committees:

* Budget and Fiscal Planning Committee (BFPC)
* College Council
* Continuous Accreditation Readiness Team (CART)
* Strategic Educational Master Planning Committee (SEMPC)

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**Response to Team Recommendations and the Commission Action Letter**

**Major Findings and Recommendations of the 2013 Visit**

*2013 Recommendation 1: In order to fully meet the Standard, the team recommends that the College consistently link the institutional goals and objectives detailed in the Educational Master Plan with operational plan goals and resource allocations, including technology resources, in order to assess progress toward meeting institutional goals. In addition, the College should establish a planning calendar that identifies all planning activities, committees, and the roles of various College plans, and includes institutional effectiveness assessment and improvement cycles. (Standards I.B .3, II.C.1b, IV.A.5)*

**District Response:**

Imperial Valley College was visited twice by the Accrediting Commission for Community and Junior Colleges (ACCJC, Commission) following the 2013 self-evaluation report. In June 2013, the Commission placed the college on “Warning” status based on the 2013 ACCJC External Evaluation Team Report that identified eight recommendations for full compliance with the Accreditation Standards. The 2013 evaluation report also referenced unresolved recommendations from the 2007 ACCJC evaluation team report. More specifically, Recommendation 1 of the 2007 report recommended that:

“…the college take action to incorporate program review and comprehensive master planning (educational, facilities, technology, & resource plans) with systematic planning and budgeting processes to effectively align college resources with priority college goals. (1.B.3, II.A.2.a, II.B.4, II.C.2, III.C.2, III.D.1.a, IV.A, IV.A.6.).”

The 2013 external evaluation team concluded that Recommendation 1 of the 2007 report was partially met concluding that:

“The College has made substantial progress in implementing and assessing planning models. The College conducts a thorough community visioning process involving public forums and focus groups that serves as the foundation of its strategic plan. In addition, educational master planning processes are now supported by the Educational Master Plan Committee, a large and broad representative group, which is working toward uniting program review with resource allocation and institutional goals. Through the annually updated Educational Master Plan, prioritized funding requests from Resource Plans now must align with College-wide goals.” ([2013 Evaluation Team Report](http://accreditation.imperial.edu/images/docs/2013/commission/2013_ivc_evaluation_team_report.pdf))

The evaluation team listed Recommendations 1, 5, and 8 of the 2013 evaluation report as the mitigating actions to effectively address the 2007 Recommendation 1 and cited standards. More specifically, Recommendation 1 of the 2013 evaluation report concluded the following:

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

2015 Follow-up Report and Site Visit

In March 2015, the college was again visited by an external evaluation team to specifically evaluate Recommendations 1 and 8 of the 2013 evaluation team report. After a review of the college’s follow-up report and site visit, the evaluation team concluded that the institutional changes made to address the deficiencies noted on Recommendation 1 were satisfactory and that the college resolved this recommendation and met the Standards cited. The findings and evidence reported by the evaluation team to reach this conclusion are summarized below:

* The adoption of a new online integrated planning model, Strategic Planning Online (SPOL), that links planning, resource allocation, assessment of student learning outcomes, and institutional effectiveness.
* The completion of a full assessment cycle in SPOL that linked program review, institutional goals, resource allocation, and future assessment of program outcomes.
* The development of a system for “enhanced budget requests” linked to the improvement in quality, effectiveness, outcomes, and/or Accreditation Standards within SPOL.
* The adoption of a new accountability process that resulted in a more “robust” participation of campus committees including self-evaluation reports and goal setting.
* The revision of “Campus Hour” from two days per week to four days per week beginning in fall 2015. During Campus Hour, no courses are offered in order to eliminate class conflicts and to facilitate campus involvement and committee participation.
* The creation of an online planning calendar that integrates planning, budget, assessment cycles, committee and department meetings, as well as governance schedules. The overall calendar is maintained by the Student Affairs Office, with planning process dates and events updated by the Strategic Educational Master Plan Committee (SEMPC).
* The creation of SMART (Specific/Measurable/Attainable/Relevant/Time-limited) goals that are linked to institutional objectives.
* Notable improvements in the assessment of institutional effectiveness through an integrated planning process that is data-driven.

With this action, the college’s accreditation was reaffirmed by the Commission on June 29, 2015.

The following is an updated version of the 2015 Follow-up Report for Recommendation 1, used by the Commission to evaluate this recommendation and ultimately to reaffirm the college’s accreditation.

The Strategic Educational Master Plan Committee (SEMPC) continues to be responsible for guiding the constituency in the development of planning review and the linkages to institutional effectiveness. Through these discussions, the college continues to strengthen the program review process and better align program goals and objectives with institutional goals and objectives, and to more clearly link program planning with budget development and resource allocation. In its visit of March 2015, the external evaluation team noted the use of the web-based Strategic Planning Online (SPOL) software and a program review template that supported institutional improvements and alignment with institutional goals. (13 [Rec.1.xx ACCJC Report of External Evaluation Team 05-06-14](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.11%20External%20Evaluation%20Team%20Report%205-6-14.pdf))[[4]](#endnote-4)

SPOL’s four key modules - planning, assessment, budget, and accreditation - create a solid framework to assess and monitor unit and/or program-based planning, resource-budgeting, and assessment of learning outcomes. Department chairs, faculty, staff, and/or administrators input yearly objectives, link them to the planning unit’s goals, College planning priorities, resource plans if funding is necessary, and institutional goals as stipulated in the Strategic Educational Master Plan (SEMP). Tasks, or steps taken to achieve the objective, must include a target date, budget line item if enhanced funding is required, and a description of the task steps. SPOL’s budget planning divides the operating budget into two distinct sections: base budget and enhanced budget. When a planning unit’s base budget is insufficient to fund budgeted activities, improvement strategies, or escalating costs, the unit has the opportunity to request enhanced funding. In addition, the SPOL Assessment Module has a field for linking a learning outcome to a unit/program objective as well as Accreditation Standards.

As the college moved from paper-based program review to the web-based Strategic Planning Online, it created a template for the 2013-2014 annual program review cycle. The adopted template incorporated goals that were **S**pecific, **M**easurable, **A**ttainable, **R**elevant, and **T**ime-limited (SMART). (13 Rec. 1.xx 2013-2014 Academic Program Review Template)[[5]](#endnote-5) To that end, faculty leaders were asked to create goals using the SMART model. However, many 2013-2014 goals did not achieve that level of precision, so the template was redesigned to better guide faculty leaders into writing goals and objectives that both fit the SMART model and aligned with the architecture and terminology of SPOL. Now, the template is designed to guide faculty and staff in the development of SMART goals with specific accountability provisions, timelines, measures of success, and resource requests. In preparation for the 2015-2016 program review cycle, the adopted template was used without any modifications. The continuation of the same template for the 2016-2017 program review cycle will provide stability, comfort, and more effective analysis of individual programs.

There are two types of program review and respective templates: Academic and Service Area. The Academic Program Review (APR) template guides programs through an assessment of program health, using disaggregated data to analyze enrollment rates, productivity, success and retention, success by ethnicity, numbers of degrees and certificates, and program changes. (13 Rec. 1.xx 2014-2015 Academic Program Review Template)[[6]](#endnote-6) The Service Area Program Review (SAPR) template guides programs through an analysis of the program’s status by looking at strengths, weaknesses, opportunities, challenges, and program changes. Each template requires a review of past program goals with an assessment of whether the goal was met, partially met, or not met, and a description of how the goal increased student achievement and/or program effectiveness. (13 Rec. 1.xx 2014-2015 Service Area Program Review Template)[[7]](#endnote-7)

For future program goals, the program planners assign responsibility and accountability for the implementation of each objective under both the APR and SAPR. They also link program goals with institutional goals, identify resource-planning committees for funding prioritization, and indicate how program goals and budget requests contribute to improved work efficiency, reduced costs, or improved student success. Finally, target completion dates are assigned for each goal and task.

The college implemented a full online program review process in fall 2015 for planning year 2016-2017, although the offline template will continue to be a working tool for staff and faculty. The analysis and scope of data for the fall 2015 annual program review also incorporated the new Accreditation Standards by disaggregating data and providing a basis for proactive analysis of institutional effectiveness. (13 Rec. 1.xx Processes Impacted by 2014 Accreditation Standards)[[8]](#endnote-8)

Currently all programs complete a comprehensive program review every year. The Strategic Educational Master Planning Committee (SEMPC), at the October 10, 2014 meeting, considered moving to a comprehensive program review every two or three years, with a less comprehensive review in the intervening years. It was the consensus of the committee to continue with a comprehensive program review every year at this time. With the implementation of SPOL, the process will be less time-consuming, thereby facilitating a comprehensive review every year. (13 Rec. 1.xx Educational Master Planning Committee Minutes 10-10-14)[[9]](#endnote-9)

Resource Allocation

All objectives are linked to one of five resource-planning committees: Facilities, Marketing, Technology, Professional Development, and Staffing, and the objective’s task with an enhanced budget request is linked to a budget account. The enhanced resource/budget requests may be rejected, or checked as not funded by the area Dean or the area Vice President, who may add a statement or clarifying remark. After the Vice President’s review, the resource-planning committees review all enhancement requests and prioritize them according to criteria developed by each committee. Once resource-planning committees have completed prioritization, their reports are forwarded to the college’s Budget and Fiscal Planning Committee (BFPC). (13 Rec. 1.xx Resource-planning committees Reports)[[10]](#endnote-10) The BFPC reviews each committee’s prioritization and compiles an overall prioritization for all resource areas. The BFPC’s prioritized list is then forwarded on to the President’s Cabinet, where final decisions are made as to which requests are to be included in the preliminary budget, based on available resources and College priorities. (13 Rec. 1.xx Budget & Fiscal Planning Minutes 06-09-14)[[11]](#endnote-11) A chart has been developed, showing the status of the prioritized lists and the action taken by the President’s Cabinet. This chart is sent out to the campus community, ensuring that all programs have feedback on the status of their resource requests. (13 Rec. 1.xx Resource Allocation Summary)[[12]](#endnote-12)

The college completed a full budget evaluation for the 2015-2016 budget using these processes. This model proved useful as it allowed all programs to submit budget requests based on individual needs for student success. Although funding limitations resulted in a majority of requests being denied, the process allowed for collegial discussions and decisions.

*2013 Recommendation 2: Given that the College has a new integrated planning model and recent growth in assessment of outcomes, the team recommends that in order to increase effectiveness the College focus its evaluation and global assessment efforts on determining how well the new model and recently collected assessments contribute to institutional improvement. In addition, the team recommends that the College 1) ground its decisions on sound data analysis; 2) evaluate its institutional quality by way of benchmarking and other comparison data, and 3) establish minimal standards of institutional quality and goals for institutional improvement. (Standards I.B. 5 and 7, II.A.1c, II.A.2.f)*

**District Response:**

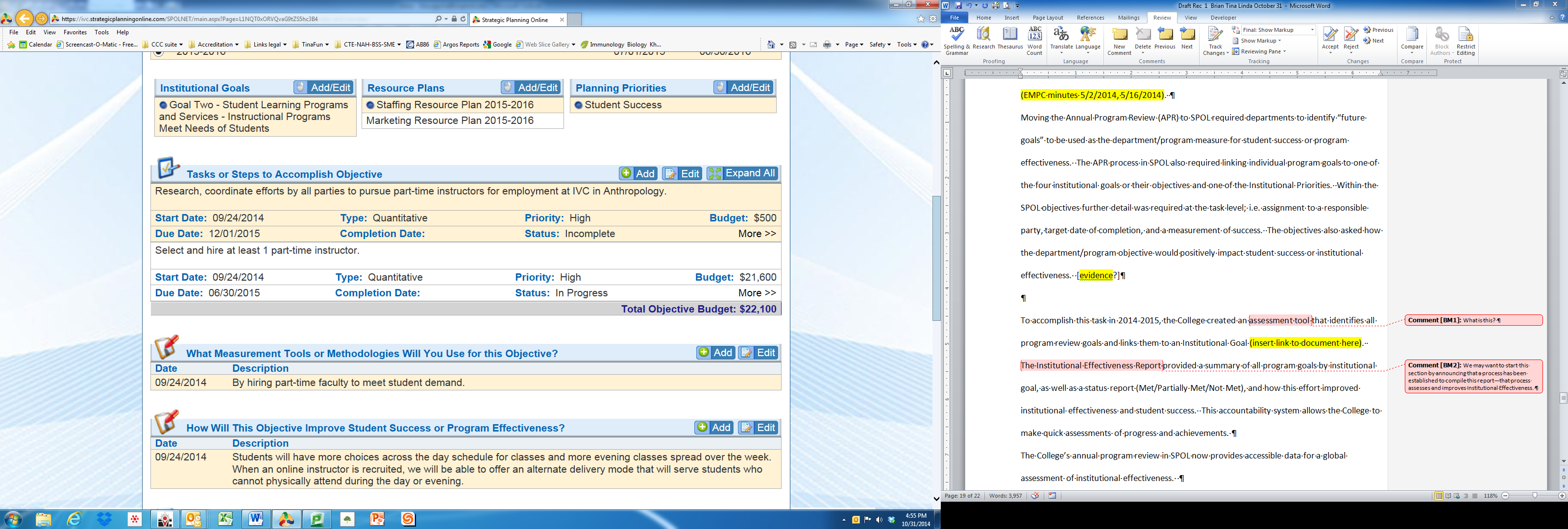
In order to evaluate the recently implemented strategic planning efforts at Imperial Valley College, the institution conducted a full implementation of SPOL for its 2014-2015 and 2015-2016 program review and planning cycles. The SPOL structures, as noted in the response to 2013 Recommendation 1, support unit-based strategic planning; budget planning; assessment of learning outcomes and accreditation compliance, which integrates the college’s cyclical process for assessing and monitoring institutional effectiveness.

The implementation of SPOL has created an opportunity for the college to streamline all three processes of program review, budget planning, and assessment of learning outcomes. While the SPOL implementation has been laborious during the transition from paper-based planning to electronic web-based planning, SPOL enables the institution to make decisions based on data analysis to drive institutional improvement and effectiveness.

Resource Allocation

The process of resource allocation begins with program review, where “future goals” are identified by the department/program and have a measure for student success or program effectiveness. Each goal has objectives that are linked to one of the four institutional goals, one of five resource plans, and an institutional priority with specific details required at the “task” level. The tasks include a target date of completion, a measurement of success, and, if additional resources or budget enhancements are needed, a link to a line item budget account. SPOL permits correlating how the goals and objectives would positively impact student success, program effectiveness, and/or institutional effectiveness. (Figure 1)

Figure 1. Objective Detail Page



As stated in the response to 2013 Recommendation 1 above, each resource-planning committee reviews and prioritizes enhanced budget requests, then forwards their reports to the college’s Budget and Fiscal Planning Committee (BFPC). The BFPC compiles and submits an overall prioritization recommendation list to President’s Cabinet, where final decisions are made for inclusion in the institutional preliminary budget. A chart has been developed showing the status of the final budget enhancement prioritized list and the action taken by President’s Cabinet. This chart is sent out to the campus community, ensuring that all programs are given feedback on their resource requests. (13 Rec. 2.xx Resource Allocation Summary))[[13]](#endnote-13)

Closing the Loop in Assessing Institutional Effectiveness

Following the completion of the 2014-2015 program review cycle, the Strategic Educational Master Planning Committee (SEMPC), at the May 2, 2014 meeting, began the process of assessing current institutional goals and objectives. (13 Rec. 2.xx SEMPC Minutes \_\_-\_\_-\_\_)[[14]](#endnote-14) The committee assigned the review to representatives from Academic Services, Student Services, Information Technology, Human Resources, Business Services, and the President’s Office. (13 Rec. 2.xx SEMPC Minutes, \_\_-\_\_-\_\_)[[15]](#endnote-15)

The college modified the process to assess and report on institutional effectiveness in 2014-2015. An assessment tool was created that identified all program review goals in SPOL with links to an institutional goal. The Institutional Effectiveness Report provides a summary of all program goals by institutional goal, as well as a status report (met, partially met, or not met), and how this effort improved, or will continue to improve, institutional effectiveness and student success. (13 Rec. 2.xx Institutional Effectiveness Report)[[16]](#endnote-16) The SEMPC also reviewed the enhanced budget requests, the prioritization of those requests by the resource-planning committees, overall prioritization by the Budget and Fiscal Planning Committee, and final decisions by the President’s Cabinet regarding inclusion in the budget. This accountability system allowed the college to make a global assessment of progress and achievements, and to supply feedback to programs for consideration in the development of their next program review. The institutional effectiveness assessment process is now more accessible through SPOL. (13 Rec. 2.xx SPOL planning reports )[[17]](#endnote-17)

The SEMPC, at the May 16, 2014 meeting, conducted a review of the 2013-2014 program review processes for improvements to the processes for the next program review cycle. The committee reviewed the results of a survey sent to all departments that completed program review. The survey results overwhelmingly documented the need to provide additional training in SPOL and training on data interpretation. (13 Rec. 2.xx Survey)[[18]](#endnote-18) As a result of the review, training sessions were scheduled over the summer and in the fall semester. (13 Rec. 2.xx Email re training schedules)[[19]](#endnote-19)

Other recommendations included ensuring data is available when the semester begins in August, and following the integrated planning calendar timeline, aiming at completing program review by the end of the fall semester. A summary of these assessments was compiled in a Strategic Educational Master Plan Progress Report that was presented to the Board of Trustees on August 20, 2014. (13 Rec. 2.xx SEMP Progress Report;[[20]](#endnote-20) 13 Rec. 2.xx Board Minutes \_\_-\_\_-\_\_[[21]](#endnote-21)) At this meeting, the Board took action to:

* approve the report, including the Assessment of Institutional Effectiveness and Resource Allocation;
* reaffirm the 2013-2014 Institutional Goals for the 2014-2015 Program Review cycle;
* adopt the new academic and service area program review templates;
* recommend faculty and staff training on the effective alignment of program goals with institutional goals; and
* re-evaluate the college’s Mission Statement to ensure alignment with the mission of California Community Colleges.

The SEMPC also adopted a revision to the Integrated Planning and Prioritization Model at the May 16, 2014 meeting. (13 Rec. 2.xx Integrated Planning and Prioritization Model)[[22]](#endnote-22) The revised model, to take effect during the 2015-2016 academic year, demonstrates the relationship between resource and planning committees, and the interrelationship between the various college plans and the Strategic Educational Master Plan. The Strategic Educational Master Plan is a six-year plan with annual updates and progress reports indicating how best to implement the planned improvements, designated timeframes, and final recommendations. The college’s mission, vision, and institutional goals are articulated in the Strategic Educational Master Plan and require other campus plans to align. Further, the Strategic Educational Master Plan outlines the process for program review, resource allocation, and the role of the resource-planning committees, the Budget and Fiscal Planning Committee, President’s Cabinet, College Council, Academic Senate, and the Board of Trustees. (13 Rec. 2.xx Strategic Educational Master Plan 2015-2021)[[23]](#endnote-23)

As a commitment to ongoing efforts to improve and document institutional effectiveness, the college became involved with the California Community Colleges Chancellor’s Office Institutional Effectiveness Partnership Initiative (IEPI) in March 2015 when a group of College representatives composed of administrators, faculty, and staff attended a regional workshop.

The primary goal of the IEPI is to help advance the college’s institutional effectiveness while enhancing the system’s ability to effectively serve students and has three major components:

* A framework of indicators and college goals to include student performance and outcomes, accreditation status, fiscal stability, and programmatic compliance with State and Federal guidelines, drawing heavily on existing indicators and publically available data.
* Technical Assistance Teams (called Partnership Resource Teams) available to colleges with grants of up to $150,000 in seed money to accelerate implementation of improvement plans.
* Enhanced professional development opportunities for colleges, related to institutional effectiveness, including an online clearinghouse with effective practices related to emerging accreditation and audit issues, as well as other topics related to institutional effectiveness.

For the first year of participation in the IEPI, the college developed goals in the areas of course completion rate, accreditation status, fund balance, and overall audit opinion. The process of development of these goals included review and input from the Academic Senate and College Council, which is consistent with the college’s participatory governance process. (13 Rec. 2.xx Academic Senate Minutes\_\_\_\_\_\_\_\_\_\_\_; College Council Minutes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)[[24]](#endnote-24) The District Board of Trustees reviewed the established IEPI goals at their regular meeting of May 20, 2015. (13. Rec. 2.xx Board Minutes 05-20-15)[[25]](#endnote-25) The goals established are:

* **Student Performance**: Successful course completion rate of 72%, defined as the annual percentage of credit course enrollments where students earned a grade of C or better. The college’s rate has averaged 69.8% for the years 2009-2010 through 2013-2014.
* **Accreditation Status**: Attain and maintain status of Fully Accredited-No Action, as defined by the latest Accrediting Commission for Community and Junior Colleges (ACCJC) action. The college was previously placed on Fully Accredited-Warning status, and was informed that it had attained Fully Accredited-No Action status in July 2015.
* **Fund Balance**: Maintain fund balance of 7%, as defined by the ending unrestricted general fund balance as a percentage of total expenditures. The college’s fund balance has held at 7% for fiscal years 2012-2013 through 2014-2015.
* **Audit Findings**: Maintain an unmodified auditor’s report, without internal control issues. The college has consistently maintained an unmodified auditor’s report.

It is recognized that these metrics are a benchmarking starting point for the college. Additional goals will be developed in the areas of completion rates for College Prepared and Unprepared for College; Remedial Rates for Math, English, and ESL; Career Technical Education completion rates; degree completion; certificate completion; full-time equivalent students; salary and benefits as a percentage of unrestricted general fund expenditures; annual operating excess/deficiency; and cash balance.

*2013 Recommendation 3: In order to increase effectiveness, the team recommends that the College include a feedback mechanism to faculty on their assessment methods and that the College encourage use of multiple indices of assessment. (Standards II.A.1.c)*

**District Response:**

Recognizing the need to provide feedback, to improve accessibility and to benchmark learning outcome results, in Academic Year 2014-2015 the college instituted Strategic Planning Online (SPOL), an electronic integrated planning tool with an outcome assessment module. Within SPOL faculty can define the outcomes, measures, and rubrics; link Student Learning Outcomes (SLOs) and Program Learning Outcomes (PLOs) to program objectives, Institutional Learning Outcomes (ILOs), and institutional goals; and enter assessment data and monitor the results at the section, aggregated course, and department levels.

In 2014-2015, the college instituted a Campus Hour to facilitate the scheduling of department and committee meetings, training sessions, and other events, in order to increase faculty participation at these events. Campus Hour was initially held two days per week, but because some classes continued to be held during Campus Hour (primarily 5 unit courses), scheduling these events continued to be difficult. To address this issue, the college conducted a detailed analysis of student need and enrollment patterns. Based on the findings, a proposal was made to change the scheduling time-blocks as well as to increase the Campus Hour from two to four days a week, Mondays through Thursdays. After approval by the Academic Senate and College Council, the new time-blocks and Campus Hour schedules went into effect the fall 2015 semester. ([13 Rec. 3.01 Academic Senate Minutes 09-03-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.01%20Academic%20Senate%20Minutes%2009-03-14.pdf);[[26]](#endnote-26) [13 Rec. 3.02 College Council Minutes 09-08-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.02%20College%20Council%20Minute%2009-08-14.pdf))[[27]](#endnote-27) These adjustments created a standardized time for faculty department meetings and any internal training sessions. It is during the department meetings that faculty discuss student and program outcomes; review assessment methods and interpret assessment data; and give feedback and make decisions about improvements to courses and/or programs.

In addition to one-on-one sessions, a tutorial video was developed to assist faculty with input of assessment data in SPOL (<https://www.youtube.com/watch?v=EHyucP2FQpk&feature=em-upload_owner>), as well as other user guides. ([13 Rec 3.03 SPOL Training Schedule](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.03%20SPOL%20Training%20Schedule.pdf);[[28]](#endnote-28) [13 Rec. 3.04 SPOL Assessment Basics – Measures and Rubrics](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.04%20SPOL%20Assessment%20Basics%20-%20Measures%20and%20Rubrics.pdf);[[29]](#endnote-29) [13 Rec 3.05 SPOL Assessment Basics – Programs and Outcomes](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.05%20SPOL%20Assessment%20Basics%20-%20Programs%20and%20Outcomes.pdf);[[30]](#endnote-30) [13 Rec 3.06 SPOL Assessment Data Quick Step Guide](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.06%20SPOL%20Assessment%20Data%20Quick%20Step%20Guide.pdf)[[31]](#endnote-31))

To further assist departments, the SLO Committee created templates to guide faculty discussion and feedback related to SLOs and PLOs. ([13 Rec. 3.07 SLO Assessment Template](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.07%20SLO%20Assessment%20Template.pdf);[[32]](#endnote-32) 1[3 Rec. 3.08 PLO Assessment Template](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.08%20PLO%20Assessment%20Template.pdf))[[33]](#endnote-33) The templates include the pertinent elements of assessment methods, analysis of results, ideas to improve student learning, program level outcomes, and benchmarks. The templates also provide a timeframe for attaining the goals. Training for the new templates began in November 2015, and departments will start using the templates in spring 2016. At the end of Academic Year 2015-2016 and Academic Year 2016-2017, the completed templates or summary will be uploaded into SPOL for tracking and codifying faculty assessment dialogue. Additionally, department chairs will be asked to coordinate with other chairs to review specific course level outcomes not associated with their discipline; e.g. the Chemistry Department requested that the Mathematics Department assess a math concept that is necessary for a chemistry course. This will engage faculty in a cross-disciplinary approach to learning outcomes. ([13 Rec. 3.09 PLO Training and Attendance](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.09%20PLO%20Training%20and%20Attendance.pdf))[[34]](#endnote-34)

To address multiple indices of assessment, two professional development workshops were offered for faculty; one on assessment techniques for PLOs and another on going beyond mapping outcomes. Faculty were encouraged to view assessment as a continuous cycle of improvement and focus on a student centered view of assessment. The facilitators reviewed various assessment methods and emphasized choosing an assessment method that enables the department to gather data that will improve programs. ([13 Rec. 3.10 PLO Workshop 01-15-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.10%20PLO%20Workshop-How%20Do%20You%20Measure%20Success%2001-15-15.pdf);[[35]](#endnote-35) [13 Rec. 3.11 SLO and PLO Assessment Workshop 08-14-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.11%20SLO%20and%20PLO%20Assessments%20Workshop%2008-14-15.pdf))[[36]](#endnote-36) Then at the end of Academic Year 2014-2015 Academic Year, the SLO Committee piloted an interactive session with students using different assessment methods. Seventy-nine graduating students were invited to participate in a “Meet Our Graduates” meeting in which faculty facilitated small group discussions and activities to elicit student abilities in critical thinking, effective communication, and collaborative teamwork. The SLO Committee gathered data, discussed the event’s methodologies, and evaluated at least two Institutional Learning Outcomes. In spring 2016, the SLO Committee will determine how to incorporate and share the data from the “Meet the Graduates” into the assessment part of SPOL. The SLO Committee’s final report will be presented to the Academic Senate, College Council, and the college administration in 2016. ([13 Rec. 3.12 Focus Group Moderator Instructions](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.12%20Focus%20Group%20Moderator%20Instructions.pdf);[[37]](#endnote-37) [13 Rec. 3.13 Focus Group Activity 1](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.13%20Focus%20Group%20Activity%201.pdf);[[38]](#endnote-38) [13 Rec. 3.14 Focus Group Activity 2](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.14%20Focus%20Group%20Activity%202.pdf);[[39]](#endnote-39) [13 Rec. 3.15 Focus Group Activity 3](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.15%20Focus%20Group%20Activity%203.pdf);[[40]](#endnote-40) [13 Rec. 3.16 Focus Group Activity 3B](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.16%20Focus%20Activity%203B.pdf);[[41]](#endnote-41) [13 Rec. 3.17 Focus Group Participants](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.17%20Focus%20Group%20Participants.pdf);[[42]](#endnote-42) [13 Rec. 3.18 SLO Minutes 10-20-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.18%20SLO%20Committee%20Minutes%2010-20-15.pdf);[[43]](#endnote-43) [13 Rec. 3.19 SLO Meeting Agenda 11-17-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%203.19%20SLO%20Committee%20Agenda%2011-17-15.pdf))[[44]](#endnote-44)

*2013 Recommendation 4: In order to increase effectiveness, the team recommends that the College integrate the program and resource evaluation process into other planning processes of the College and complete the assessment cycle for program learning outcomes and ensure they are continually aligned with student learning outcomes and institutional learning outcomes.*

*(Standards II.A.2.f and i)*

**District Response:**

In fall 2014, faculty were introduced to SPOL and by the end of Academic Year 2014-2015, data for 360 courses was uploaded into SPOL. In addition, PLOs were mapped from course level to program level to institutional level outcomes. In fall 2015, faculty reviewed course level outcomes and, when appropriate, reduced the quantity of SLOs for each course to improve the quality of data to be collected. Similarly, faculty were asked to reexamine PLOs to validate their value beyond mapping to course level outcomes. By November 1, 2015, all revisions of SLOs and/or PLOs were made in CurricuNET, the college’s web-based curriculum review and approval system, and that data was exported to SPOL by the end of November, prior to faculty data entry.

The PLO template form referenced earlier in the report is designed to document department faculty dialogue, as well as identify funding needs to carry out program plans to improve outcomes. ([13 Rec. 4.01 PLO Assessment Template](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%204.01%20PLO%20Assessment%20Template.pdf))[[45]](#endnote-45) The “Meet the Graduates” activity also referenced previously will be modified in future years to enable the Student Learning Outcome Committee to gather more data on students’ view of programs and how the programs relate to Institutional Learning Outcomes. ([13 Rec. 4.02 Focus Group Activity 3](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%204.02%20Focus%20Group%20Activity%203.pdf);[[46]](#endnote-46) 1[3 Rec. 4.03 Focus Group Activity 3B](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%204.03%20Focus%20Activity%203B.pdf)[[47]](#endnote-47))

*2013 Recommendation 5: In order to increase effectiveness, the team recommends the College 1) provide further professional development about information literacy so that it is better understood and applied by faculty in their instruction and that information literacy is better integrated into the College’s instructional planning and practices; 2) provide quality training in the effective application of its information technology to students and personnel, and 3) move forward with planning, implementing and evaluating for improvement, the professional development activities to meet the needs of its personnel. (Standards II.C.1.b, III.A.5. a and b, III.C.1.b)*

**District Response:**

On February 4, 2014, the Library provided professional development with its first training on Information Competency/Literacy for faculty and staff during Campus Hour. To expand the reach to more students and faculty campus-wide, the Library posted online tutorials on Information Competency/Literacy on its home page, <http://www.imperial.edu/courses-and-programs/divisions/arts-and-letters/library-department/>. In addition, the syllabus template now includes a link to the tutorials, and the Library conducts information sessions for teaching faculty and their students, sending an email each semester to faculty to remind them of this resource. ([13 Rec. 5.01 Syllabus Template – Information Literacy](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%205.01%20Syllabus%20Template%20-%20Information%20Literacy,%20pp.%204-5.pdf))[[48]](#endnote-48) Finally, the Library worked with the Distance Education Committee to place the link in the Blackboard shell of every class. ([13 Rec. 5.02 DE Committee Minutes 04-09-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%205.02%20DE%20Committee%20Minutes%2004-09-14.pdf))[[49]](#endnote-49)

Also in spring 2014, the newly formed interdisciplinary Campus Hour and Professional Development (CHPD) Committee surveyed four groups, students, faculty, staff, and administrators, to self-identify their training needs or interests. Students ranked study skills and technology low (Figure 2), while faculty’s top five scores were related to technology and to information to assist in teaching (Figure 3). All five of the top ranking topics for staff were technology related (Figure 4); however, administrators ranked technology and operational information in their top six identified needs. (Figure 5) The data provided baseline information of the college community’s interests to be used in subsequent program review and resource requests processes. ([13 Rec. 5.03 Professional Development Plan 11-20-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%205.03%20Professional%20Development%20Plan%2011-20-14.pdf))[[50]](#endnote-50) The surveys were repeated in spring 2015 with few differences in results. ([13 Rec. 5.04 2015 Campus Hour Survey Summary](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%205.04%20Campus%20Hour%20Survey%20Summary.pdf))[[51]](#endnote-51)

Figure 2. Student Results of Campus Hour Survey

Figure 3. Faculty Top 5 Scores of Professional Development Survey

Figure 4. Staff Top 5 Scores of Professional Development Survey

Figure 5. Administrator Top 6 Scores of Professional Development Survey

*2013 Recommendation 6: In order to increase effectiveness, the team recommends that the College establish a systematic plan for evaluation of the library and learning services, beyond student surveys that address use and access, to include evaluation of the relationship of the services to intended student learning and that it include input by faculty and staff.*

*(Standard II.C. 2)*

**District Response:**

As noted in 2013 Recommendation 5 above, the Library provided its first training on Information Competency/Literacy for faculty and staff during a spring 2014 Campus Hour. The Library posted related online tutorials on its home page, ensured the new syllabus template included a link to the tutorials, collaborated on the placement of a link in every Blackboard class shell, and notified faculty and students of pending information sessions.

During the fall 2015 semester, the Library and the Learning Services staff embarked on an intensive data collection venture. The Librarians began with a post-test on information literacy that was given to students who came into the Library for bibliographic workshops, which included an item to capture student identification numbers. From there, the Librarians added a pre-test given at the beginning of the workshops to assess any value added from the workshops. In January 2016, the Library staff worked with the Institutional Researcher to capture a comparison of students’ final grades for those who added the bibliographic workshops and the final grades of those students who did not attend the workshop. This capture of student identification numbers also was applied to the one-on-one Research Appointments conducted by the Reference Desk (“Reference Interviews”) in the Library. This data will enable the Library staff to begin assessing the added benefit (or lack thereof) for those students who come into the Library seeking assistance. ([13 Rec. 6.01 Information Literacy Workshop Statistics](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%206.01%20Information%20Literacy%20Workshop%20Statistics.pdf))[[52]](#endnote-52)

Also, in fall 2015, the Library staff began tracking not only student counts and circulation numbers but also occurrences of assistance given to individual students. The Library staff counted how many times students were given navigation (or directional) information (e.g., Where is the Counseling Office? or Where is the Reference Section?); how many times students were given access information (e.g., How do I log into the Student Portal? or How do I search the Library databases?); and how many times students were given academic support (e.g., How do I cite this book in my paper?) For example, during fall and spring of 2015, the reference librarians fielded 3,780 directional questions and 2,700 reference questions. The Learning Services Department tracked student counts for tutoring and the scheduling of the labs by instructors for class meetings. The department’s data collection was expanded in fall 2015 to include the number of tutors working each hour; the number of students who met with a tutor during each hour; attendance by class reservation; a summary of writing appointments; and an analysis of workshop attendance. ([13 Rec. 6.02 Learning Services Lab Usage Summary](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%206.02%20Learning%20Services%20Lab%20Usage%20Summary.pdf);[[53]](#endnote-53) [13 Rec. 6.03 Tutor Appointments](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%206.03%20Tutor%20Appointments.pdf)[[54]](#endnote-54))

All this additional data has assisted the Library and Learning Services staff in assessing the productivity of the departments, as well as assessing the relationship of Library and Learning Services departments to the support of student learning outcomes. (13 Rec. 6.04 minutes of Library and Learning Services departments for Fall 2015 semester showing collection and analysis of data)[[55]](#endnote-55)

*2013 Recommendation 7: In order to meet the Standard the team recommends that faculty and others directly responsible for student progress toward achieving student learning outcomes, have as a component of their evaluation, effectiveness in producing those outcomes.*

*(Standards III.A.1.c)*

**District Response:**

The college reported in its 2014 Follow-up Report that both full-time and part-time faculty negotiated new contracts that include additional provisions regarding Student Learning Outcomes. ([13 Rec. 7.01 CTA Contract 2013-2015](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%207.01%202013-2015%20CTA%20Contract%20-%20SLOs.pdf);[[56]](#endnote-56) [13 Rec. 7.02 PTFA Contract 2013-2015](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%207.02%202013-2015%20IVCPTFA%20Contract%20-%20SLOs.pdf))[[57]](#endnote-57) Evaluation forms were revised to address faculty participation in the “…development, assessment, and evaluation of student learning outcomes/service area outcomes…”([13 Rec. 7.03 Faculty Evaluation Forms](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%207.03%20Faculty%20Evaluation%20Forms.pdf))[[58]](#endnote-58) In addition, the Tenure Self-Assessment form was revised to ask faculty to list their participation in committees and special assignments. Finally, to ensure that the faculty is supported in its efforts, academic deans are also evaluated on their support of Student Learning Outcome activities. ([13 Rec. 7.04 Administrator Evaluation Form)](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202013%20Recommendations/13%20Rec.%207.04%20Administrator%20Evaluation%20Form.pdf)[[59]](#endnote-59)

Based on the findings of the external evaluation team that visited the college on April 14, 2014, the Commission found that the college has fully resolved this recommendation without further need for action. The evaluation forms developed in response to the evaluation team’s recommendation continue in use today.

*2013 Recommendation 8: In order to meet the standard, the team recommends the College develop a financial strategy that will result in balanced budgets that have ongoing revenues to meet or exceed its ongoing expenditures without the use of reserves; maintain the minimum prudent reserve level; and address funding for its long-term financial commitments and its retiree health benefits costs. (Standards III.D.1.a, III.D.3.a, and III.D.4, IV.B.1.c, IV.B.2.d.)*

**District Response:**

The external evaluation team that visited the college in March 2015 found that the college had “…developed a financial strategy that results in balanced budgets, maintains minimum prudent reserve levels, and addresses long-term financial commitments including other post-employment benefits costs.” Based on these findings the evaluation team found that the college had “…resolved this Recommendation and meets the Standard.”

Financial Strategy

As ongoing revenues set the boundaries for ongoing expenses, the college continues to project revenues conservatively. The state offered 3.5% growth for Fiscal Year 2015-2016, but the college’s projections indicate that the college cannot grow at that rate. The college projects growth of 1%, which is based on the data available at the time of the projection. Based on this limited growth projection, the college has implemented a budget variance report to assist monitoring of 4000, 5000, and 6000 accounts since these accounts are related to student population. (13 Rec. 8.xx BFPC Minutes Oct Meeting)[[60]](#endnote-60)

The strategy continues to have total ongoing expenses equal ongoing revenues and one-time expenses to equal one-time revenues. The largest financial element of the college’s budget (approximately 88%) is salaries and benefits. Consequently, the college intends to structure ongoing negotiations based on sustainability.

New Revenue

During the recent lean budget years, the college had been engaged in cost-cutting and cost-savings activity. However, recently the state budget turned around and categorical money has begun flowing into the college in larger amounts. In fiscal year 2015-2016, the college received $1.4 million in Student Success Services and Programs (SSSP) funds, $1.0 million in Student Equity funds, and a $5.8 million College and Career Pathways grant. In addition, the college was awarded another Title V grant (Teaching and Learning for Achievement and Success, TALCAS) in September 2015, adding another $2.3 million to the accumulation of grant money and funds received through categorical programs. In light of these new revenue streams, the challenge the college faces now is an entirely new challenge: Orchestrating this flow of unprecedented funding in order to avoid duplication of services, and ensuring that oversight is maintained. Fundamentally, the college now has the challenge of ensuring that funds are efficiently and purposefully transformed into a tangible benefit for the students. This topic has been discussed in great detail by both the Budget and Fiscal Planning Committee and the Student Success and Equity Committee. (13 Rec. 8.xx BFPC Minutes 12-08-15;[[61]](#endnote-61) Student Success and Equity Committee Minutes 11-xx-15, 12-08-15)[[62]](#endnote-62)

To meet this challenge, the Budget and Fiscal Planning Committee adopted a Categorical and Grant Funded Program Questionnaire that is to be completed by grant and categorical fund managers and submitted to the committee for review. (13 Rec. 8.xx Questionnaire)[[63]](#endnote-63) This process will allow the committee to stay informed of the potential encumbrance these programs may have on General Fund dollars. (13 Rec. 8.xx BFPC Minutes12-08-15)[[64]](#endnote-64) The college also intends to create a Special Projects Oversight Committee (SPOC) in the spring 2016 semester as a subcommittee of the Student Success and Equity Committee. This group would consist of representatives from key groups and would report to both the Vice President for Academic Services and to the Vice President for Student Services. (13 Rec. 8.xx Student Success and Equity Committee Minutes 11-xx-15, 12-08-15)[[65]](#endnote-65)

Budget Balancing

A key element to maintaining financial sustainability is a balanced budget, and with the final revenue allocation the 2015-2016 budget was balanced. The revenue allocation included additional ongoing revenues of $1.6 million. Of the additional revenue received, the first priority was to balance the budget. The remaining revenue will be used to address additional operational costs of the college. (13 Rec. 8.xx BFPC Minutes xx-xx-xx???)[[66]](#endnote-66)

The college budget process is reviewed on an ongoing basis by the Budget and Fiscal Planning Committee (BFPC) so that improvements can be identified and implemented. At the September 30, 2015 meeting, the BFPC identified the need to improve the budget timeline and ensure data integrity. This included the need to ensure that the sequences of the processes that support budget development are completed in a timely manner. Identifying this impact allowed the college to take action to address this delay immediately so that the process could move forward. (13 Rec. 8.xx BFPC Minutes 09-30-15)[[67]](#endnote-67)

Prudent Reserve Maintenance

As reported in the 2015 Follow-up Report, to maintain a balanced budget during the recent recession, the college had to resort to using reserves in order to carry out the college’s mission effectively. In light of this occurrence, the college determined that it needed more permanent solutions in place in the event the economy declines drastically again in the future, so that the use of significant reserves would not be necessary. This has been accomplished through adherence of adopted Board Resolution No. 15732: Board Reserves Requirement, setting a reserve goal of 16.6%. (13 Rec. 8.xx Board Minutes 06-19-13)[[68]](#endnote-68)

The college’s budget reserves continue to increase toward the Board directed goal of 16.6% and the Institutional Effectiveness Partnership Initiative (IEPI) goals of 7%. The chart below depicts the steady growth of the college’s reserve for the past three years. (Figure 6)

Figure 6. Reserve Budget as a Percentage of Total Expenditures

|  |  |  |  |
| --- | --- | --- | --- |
| **Fiscal Year** | **Reserve** | **Percentage** | **Total Expenditures** |
| 12-13 | $2,335,864 | 7% | $33,370,040 |
| 13-14 | $2,473,273 | 7% | $35,551,000 |
| 14-15 | $3,116,178 | 8.50% | $36,650,359 |

Retirement Contributions and Other Post-Employment Benefits

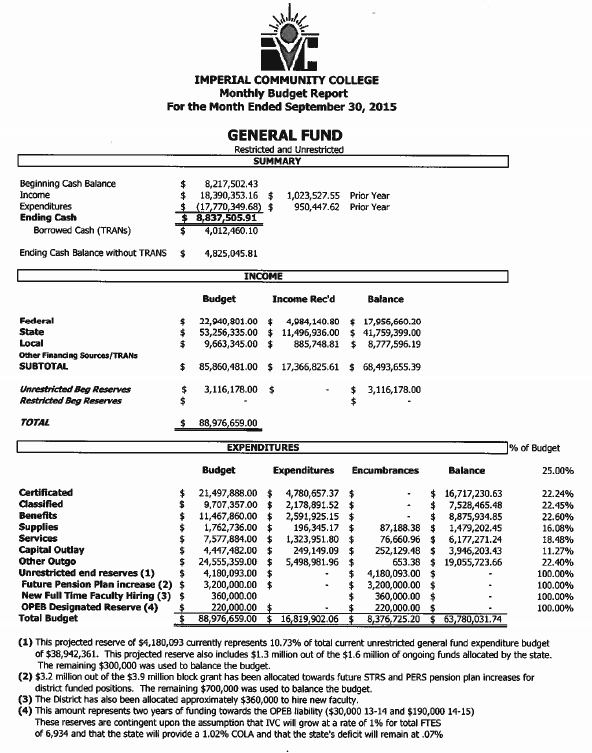
In Fiscal Year 2015-2016, the college received one-time revenue of $3.9 million. Based on conversations with the State Chancellor’s Office, the best use of this money for the college is to designate it to address the significant and unanticipated incremental cost increases in PERS and STRS. (Figure 7) The college Board of Trustees approved a total of $3.2 million of this revenue to be placed in the reserves to address these cost increases over the next four years. (13 Rec. 8.xx Most recent 311 Report submitted to state)[[69]](#endnote-69)

Figure 7. Increasing PERS and STRS Rates

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **FY 13-14** | **FY 14-15** | **FY 15-16** | **FY 16-17** | **FY 17-18** | **FY 18-19** |
| PERS and STRS Costs | $2,001,150 | $2,183,256 | $2,549,785 | $3,017,780 | $3,687,564 | $4,244,391 |
| **PERS Rate** | **8.25%** | **8.88%** | **10.73%** | **12.58%** | **14.43%** | **16.28%** |
| **STRS Rate** | **11.44%** | **11.77%** | **11.85%** | **13.05%** | **16.60%** | **18.20%** |
| Initial 1-Time Funds |  |  | $3,900,000 |  |  |  |
| Cost Increases Over Base |  | $182,106 | $548,635 | $1,016,630 | $1,686,414 | $2,243,241 |
| Remaining 1-Time Funds |  |  | $3,351,365 | $2,334,734 | $648,321 | $(1,594,920) |

The college currently spends an average of approximately $1.1 million as an annual pay-as-you-go payment to address the long-term other post-employment benefit costs (OPEB). Additionally, the Budget and Fiscal Planning Committee recommended that 30% of the favorable variance at the close of the fiscal year (between budget and actual) be dedicated to start paying down this liability. (13 Rec. 8.xx BFPC Minutes 03-26-15)[[70]](#endnote-70) As reflected in the September 2015 Monthly Budget Report (Figure 8), the college has budgeted $220,000 toward the OPEB Designated Reserve ($30,000 for 2013-2014 and $190,000 for 2014-2015). These funds are contingent upon the following assumptions: (1) the college will grow at a rate of 1% for total FTES of 6,934, (2) the state will provide a 1.02% COLA, and (3) the state’s deficit will remain at .07%.

Figure 8. Monthly Budget Report, September 30, 2015

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The college understands that this method alone will not adequately fund the liability at a sufficient pace to keep up with the college’s projected future liability as revealed in the college’s Actuary Study conducted by Total Compensations Systems, Inc. Because of this, the college has undertaken the task of identifying cost containment measures as well as refining the college’s long-term plan, to maximize returns on its investments, with minimal risk, as a means to grow the OPEB fund and lower the college’s liability. Based on the information presented to the college by Backstrom, McCarley, Berry & Co. on October 22, 2014, the college has continued using the pay-as-you-go method to address this liability. The college is considering establishing an irrevocable trust and investment policy as its long-term plan to address the OPEB liability. To that end, the college invited Keenan Associates to make a presentation to the Board to educate them on the elements that go into the development of an OPEB Trust and investment strategy. (13 Rec. 8.xx Board Minutes xx-xx-15)[[71]](#endnote-71)

In addition, the college has had discussions with the Community College League of California (CCLC), another agency with proven positive experience with California Community Colleges and addressing OPEB funding. Another Board presentation is planned for the spring 2016, with a goal to identifying the plan that best fits the college’s needs. (13 Rec. 8.xx Board Minutes 08-26-15)[[72]](#endnote-72)

The college will continue to use the pay-as-you-go method as outlined above to fund the OPEB liability in the short-term, while a long-term, sufficient and sound funding method is researched, developed, and finalized. Ultimately, the college’s goal is to address the OPEB liability and have it funded within a reasonable time. The college understands that this plan as stated will have the added benefit of relieving pressure on the General Fund in the future.

**Evaluation of Institutional Responses to 2007 Recommendations**

*2007 Recommendation 1: The team recommends the college take action to incorporate program review and comprehensive master planning (educational, facilities, technology, and resource plans) with systematic planning and budgeting processes to effectively align college resources with priority college goals. (Standards I.B.3, II.A.2.a, II.B.4. II.C.2, III.C.2, III.D.1, III.D.1.a, IV.A, IV.A.6.)*

**District Response:**

While the college’s improvements in systematic planning and budgeting processes have been delineated in 2013 Recommendation 1, a brief review of key accomplishments follows. The college has:

* implemented a comprehensive interrelated online planning system – Strategic Planning Online (SPOL) to capture and link program review processes to the budgeting processes, has established a planning calendar;
* implemented an ongoing committee evaluation process;
* expanded the Campus Hour to four days a week to allow more faculty participation in committees;
* created a taskforce to review and update the Strategic Educational Master Plan to more clearly depict the linkages between planning, implementation, and data-driven reporting.

The college’s accreditation was reaffirmed by the Commission on the basis of the 2015 Follow-up Report which addressed Recommendations 1 and 8. ([07 Rec. 1.01 Reaffirmation Letter from ACCJC 06-29-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202007%20Recommendations/07%20Rec.%201.01%20Letter%20from%20ACCJC%2006-29-15.pdf))[[73]](#endnote-73)

*2007 Recommendation 2: The team recommends that the college develop student learning outcomes by describing how student learning outcomes will be extended throughout the institution, developing a specific timeline for development that includes establishment of authentic assessment strategies for assessing student learning outcomes in courses, programs, and degrees, describing how resource allocation will be tied to student learning outcomes, and developing a plan for how faculty and staff will become fully engaged in student learning outcomes development. The institution must also demonstrate its effectiveness by providing evidence of achievement in student learning outcomes and evidence of institutional and program performance. (Standards II.A, IV.A, I.B, II.B.4, I.B.5, II.C, III.A.1.c)*

**District Response:**

During Academic Year 2013-2014, the predominant focus of the Student Learning Outcomes (SLO) Committee was more clearly defining the Institutional Learning Outcomes. ([07 Rec. 2.01 SLO Committee Minutes 11-13-13](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202007%20Recommendations/07%20Rec.%202.01%20SLO%20Committee%20Minutes%2011-13-13.pdf))[[74]](#endnote-74) Each department was given three years, i.e., 2014-2017, to complete a cycle assessment; i.e. assessing each SLO at least once every three years. Even though faculty dialogue occurred within each department and results were submitted electronically to the SLO Coordinator, the SLO Committee identified a need for a repository for tracking purposes and transparency.

As noted in the 2013 Recommendation 3, the SLO Committee developed templates to codify the faculty assessment dialogue. ([07 Rec. 2.02 SLO Assessment Template](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202007%20Recommendations/07%20Rec.%202.02%20SLO%20Assessment%20Template.pdf);[[75]](#endnote-75) 07 Rec. 2.03 PLO Assessment Template[[76]](#endnote-76)) The completed templates or summary will be uploaded into SPOL in June 2016 and [June](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202007%20Recommendations/07%20Rec.%202.03%20PLO%20Assessment%20Template.pdf) 2017 to complement the graphical reporting within SPOL. Aggregated actual results from a SLO in multiple sections, or actual results from a SLO for single section, are captured in a linear graph along with the projected (target) results for comparison. (Figure 9)

Figure 9: Aggregated Percent of Target Goal Achieved for Each Course in SPOL



Depicting the link between outcomes and resource allocations led to the 2014-2015 and 2015-2016 focus on a more robust implementation of SPOL and consequently, continued faculty training in the SPOL Assessment Module. Each assessment outcome is linked to an institutional goal and may be linked to a department or program objective, which in turn may link to a resource request. Likewise each program objective is linked to an institutional goal and may be linked to an assessment outcome. ([07 Rec. 2.04 Objective and Assessment Outcome Detai](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202007%20Recommendations/07%20Rec.%202.04%20Program%20Objective%20and%20Assessment%20Outcome%20Detail.pdf)l)[[77]](#endnote-77) During spring 2016, the SLO Committee will determine the most appropriate reporting format to demonstrate the outcome assessment impact on institutional effectiveness.

*2007 Recommendation 5: The team recommends the college develop a process to assess, review, and modify the Technology Plan as the educational needs and programs develop in order to support a college master plan. It is also recommended that the plan be aligned with college budgeting processes and staffing. (Standards III.C.2) (III.C.1.a) (III.C.1.2) (III.D.1.a) (II.B) (I.B.3)*

**District Response:**

The Technology Planning Committee’s purpose and scope include acting as the Technology Resource Planning Committee, which reviews all enhanced resource requests identified in the program review process from all academic and service areas and programs. After the requested items are prioritized by the Technology Resource Planning Committee, the list and related recommendations are forwarded to the Budget and Fiscal Planning Committee. After the final administrative budget decisions are made, the Yearly Action Plan, associated with the Strategic Technology Plan, is updated or revised to incorporate the approved requested items and identified needs. Participants from each of the participatory governance groups have an opportunity to contribute in the above processes. [(07 Rec. 5.01 Technology Planning Committee Minutes 03-19-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202007%20Recommendations/07%20Rec.%205.01%20Technology%20Planning%20Committee%20Minutes%2003-19-15.pdf);[[78]](#endnote-78) [07 Rec. 5.02 Technology Planning Committee Minutes 11-13-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%202007%20Recommendations/07%20Rec.%205.02%20Technology%20Planning%20Committee%20Minutes%2011-13-14.pdf)[[79]](#endnote-79))

The Strategic Technology Plan was developed with four initiatives that are linked to the institutional goals and objectives in the Strategic Educational Master Plan. Those four initiatives are then broken down further into four supporting principles, which drive the Yearly Action Plan. The Strategic Technology Plan is reviewed in its entirety every five years to verify that the plan continues to support the institutional goals and objectives found in the Strategic Educational Master Plan.

*2007 Recommendation 6: To enhance the effectiveness of the governance and decision-making processes, the team recommends that the college define in writing the roles of the committees and the decision making structures and processes; that the college develop a process to evaluate them and use the results of evaluation for improvement. (Standards IV.A.2, IV.A.5)*

**District Response:**

The 2013 external evaluation team conducted a review of the efforts made by the college to remediate Recommendation 6 of the 2007 report and determined this recommendation was only partially met. The team concluded that:

“The College describes its program review processes as evolving. In fact, the College’s current processes for program review and resource allocation were adopted after the Self Evaluation Report was composed. It is clear that the College is working to adopt processes that promote institutional effectiveness. Specifically, the College, through its Annual Program Review (APR) and Comprehensive Program Review (CPR) processes, has incorporated programmatic review with the budget allocation processes. The Self Evaluation Report provided evidence of an annual form that departments use to make resource requests. Interviews and evidence provided on-site demonstrate that the College has continually reviewed and revised this process; they recently revised the program review process, changing the procedure from an alternating annual review for resource requests and a three-year program review to an integrated one-year process that evaluates both review of programs and budget resource requests.

However, these processes have not yet stabilized, lacking a full cycle of evaluation, assessment, and improvement as well as strong and consistent linkages with College-wide goals and improvement plans based on student learning and service area outcomes.”

The 2013 evaluation team report specifically pointed to the 2013 Recommendation 1, which states:

“In order to fully meet the Standard, the team recommends that the College consistently link the institutional goals and objectives detailed in the Educational Master Plan with operational plan goals and resource allocations, including technology resources, in order to assess progress toward meeting institutional goals. In addition, the College should establish a planning calendar that identifies all planning activities, committees, and the role of various College plans, and includes institutional effectiveness assessment and improvement cycles.”

The college responded to 2013 Recommendation 1 in the 2015 Follow-up Report, which the Commission used to evaluate this Standard and ultimately reaffirm the college’s accreditation. Consequently, to show resolution of 2007 Recommendation 6, the college presents the following updated version of the 2015 Follow-up Report for 2013 Recommendation 1 related to the college’s committee and decision-making structure.

The college has recently instituted and completed a comprehensive cycle of committee self-evaluations, including an analysis of evidence related to attendance, committee composition, objectives proposed, and objectives achieved. (07 Rec. 6.01 Sample Committee Self-Evaluation)[[80]](#endnote-80) As a result, several committees have been streamlined, others dissolved or repurposed, and new committees formed. (07 Rec. 6.02 College Council Minutes showing changes to committees)[[81]](#endnote-81) This cycle of committee self-evaluation is now an annual process. (07 Rec. 6.03 CART Bylaws;[[82]](#endnote-82) CART Minutes 11-4-14;[[83]](#endnote-83) 07 Rec. 6.05 EMPC Bylaws;[[84]](#endnote-84) 07 Rec. 6.06 EMPC Minutes 12-5-14 )[[85]](#endnote-85)

The Academic Senate solicited self-evaluations from each sub-committee and has reported a summary back to the campus community. (07 Rec. 6.07 Summary Evaluation of Academic Senate Sub-Committee Self Evaluations)[[86]](#endnote-86) In response to the ACCJC recommendation, the Academic Senate has taken strong steps to facilitate broader and more robust participation at these collegial consultation committee meetings. As a direct result of these efforts, 100% of new faculty have been added to the rosters of Academic Senate committees. Some limited openings on Academic Senate committees drew a large number of candidates–more than 15 candidates for two openings on the Distance Education Committee. New faculty and faculty without committee appointments are given priority over other candidates when committees are constituted. Committee members with spotty attendance may be relieved of their committee membership to make way for more committed members.

The college Council conducted a review of the campus committees aligned under it using the committee self-evaluation tool. All committees completed and submitted self-evaluations to the College Council, which reviewed them during the 2014-2015 Academic Year for membership, participation, and progress on goals and objectives. Representative groups were asked to replace low-attending members. (07 Rec. 6.08 Academic Senate Minutes 08-20-14, 09-3-14;[[87]](#endnote-87) 07 Rec. 6.09 College Council Minutes 09-22-14)[[88]](#endnote-88)

During the 2014-2015 Academic Year, the President’s Office implemented a new process for committee assignments for full-time faculty. This new process features an electronic selection form that all full-time faculty complete during the spring semester. (07 Rec. 6.10 Selection form and committee structure chart)[[89]](#endnote-89) By the end of the spring semester, all forms have been submitted to the President’s Office and reviewed by respective deans. Committee assignments for fall 2015 were made and announced to faculty before they left for the summer. This new process replacesthe inefficient process of sending out paper selection forms in the fall, which caused delays in committees getting started while waiting for committee assignments.

Through participatory governance, the college implemented in 2015-2016 a new Campus Hour schedule that will ensure better participation at all planned committee meetings and other events on campus. Surveys have shown that the biggest barrier to attendance at department and committee meetings is scheduling conflicts. By establishing an hour free of all classes Monday through Thursday, from 12:50 to 1:50 p.m., the college removes this obstruction to attendance at meetings, professional development, and other campus events. (07 Rec. 6.xx Academic Senate Minutes 9-17-14; College Council Minutes 9-8-14)[[90]](#endnote-90) The College Council and Academic Senate both resolved to have the committees aligned under them schedule meetings during Campus Hour to facilitate faculty attendance. (07 Rec. 6.xx Academic Senate and College Council Minutes re Committee Dates for Campus Hour)[[91]](#endnote-91)

The Strategic Educational Master Planning Committee (SEMPC) and Continuous Accreditation Readiness Team (CART) worked together to approve new bylaws that streamline committee membership and establish a consultant role. In addition, the new bylaws offer better representation across campus, which engages a wider band of staff, including teaching faculty and others. With these changes, the college expects more robust attendance and participation. (07 Rec. 6.xx EMPC Bylaws; CART Bylaws)[[92]](#endnote-92)

**RESPONSE to SELF-IDENTIFIED IMPROVEMENT PLANS from 2012**

**STANDARD I. INSTITUTIONAL MISSION AND EFFECTIVENESS**

**Standard I.B. Improving Institutional Effectiveness**

*Standard I.B.5. The institution uses documented assessment results to communicate matters of quality assurance to appropriate constituencies.*

1. **2012 Actionable Improvement Plan**

The college will continue to work to improve the use of data and assessment results to communicate matters of quality assurance to appropriate constituents.

**District Response:**

Since 2012, guided by data and assessment structures, the college has improved in the area of quality assurance. Data collection methods have been strengthened using the student management system and outside sources to improve data quality, data availability to stakeholders, and automation of data reports used in program review, as well as reports to analyze different programs such as veterans’ services, distance education, and foster youth. To ensure that the college is maximizing the use of data, the program review data are disaggregated by subgroups (age, ethnicity, gender, etc.). (Plan 1.01 Academic Program Review Template; Sample Data Report)[[93]](#endnote-93)

Programs are now required to provide a “health analysis” based on a three-year review of data that include the following components:

* Enrollment and fill rates disaggregated by day, evening, and online classes, which is also used in enrollment management and scheduling processes
* Productivity
* Success and retention disaggregated by day, evening, and online classes, as well as ethnicity, age, and gender

The three-year trend analysis allows for an assessment of the program’s current status and growth projections.

Another matrix used by the college for quality evaluation is the CCCCO Scorecard that reviews performance based on established matrixes for completion rates, persistence, math, English, and Career and Technical Education (CTE). This information is helpful in analyzing achievement gaps between targeted groups. Local, State and national labor market data are used in the evaluation of CTE programs. (Plan 1.01 Board Minutes 12-17-14[[94]](#endnote-94))

These data trends are assessed in program review cycles and strategic program development. As such, reports are provided to all the appropriate constituencies, such as the Academic Senate, the College Council, and the Board of Trustees.

**STANDARD II. STUDENT LEARNING PROGRAMS AND SERVICES**

**Standard II.A. Instructional Programs**

*Standard II.A.1.b. The institution utilizes delivery systems and modes of instruction compatible with the objectives of the curriculum and appropriate to the current and future needs of its students.*

1. **2012 Actionable Improvement Plan**

The DE Committee, in coordination with the appropriate Instructional Deans and the Office of Instruction, will establish by April of 2013 criteria for a course’s eligibility to be offered online so that program-related classes can again be offered online in the fall of 2013.

**District Response:**

The college has experienced major changes in its distance education programming since the March 2013 comprehensive visit, based upon its assurances to the Commission that the college’s plan was to “take a ‘build it from the ground up’ approach,” acknowledging that “solid course design, tethered to best practices, is of utmost importance.” ([Plan 2.01 Letter to ACCJC 02-13-13](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.01%20Letter%20to%20ACCJC%2002-13-13.pdf))[[95]](#endnote-95)

An important element of the college’s renewed commitment to a quality distance education program was the hiring of a full-time, tenure track, non-teaching faculty member as the Distance Education Coordinator, partnered with an active Distance Education Committee (DEC) committed to the development of a distance education program in support of student access and completion. Figure 10 sets forth College actions, including course development criteria, that demonstrate its ongoing commitment to the development of a quality distance-learning program. That commitment includes ongoing review, evaluation, and revision (when needed).

Figure 10. Actions Taken in Support of College’s Commitment to Distance Education

|  |  |
| --- | --- |
| **Date** | **Action Taken** |
| 09/25/2013 | DEC developed timeline for the development of online courses for spring 2014 and established @ONE Training Requirements and course development standards. ([Plan 2.02 DE Committee Minutes 09-25-13](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.02%20DE%20Committee%20Minutes%2009-25-13.pdf);[[96]](#endnote-96) [Plan 2.03 DE Course Evaluation Form](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.03%20DE%20Course%20Evaluation%20Form.pdf))[[97]](#endnote-97) |
| 10/23/2013 | DEC reviewed AP 4105, with recommendations to update DE procedures to insert “DE Committee review” to Course Quality Determination section. ([Plan 2.04 DE Committee Minutes 10-23-13](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.04%20DECommittee%20Minutes%2010-23-13.pdf))[[98]](#endnote-98) |
| 11/27/2013 | DEC continued discussions regarding the steps required to deliver online courses, including @ONE Training requirements and course development timeline. ([Plan 2.05 DE Committee Minutes 11-27-13](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.05%20DE%20Committee%20Minutes%2011-27-13.pdf))[[99]](#endnote-99) |
| 11/01/2013 | District began recruitment of full-time, tenure track, non-teaching faculty DE Coordinator. ([Plan 2.06 DE Coordinator Recruitment Email 11-01-13](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.06%20DE%20Coordinator%20Recruitment%20Email%2011-01-13.pdf))[[100]](#endnote-100) |
| 02/01/2014 | District hired full-time, tenure track, non-teaching faculty DE Coordinator (previous DE Coordinators were teaching faculty with 6 units reassigned time). ([Plan 2.07 DE Coordinator Job Description](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.07%20DE%20Coordinator%20Job%20Description.pdf))[[101]](#endnote-101) |
| 02/12/2014 | DEC confirmed @ONE Training requirements for all DE faculty, reviewed course development criteria, and selected course evaluation team. ([Plan 2.08 DE Committee Minutes 02-12-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.08%20DE%20Committee%20Minutes%2002-12-14.pdf))[[102]](#endnote-102) |
| 03/12/2013 | DEC established online course development criteria, giving priority to courses affiliated with ADTs and Associate Degrees; updated the DE Webpage, <http://www.imperial.edu/courses-and-programs/distance-education/>;  developed a DE Course Development Checklist; and revised the DE Course Development Form. ([Plan 2.09 DE Committee Minutes 03-12-13](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.09%20DE%20Committee%20Minutes%2003-12-13.pdf);[[103]](#endnote-103) [Plan 2.10 DE Course Evaluation Form](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.10%20DE%20Course%20Evaluation%20Form.pdf))[[104]](#endnote-104) |
| 04/09/2014 | DEC approved Regular and Effective Contact policy. ([Plan 2.11 DE Regular and Effective Contact Policy](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.11%20DE%20Regular%20and%20Effective%20Contact%20Policy.pdf))[[105]](#endnote-105) |
| 09/10/2014 | DEC directed DE Coordinator to insure IVC was in compliance with State Authorization requirements, appointed the Academic Year 2014-2015 DE Course Evaluation Team, and reviewed online course development priority list and faculty @ONE training and certification. ([Plan 2.12 DE Committee Minutes 09-10-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.12%20DE%20Committee%20Minutes%2009-10-14.pdf)[[106]](#endnote-106)) |
| 10/08/2014 | DEC revised @ONE training requirements to include the @ONE accessibility course prior to teaching online, and revised the selection of DE faculty to require a collaborative process that includes all faculty within a department. ([Plan 2.13 DE Committee Minutes 10-08-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.13%20DE%20Committe%20Minutes%2010-08-14.pdf);[[107]](#endnote-107) [Plan 2.14 DE Course Development Process](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.14%20DE%20Course%20Development%20Process.PDF))[[108]](#endnote-108) |
| 11/12/2014 | DEC approved a Course Map Template to assist faculty in the development of new online courses, and reviewed DE courses under development. ([Plan 2.15 DE Committee Minutes 11-12-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.15%20DE%20Committee%20Minutes%2011-12-14.pdf);[[109]](#endnote-109) [Plan 2.16 DE Course Map Template](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.16%20DE%20Course%20Map%20Template.pdf))[[110]](#endnote-110) |
| 12/10/2014 | DEC conducted review of DE goal attainment, compliance with DE faculty selection process, and DE faculty @ONE training. ([Plan 2.17 DE Committee Minutes 12-10-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.17%20DE%20Committee%20Minutes%2012-10-14.pdf))[[111]](#endnote-111) |
| 03/11/2015 | DEC reviewed @ONE training and professional development, discussed increased need for hybrid course development, and reviewed status of State Authorization policy with July 1, 2015 deadline. ([Plan 2.18 DE Committee Minutes 03-11-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.18%20DE%20Committee%20Minutes%2003-11-15.pdf))[[112]](#endnote-112) |
| 04/14/2015 | DEC approved State Authorization policy statement on the DE State Authorization Webpage, <http://www.imperial.edu/courses-and-programs/distance-education/for-students/state-authorization/>, reviewed new DE courses ready for evaluation, and confirmed @ONE training requirements for all DE faculty. ([Plan 2.19 DE Committee Minutes 04-14-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.19%20DE%20Committee%20Minutes%2004-14-15.pdf);[[113]](#endnote-113) [Plan 2.20 IVC General Catalog - Student Complaint Procedure](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.20%20IVC%20General%20Catalog%20-%20Student%20Complaint%20Procedure.pdf)[[114]](#endnote-114)) |
| 05/13/2015 | DEC revised State Authorization statement on the DE Webpage (<http://www.imperial.edu/courses-and-programs/distance-education/for-students/state-authorization/>) in response to feedback from SDICCCA DE Coordinators’ Committee to add the statement, “It is recommended that students who reside outside of California and Arizona contact the DE Coordinator before registering for IVC distance education courses.” ([Plan 2.21 DE Committee Minutes 05-13-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.21%20DE%20Committee%20Minutes%2005-13-15.pdf))[[115]](#endnote-115) |
| 06/10/2015 | DEC reviewed the committee membership and meeting schedule for Academic Year 2015-2016, the status of the State Authorization policy, and the online course development process. ([Plan 2.22 DE Committee Minutes 06-10-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.22%20DE%20Committee%20Minutes%2006-10-15.pdf))[[116]](#endnote-116) |
| 08/18/2015 | DEC approved the DE Committee Evaluation for Academic Year 2014-2015, appointed the DE Course Evaluation Team for Academic Year 2015-2016, and reviewed goals for Academic Year 2015-2016. ([Plan 2.23 DE Committee Minutes 08-18-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.23%20DE%20Committee%20Minutes%2008-18-15.pdf))[[117]](#endnote-117) |
| 09/22/2015 | DEC discussed the proposed switch to Canvas CMS from Blackboard in support of the OEI, and developed a strategy to obtain faculty approval during fall 2015. ([Plan 2.24 DE Committee Minutes 09-22-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.24%20DE%20Committee%20Minutes%2009-22-15.pdf))[[118]](#endnote-118) |
| 10/27/15 | DEC revised the DE Course Development Process due to continuing issues associated with faculty selection for online course development; and approved the adoption of the Canvas CMS in support of the California Online Education Initiative. ([Plan 2.25 DE Committee Minutes 10-27-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%202.25%20DE%20Committee%20Minutes%2010-27-15.pdf))[[119]](#endnote-119) |

The college suspended online programming during the 2012-2013 Academic Year, pending substantive change authorization from ACCJC. ACCJC authorization was received for the 2013-2014 Academic Year, at which time the college began developing distance education programming, using Blackboard as the new course management system (changing from ETUDES). Enrollment in online/hybrid courses increased by 528% between Academic Year 2012-3013 (399 students) and Academic Year 2014-2015 (2,507 students).

Although the college has limited courses (31) online at this time, the Distance Education program is highly viable. More students are seeking online options and the college continues its efforts to provide quality online programming. In support of this goal, the college participates in the California Community College’s Online Education Initiative (OEI) <http://ccconlined.org>. Imperial Valley College is one of twenty-four colleges in the OEI and is piloting the system-wide online tutoring resource. OEI provides system-wide resources for online students, system-wide resources for faculty developing online courses, and the benefit of economies of scale for technology resources. The college’s participation in the OEI provides another avenue to improve student success and retention.

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| *Standard II.A.1.c. The institution identifies student learning outcomes for course, programs, certificates, and degrees; assesses student achievement of those outcomes; and uses assessment results to make improvements.* |

1. **2012 Actionable Improvement Plan**

The SLO Coordinator will work in conjunction with the Vice President for Academic Services and Instructional Technology to create an efficient repository for storing course-level SLO assessment forms, as well as program-level SLOs, by the end of the 2012-2013 Academic Year.

**District Response:**

The college purchased Strategic Planning Online (SPOL) at the end of Academic Year 2012-2013 and implementation training began in fall 2013. Faculty training and data entry for the SPOL Assessment Module began in fall 2014 simultaneous with the processes of annual program review. During Academic Year 2014-2015, the SLO Coordinator and the SLO Committee focused on re-defining Institutional Learning Outcomes, as well as mapping learning outcomes from courses to programs to institutional outcomes within SPOL. ([Plan 3.01 SPOL Training Schedule](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%203.01%20SPOL%20Training%20Schedule.pdf))[[120]](#endnote-120) In fall 2015, the SLO Committee members continued faculty training in SPOL with one-on-one sessions and continued to engage faculty in the importance of linking learning outcomes to department/program objectives. ([Plan 3.02 PLO Training and Attendance](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%203.02%20PLO%20Training%20and%20Attendance.pdf)[[121]](#endnote-121))

As mentioned earlier, in fall 2015, the SLO Committee developed templates to codify faculty dialogue regarding SLOs and PLOS. When completed, the templates will be uploaded into SPOL, a notable improvement over the previous basic form that was emailed and then printed by the SLO Coordinator. Faculty training on the templates began in fall 2015 and will continue throughout spring 2016 to ensure the final documents are ready to upload in June 2016 and June 2017. (See also response to 2007 Recommendation 2) ([Plan 3.03 SLO Assessment Template](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%203.03%20SLO%20Assessment%20Template.pdf);[[122]](#endnote-122) [Plan 3.04 PLO Assessment Template](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%203.04%20PLO%20Assessment%20Template.pdf))[[123]](#endnote-123)

|  |
| --- |
| *Standard II.A.2.f. The institution engages in ongoing, systematic evaluation and integrated planning to assure currency and measure achievement of its stated student learning outcomes for courses, certificates, programs including general and vocational education, and degrees. The institution systematically strives to improve those outcomes and makes the results available to appropriate constituencies.* |

1. **2012 Actionable Improvement Plan**

The college will continue to integrate the assessment of SLOs and PLOs into its Comprehensive Program Review. No additional planning measures are needed at this time. The SLO Coordinator will continue to work with all campus constituencies to develop a specific plan for the assessment of PLOs.

**District Response:**

In Academic Year 2013-2014, all PLOs were reviewed and included in the General Catalog. Implementation of SPOL and mapping of learning outcomes to institutional goals and outcomes began the following academic year. During Academic Year 2015-2016, the focus changed from mapping outcomes to identifying and using more than one assessment measure. In fall 2015, members of the SLO Committee continued to train faculty in one-on-one sessions in SPOL and assisted faculty in the use of multiple assessment measures. The tutorial video mentioned earlier (<https://www.youtube.com/watch?v=EHyucP2FQpk&feature=em-upload_owner>) and user guides facilitated this training. ([Plan 4.01 SPOL Assessment Basics – Measures and Rubrics](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%204.01%20SPOL%20Assessment%20Basics%20-%20Measures%20and%20Rubrics.pdf);[[124]](#endnote-124) [Plan 4.02 SPOL Assessment Basics – Programs and Outcomes](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%204.02%20SPOL%20Assessment%20Basics%20-%20Programs%20and%20Outcomes.pdf);[[125]](#endnote-125) [Plan 4.03 SPOL Assessment Quick Step Guide](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%204.03%20SPOL%20Assessment%20Data%20Quick%20Step%20Guide.pdf)[[126]](#endnote-126)) Additionally, the new SLO and PLO templates were created to guide and capture faculty dialogue regarding assessment methods, analysis of the results, and plans to improve student learning. The completed templates will be uploaded into SPOL at the end of Academic Years 2015-2016 and Year 2016-2017. (Plan 4.05 PLO Assessment Plan)[[127]](#endnote-127)

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| *Standard II.A.2.i. The institution awards degrees and certificates based on student achievement of a program’s stated learning outcomes.* |

1. **2012 Actionable Improvement Plan**

All PLOs for programs, degrees, and certificates are to be written by the end of November 2012. Programs will be assessing all of these PLOs by the end of the 2012-2013 academic year. These PLOs, once written, will be put into CurricuNET by the end of the 2012-2013 academic year, and listed in the online catalog for the 2013-2014 academic year.

**District Response:**

During Academic Year 2012-2013, faculty finalized the PLOs for all programs and processed the information through CurricuNET. Effective with the 2013-2014 catalog, all PLOs are listed directly below each program description. ([Plan 5.01 General Catalog – Program Descriptions with PLOs](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%205.01%20General%20Catalog%20-%20Program%20Descriptions%20with%20PLOs.pdf))[[128]](#endnote-128) During 2014-2015, some PLO data was captured in the SPOL Assessment Module. (Plan 5.02 Sample Program PLO Data)[[129]](#endnote-129)

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| *Standard II.A.6. The institution assures that students and prospective students receive clear and accurate information about educational courses and programs and transfer policies. The institution describes its degrees and certificates in terms of their purpose, content, course requirements, and expected student learning outcomes. In every class section, students receive a course syllabus that specifies learning objectives consistent with those in the institution’s officially approved course outline.* |

1. **2012 Actionable Improvement Plan**

Chairs and lead faculty will add PLOs for all programs in CurricuNET, and these modifications will be approved by the Curriculum Committee, the Academic Senate, and the Board of Trustees in time to be included in the 2013-2014 General Catalog.

**District Response:**

As reported in the response to Actionable Improvement Plan 5, during Academic Year 2012-2013, all PLOs were processed through CurricuNET and, effective 2013-2014, included in the General Catalog. ([Plan 6.01 General Catalog – Program Description with PLOs](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%206.01%20General%20Catalog%20-%20Program%20Descriptions%20with%20PLOs.pdf))[[130]](#endnote-130)

During 2013-2014 the new syllabus template was approved by the Academic Senate. Faculty were given the option of using the new template in fall 2014, but were required to use it effective spring 2015. Page one of the syllabus template includes a designated space for student learning outcomes, as well as a space for course specific objectives. ([Plan 6.02 Syllabus Template](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%206.02%20Syllabus%20Template%20p.%201.pdf))[[131]](#endnote-131) All faculty are required to upload syllabi to a syllabus repository created on the college website, <https://syllabi.imperial.edu/>, for easy access by students and faculty. ([Plan 6.03 Sample Course Syllabus](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%206.03%20Sample%20Course%20Syllabus.pdf))[[132]](#endnote-132) In addition, those using the online course management system may elect to attach the syllabus to their course shell.

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| *Standard II.A.6.c. The institution presents itself clearly, accurately, and consistently to prospective and current students, the public, and its personnel through its catalogs, statements, and publications, including those presented in electronic formats. It regularly reviews institutional policies and procedures regarding publications to assure integrity in all representations about its mission, programs, and services.* |

**7. 2012 Actionable Improvement Plan**

The Vice President for Information Technology will work through the Technology Planning Committee to continue to update the college website and to clarify roles and procedures for updating and maintaining the site. The Marketing Committee’s role and membership will be discussed and revised by the end of the 2012-2013 academic year.

**District Response:**

The college website currently has 5,394 documents within the document management system, 3,336 of those documents having been added after July 1, 2012. Over the last few years, there have been over 9,200 updates to website pages and over 1,000 pages added.

Since the 2013 visit, the college established procedures for each division to maintain its section of the website. The Online Services Architect worked with each division to determine the best way to maintain the data and determine who would be responsible for ongoing maintenance of the data. The Technology Planning Committee is in the process of reevaluating the procedures and the committee’s proposal will be vetted through participatory governance. The detailed website update procedures are found on the college website at <http://www.imperial.edu/faculty-and-staff/information-technology/website-update-procedures/>.

The Marketing Committee was re-established in March 2013 and is composed of members from the appropriate representative groups on campus. The composition of the Marketing Committee includes the Public Information Officer (PIO) along with the following campus representatives:

1 – Admin representatives

3 – CMCA representatives

3 – Faculty representatives

3 – Classified representatives

Ex-officio: Peggy Dale, Public Relations consultant

Since it was established, the Marketing Committee has held regular meetings and made progress on its mission. Activities that highlight the committee’s efforts include:

* reviewed Public Relations/Marketing Program Reviews
* approved the college’s Public Relations Plan ([Plan 7.01 Public Relations and Marketing Plan](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%207.01%20Public%20Relations%20and%20Marketing%20Plan%202014-2017.pdf))[[133]](#endnote-133)
* developed a proposed Social Media Policy (Plan 7.02 Social Media Policy)[[134]](#endnote-134)
* rendered advice on enrollment marketing efforts
* helped coordinate displays for the college at the California Mid-Winter Fair and Fiesta

The college social media guidelines were reviewed on October 28, 2015, and are scheduled for approval by College Council in February 2016. (Plan 7.03 Public Relations and Marketing Committee Minutes 10-28-15;[[135]](#endnote-135) College Council Minutes 12-\_\_-15[[136]](#endnote-136))

**Standard II.B. Student Support Services**

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| *Standard II.B.3.f. The institution maintains student records permanently, securely, and confidentially, with provision for secure backup of all files, regardless of the form in which those files are maintained. The institution publishes and follows established policies for release of student records.* |

**8. 2012 Actionable Improvement Plan**

Imperial Valley College’s office of Admissions and Records will continue to transition its archived documents into its imaging system and anticipates that all documents will eventually be imaged at the time received. During this transition period, the Admissions and Records office and the Instruction office will continue to hold appropriate archived student records in hard copy for the period required by law.

**District Response:**

Transitioning from archived documents to an ongoing and up-to-date imaging system for all student records has been challenging. The college began with student records that were more immediate – those records more likely to be requested in the very near future. To facilitate this transition, the college purchased desktop scanners for all Admission and Records staff members to scan documents that cross their desk during the year and index them to a student’s record. The college also planned to address records in the past decade by assigning Admission and Records staff to work through the boxes of records that date back to 2002, along with keeping up with current Class 1 documents. The staff successfully scanned and indexed over 20,000 Class 1 records in 2014-2015.

The college continues to pay required monthly storage fees of $310.00 for microfilmed records and recognizes the need to prioritize the digitizing of the 279 rolls that remain due to declining record image quality over time. These images are student Class 1 records the college is required to retain pursuant to the Education Code. The estimated funding for the 279 rolls is $17,159.00, and the request for these funds has been made through the program review process. ([Plan 8.01 A&R Program Reviews](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%208.01%20Admissions%20and%20Records%20Program%20Review.pdf))[[137]](#endnote-137)

**STANDARD III. RESOURCES**

**Standard III.A. Human Resources**

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| *Standard III.A.5.a. The institution plans professional development activities to meet the needs of its personnel.* |

**9. 2012 Actionable Improvement Plan**

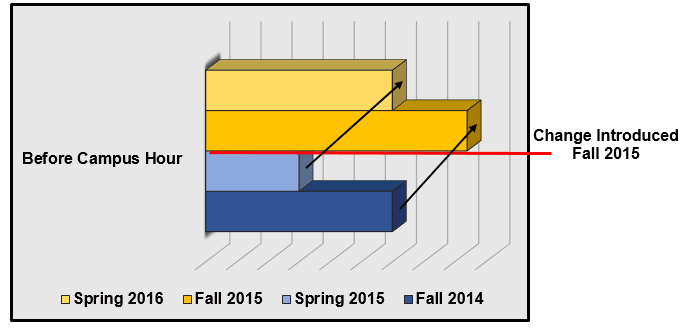
In order to ensure that the needs of all personnel are met, the college will review the recently implemented Campus Hour, assess the current reassigned time for faculty coordinators of Professional Development activities, and conduct staff surveys related to professional development needs.

**District Response:**

After reviewing the professional development activities and the associated reassigned time of the faculty Professional Development Coordinators in 2012, the college established an interdisciplinary Campus Hour and Professional Development (CHPD) Committee in fall 2013. The composition of the committee ensured faculty membership, and the committee assumed much of the former faculty coordinator’s role for professional development. As part of the program review process, the CHPD Committee acts as the Professional Development Resource Planning Committee. In this capacity, the committee prioritizes enhanced budget requests and makes recommendations for future professional development activities. ([Plan 9.01 CHPD Standing Rules](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%209.01%20CHPD%20Standing%20Rules.pdf))[[138]](#endnote-138)

During the 2014-2015 year, a review of the Campus Hour implementation, frequency, and impact of its scheduled time on class time-blocks was conducted. ([Plan 9.02 Campus Hour and Time Block PowerPoint 07-16-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%209.02%20Campus%20Hour%20and%20Time%20Block%20PowerPoint%2007-16-14.pdf))[[139]](#endnote-139) The results of the review and a proposed change were shared with the participatory governance committees. ([Plan 9.03 College Council Minutes 09-08-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%209.03%20College%20Council%20Minute%2009-08-14.pdf);[[140]](#endnote-140) [Plan 9.04 Academic Senate Minutes 09-03-14](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%209.04%20Academic%20Senate%20Minutes%2009-03-14.pdf);[[141]](#endnote-141)) The final consensus resulted in scheduling Campus Hour four days a week, moving the start time of Campus Hour one hour later, and implementing the changes in fall 2015. The increase in frequency allowed for more consistency in the Monday-through-Thursday time-blocks when more students and faculty are on campus. The time change allowed for more classes to be offered in the mornings when student need and demand are high. (Figure 11)

Figure 11. Course Distribution Comparison Before and After Campus Hour Change



The CHPD Committee re-issued surveys in spring 2015 to reassess the self-identified professional development needs of students, staff, faculty, and administrators. Results were available by the end of the semester and shared with the College Council. ([Plan 9.05 Campus Hour Survey Summary](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%209.05%20Campus%20Hour%20Survey%20Summary.pdf);[[142]](#endnote-142) [Plan 9.05 College Council Minutes 05-18-15](http://accreditation.imperial.edu/docs/2016/mid-term-report/Response%20to%20Self-Identified%20Improvement%20Plans/Plan%209.06%20College%20Council%20Minutes%20(CHPD%20Written%20Report)%2005-18-15.pdf)[[143]](#endnote-143))

**Standard III.B. Physical Resources**

*Standard III.B. Physical resources, which include facilities, equipment, land, and other assets, support student learning programs and services and improve institutional effectiveness. Physical resource planning is integrated with institutional planning.*

*Standard III.B.1. The institution provides safe and sufficient physical resources that support and assure the integrity and quality of its programs and services, regardless of location or means of delivery.*

**10. 2012 Actionable Improvement Plans**

Maintenance Department and Safety and Security Department personnel will conduct regular safety inspections of facilities and grounds to ensure a safe learning and working environment on campus. The college will continue to rely on input and expertise from our local agencies (Imperial County Fire Department, Imperial County Health Department, Regional Water Board, etc.) to ensure full compliance with all health and safety regulations. The college will also continue building on its relationship with the American Red Cross

**District Response:**

Safe and Accessible Physical Resources

Maintenance Department staff, under the direction of the Director of Maintenance, meet on a monthly basis to review and address safety concerns pertaining to the condition of the grounds and facilities. Any concerns identified by maintenance staff while conducting their daily inspections are documented via an electronic Service Desk ticketing system that tracks the status of actions taken to address the issue in question. (Plan 10.xx MAINTENANCE SERVICE DESK TICKET)[[144]](#endnote-144) Identified issues are presented at monthly safety meetings for discussion as needed. In his role as a resource to the Environmental Health and Safety Committee, a subcommittee of the College Council, the Director of Maintenance brings to the committee any information revealed at these recurring safety meetings. This process not only serves as a transparent communication chain but also identifies some important needs for the college. For example, this process revealed the need for the installation of a handicap ramp for the college’s outdoor amphitheater in Fiscal Year 2014-2015. (Plan 10.xx EHSC MINUTES WITH RAMP DISCUSSION \_\_-\_\_-\_\_)[[145]](#endnote-145) Once the issue was identified, a plan was developed and initiated by the Environmental Health and Safety Committee, with a report of said action presented to the College Council for campus-wide dissemination. (Plan 10.xx: COLLEGE COUNCIL MINUTES WITH RAMP DISCUSSION \_\_-\_\_-\_\_[[146]](#endnote-146)) This chain of events solidifies the effectiveness of the process in confirming that the college’s grounds and facilities are safe and accessible for our students, faculty, and staff.

On-Campus Safety Support

The college presently employs up to 17 Campus Safety Officers to provide 24-hour security to the campus. (Plan 10.xx BOARD AGENDA WITH PERSONNEL APPROVAL AND/OR CSO PERSONNEL BUDGET)[[147]](#endnote-147) This is a substantial increase in security since the 2013 Comprehensive Self Evaluation. Campus Safety Officers have completed the California Peace Officer Standard and Training (POST) Level III Reserve Officer course. (Plan 10.xxCSO JOB DESCRIPTION)[[148]](#endnote-148) They have received comprehensive training that includes providing security services for students, faculty, and staff, as well as public safety issues involving criminal activities. They also receive training in how to respond to campus evacuations and other emergencies. As part of their duties, Campus Safety Officers also conduct monthly inspections of the college’s emergency showers and eyewash stations. (Plan 10.xx INSPECTION LOGS)[[149]](#endnote-149)

Another element of on-campus safety support is the college’s 13 Campus Parking Attendants. Both the Campus Safety Officers and the Campus Parking Attendants receive training on how to observe and monitor people and vehicles entering and moving around the campus. The officers and attendants also possess an understanding of the protocol for identifying safety concerns and how and when to notify the appropriate safety personnel for further action.

Since early 2015, the Campus Safety and Parking Control Department has been reviewing and updating policies and procedures that affect the safety of the Campus Community. (Plan 10.xx CSPC MEETING MINUTES WITH POLICY DISCUSSION)[[150]](#endnote-150) The areas of focus of these policies include compliance with the Federal requirements of the Jeanne Clery Act, the Violence Against Women Act, and Title XI, as well compliance with current industry standards.

In addition to increasing the number of Campus Safety Officers, since 2009, the college increased the installation of panic-button poles, with the addition of two poles since the 2013 Comprehensive Self Evaluation Report, bringing the total to five panic-button poles at the time of this report. Incorporating more panic-button poles continues to be an element of the college’s ongoing facilities planning to renovate and expand its physical infrastructure.

Partnerships that Support Campus Safety

The college continues to rely on input and expertise from our local agencies to ensure the safety of its students, faculty, and staff. These collaborations involve the Imperial County Sheriff’s Office, the Imperial County Fire Department, the Imperial County Health Department, the Regional Water Board, the R.F. Erection Company, Thyssen Crupp Inc., EFR, Asberry Environmental, and the American Red Cross. (Plan 10.xx Red Cross Shelter Agreement;[[151]](#endnote-151) Plan 10.xx Red Cross Supply Storage Agreement;[[152]](#endnote-152) Plan 10.xx - contracts??[[153]](#endnote-153))

The partnership with the Imperial County Sheriff’s Office (ICSO) allows for additional security to be provided during large events on campus. ICSO is also the college’s designated first responder in the event of an emergency. Finally, ICSO is also the on-call police element, providing routine patrolling of the campus. The college and the Imperial County Sherriff’s Office keep communication channels open to develop plans to provide additional support as needed. (Plan 10.xx EVIDENCE: A RECENT (2013-15) CONTRACT OR MOU WITH SHERIFFS OFFICE)[[154]](#endnote-154)

The Imperial County Fire Department (ICFD) conducts annual fire inspections to confirm that the college remains compliant with fire code requirements. These inspections include (but are not limited to) the condition of the fire alarms, the elevator in building 2700, the range hood in the cafeteria, room capacities, and emergency exit lights. The ICFD is also prepared to respond to the triggering of an on-campus fire alarm or elevator call. (Plan 10.xx ICFD INSPECTION REPORT)[[155]](#endnote-155)

The Imperial County Health Department evaluates the college to certify its compliance with permit conditions encompassing air pollution control, natural gas storage and usage, swimming pool conditions, burn practices, and water and food consumption. (Plan 10.xx: ICHD CERTIFICATION THAT THE COLLEGE IS IN COMPLIANCE)[[156]](#endnote-156)

The Regional Water Board (RWB) performs frequent inspections so that the college is able to maintain its Waste Discharge Requirements Permit (WDR) and National Pollutant Discharge Elimination System (NPDES) permits. Monthly reports provided by RWB reflect weekly testing of the water to confirm that it is safe for consumption. (Plan 10.xx EXAMPLE OF MONTHLY REPORT)[[157]](#endnote-157)

A contract with the R.F. Erection Company and Thyssen Crupp, Inc. provides a means for quarterly inspections of the campus’s wheelchair lift in the gym and the college’s single elevator in building 2700 to ensure that they are in safe and working order.

The college continues to work closely with the American Red Cross to provide emergency evacuation services as needed. Evidence of the exercise of this agreement includes the 2013 Mexicali, Mexico, and 2014 Brawley earthquake evacuations. In both instances, the college extended the use of its gymnasium to provide a safe shelter for the victims of these catastrophic events. (Plan 10.xx IVPRESS COVERAGE?)[[158]](#endnote-158)

Solid hazardous waste management practices continue and adhere to OSHA standards. The college generates hazardous waste in automotive, arts, and science department programs. There are two on-campus hazardous waste coordinators to confirm the handling of waste in accordance with OSHA standards. There is a contract in place with EFR to dispose of the solvents, oily dirt, oil filters, and used oil. The college recycles used oil to advance its efforts towards reducing items that go into landfills, which is one component of the overall recycling program of the college. Asberry Environmental handles the cooking oil. In addition, items in the Science Department that cannot be neutralized are placed in disposal barrels and Alliance Environmental changes the barrels on a recurring basis. On an annual basis, this company goes through the college chemical inventory to identify items for disposal. There is a trail of documentation to confirm that items are being disposed of in the correct manner. (Plan 10.xx Manifest)

The college continues to seek additional partnerships and collaborative opportunities in light of the continued rise of physical threats facing educational institutions. The college, the Superintendent/President, and the Board of Trustees have made it clear that providing a safe learning and working environment is a top priority. (Plan10.xx AUG COLLEGE COUNCIL MINUTES, OCT 21 2015 BOARD MINUTES)

The Integration of Physical Resource Planning and Institutional Planning

The college fully understands that the integration of physical resource planning with institutional planning is vital to confirm effective and efficient use of the college’s resources to assure the integrity and quality of its programs and services, regardless of location or means of delivery.

The college uses the Chancellor’s Office Facility FUSION program to assist in determining the facilities needs of the campus. The college also reports capital and scheduled maintenance to the Chancellor’s Office using FUSION. The Facilities Condition Index (FCI) assists in tracking the condition of facilities and gives the college a cost estimate for building replacement and repair. (Plan 10.xx FUSION Report]. This plan is updated every year to assure that it continues to align with the college’s programmatic needs. Current and projected enrollment data are also entered in the FUSION database annually. (Plan 10.x CITE FUSION PG WHERE THIS IS REFLECTED). This information is essential for developing the annual five-year capital construction plan (Plan 10.xx CITE 5-YEAR PLAN), projecting future required facilities, developing deferred maintenance budgets, and analyzing space utilization. Space inventory enables the college to identify the types of space it needs and/or the amount of surplus space it has available. The analysis of space forms the core for facilities planning.

Every two years, the campus is reevaluated by the state, and the FCI is updated to show all improvements made to the campus. The FCI report provides data to support requests made for scheduled maintenance and hazmat state funding and also to illustrate the effect of building improvements. It also assists the California Community College System Office in advocating for resources. This plan allows for the leveraging of monies for capital projects by applying for state assistance as applicable.

The college has successfully bid against other state community college projects to obtain matched funding from the Chancellor’s Office for capital projects. Plan 10.xxCopies of the bids submitted) This included the 2014 renovation of building 400 that houses a number of classrooms and offices, as well as the Assessment Center. The college presently has two additional projects filed with the Chancellor’s Office for consideration. (Plan 10.xx Copies of the bids submitted) The approval of these projects will expedite the completion of planned renovations to a number of classroom buildings, as well as the future development of the Library Learning Resource Center.

When initiating a remodel or erecting a new facility, the college guarantees the building’s safety by having it appraised by the Division of the State Architect.

*Standard III.B.2. To assure the feasibility and effectiveness of physical resources in supporting institutional programs and services, the institution plans and evaluates its facilities and equipment on a regular basis, taking utilization and other relevant data into account.*

*Standard III.B.2.a. Long-range capital plans support institutional improvement goals and reflect projections of the total cost of ownership of new facilities and equipment.*

**11. 2012 Actionable Improvement Plan**

The College will be improving the process of projecting the cost of ownership when planning for new construction. All new construction and modernization projects will receive a cost-of-ownership budget developed during the planning phase of each project.

**District Response:**

The Feasibility and Effectiveness of Physical Resources

As revealed in the response to Actionable Improvement Plan #10, the college has taken a number of steps to confirm that facilities planning ties to institutional planning. The college also has processes in place to evaluate the present effectiveness of the facilities and equipment in place to confirm that they continue to support the institution’s programs and services.

As an example, the President’s Cabinet holds recurring meetings (quarterly at minimum) to discuss the present feasibility and effectiveness of the location of services on campus. Titled simply “Campus Moves,” the meetings provide an opportunity to present suggestions that may improve the delivery of programmatic services on campus. Following these meetings, the President releases the information discussed to the Facilities Committee, College Council, and the Academic Senate for dissemination to their constituents. (Plan 11.xx CITE PRESIDENTS UPDATE LETTER WHERE CAMPUS MOVES IS DISCUSSED;[[159]](#endnote-159) Plan 11.xx ACADEMIC SENATE MINUTES)[[160]](#endnote-160) This transparent process allows the college to remain informed of any future facilities plans, so that all have an opportunity to provide feedback as to how the plan will support student needs.

As a result of the Campus Moves discussions, in 2015 the Financial Aid staff offices were moved to building1700 and the financial aid laboratory was relocated to the same building in early 2016, which is adjacent to the assessment center. This move created more of a “one-stop shop” for financial aid services to the students, which is an improvement over the former setup that required students to travel across campus to access these services. This effort reduces the time a student or financial aid staff member needs in order to complete a financial aid application.

Yet another example of the college’s ability to analyze its effective use of its physical resources to support student learning and services is the college’s program review process. In its 2013-2014 Service Area Program Review, the Student Health Center identified the need to provide a space in which to provide safety and privacy to the influx of students seeking physical health services. Included in the Findings and Future Directions section of their review, Student Health Center staff identified a need for adequate space to accommodate regular visits, mental health crises, and physical health emergencies. Staff further identified this as an issue that must be taken seriously by the college’s planning and facilities management groups. (Plan 11.xx BOARD MEETING 8/20/14 MINUTES – SHC program review)[[161]](#endnote-161) This request led to the planning and opening of the new Student Health Center in the spring of 2015. (Plan 11.xxAnnouncement of grand opening)[[162]](#endnote-162)

In its 2014-2015 program review, the Maintenance Department identified the need to hire additional grounds maintenance personnel due to the overall increase in square footage resulting from the addition of buildings 3100 and 3200. This request was first prioritized by the Staffing Committee and then by the Budget and Fiscal Planning Committee. The final recommendation submitted to the President’s Cabinet included hiring the additional maintenance personnel by the end of 2015. (Plan 11.xx CITE OCT BOARD MINUTES WHERE THEY APPROVED THE POSITION)[[163]](#endnote-163) Filling this need enabled the college to ensure that the new classrooms and restroom facilities would be in proper working order so that students and faculty could focus on what matters most—learning.

Institutional Improvement Goals and Long-Range Capital Plans

The college has been effective in advancing its institutional improvement goals, some of which have improved access around and on campus with a number of technology and facilities projects.

Over the last few years, technology has become more and more integral to the teaching and learning environment. Because of this increased importance, it is necessary that the Information Technology (IT) Department consider the total cost of ownership (TCO) and refresh cycle of all technology equipment purchased. To that end, the IT Department maintains a multi-year projection spreadsheet that lists all of the technology equipment, the year purchased, the year it needs to be refreshed, and the known maintenance items that occur. This spreadsheet projects TCO and refresh costs ten plus years into the future; however, it concentrates on seven-year periods, as most technological equipment has a life span of seven years or less. These projections are used as a basis for yearly budget requests for equipment refresh and other technology needs that are made through the program review process. (Plan 11.xx: Technology Services Multi-Year 2013-2022 Projection Document)[[164]](#endnote-164)

The college uses the Chancellor’s Office Facility FUSION program data to inform long-range capital projects. This data includes current and projected enrollment data, which is crucial for developing the college’s five-year capital construction plan, as well as deferred maintenance budgets. (Plan 11.xx CITE 5-YR PLAN)[[165]](#endnote-165) Every two years, this FUSION Report is re-evaluated by the state, and the Facilities Condition Index (FCI) is updated to show all improvements made to the campus. (Plan 11.xx CITE FUSION REPORT)[[166]](#endnote-166) The FCI report provides data to support requests made for scheduled maintenance and hazmat state funding, and to illustrate the effect of building improvements. It also assists the California Community College System Office in advocating for capital project resources.

The college ensures that long-range capital projects link to institutional planning through multiple methods. Three of the processes the college uses to develop its capital plans are annual program review, the Strategic Educational Master Plan (SEMP), and the Five-Year Construction Plan. (Plan 11.xx CITE AN APR THAT REFLECTS ADDITIONAL SPACE OR EQUIPT BEING REQUESTED, the SEMP, and the FYCP)[[167]](#endnote-167) The SEMP and Five-Year Construction Plan ensure that long-range capital plans support institutional objectives. The college continues to focus on sustainability and energy conservation, which has been proven to save significant ongoing resources.

The college provides opportunities for all stakeholders to offer input in the development of capital projects. Through the program review process, each department has the opportunity to evaluate its current facilities and equipment needs and to request resources for improvements and/or purchase of new equipment.. As funds become available, facilities improvements or equipment purchases are scheduled according to the President’s Cabinet final prioritization.

The Five-Year Construction Plan represents future capital projects and describes how these and existing projects will be used. This report uses current and projected College enrollment data and the Space Inventory Report 17 from FUSION to plan future growth. (Plan 11.xx CITE SIR 17)[[168]](#endnote-168) The Five-Year Construction Plan is updated annually and presented to the Board of Trustees for approval prior to submission to the State Chancellor’s Office. (Plan 11.xx CITE BOARD MINUTES WHEN THIS WAS LAST SENT TO THE BOARD)[[169]](#endnote-169)

Throughout the year, program opportunities that emerge through grant funding are submitted to President’s Cabinet for evaluation relative to the Strategic Educational Master Plan, Technology Master Plan, and Five-Year Construction Plan to ensure alignment with the college’s goals and priorities and assess impact to facilities. An example of this process culminated with the recent awarding of the $2.29 million five-year Teaching and Learning for Achievement and Success (TALCAS) grant.

The TALCAS grant’s overall goal is to better serve the low-income, under prepared 90% Hispanic student body. The grant will allow the college to open what is being referred to as the Teaching and Learning Center (TALC). (Plan 11.xx: grant narrative;[[170]](#endnote-170) Title 5 Grant 5/4/15 Meeting Notes[[171]](#endnote-171)) The two modular structures that will make up the Teaching and Learning Center will be erected in an area on the campus referred to as “Relo Row.” This site was selected because it has all the needed utilities pre-installed so that it is prepared for future development, allowing for a significant savings in construction costs. The college identified the cost of the modules and the potential for a purchase versus lease option prior to submitting the grant request to prevent or limit impact on the General Fund. (Plan 11.xx: Title 5 Grant 4/20/15 Meeting Notes)[[172]](#endnote-172) Following the life of the grant, the college plans to assume ownership of the two buildings and has projected the cost of ownership includes maintenance and utilities costs based on the planned square footage. The college determined that the maintenance and utilities costs could be absorbed using staff and funding presently allocated.

As noted in the college’s 2013 Comprehensive Self Evaluation, the college’s long-range capital plans support its strategic direction and reflect the total cost of ownership for facilities and equipment. Construction budgets not only address the structural facility but also the equipment necessary to ensure successful implementation of curricula. Recently, the college was able to complete the Career Technical Education (CTE) Building project first introduced in the June 2004 Five-Year Construction Plan that was fully funded by the $20 million local General Obligation Bond (Measure “J”). (Plan 11.xx CITE BOND DETAIL FOR CTE BUILDING)[[173]](#endnote-173) The two state-of-the-art buildings house several programs, including administration of justice, paramedic, emergency medical technician, fire academy, Peace Officer Standards and Training (POST), welding, construction, HVAC, electrical, electrical wiring, renewable energy, and computer science courses. Each CTE program is evaluated bi-annually by a Local Industry Advisory Committee, which is composed of members from each of the disciplines taught. One of the roles of the advisory committees is to make recommendations on equipment and curriculum. (Plan 11.xx ADVISORY MINUTES)[[174]](#endnote-174) All of the CTE building classrooms are “smart” classrooms, with easy access to the Internet. The buildings were built to LEED (Leadership in Energy and Environmental Design) Standards, meaning that the buildings use energy wisely—limit non-renewable energy use and reduce water consumption, all while providing a healthy environment in which to work and study.

Environmental Considerations and Cost Containment

As the college continues to expand its campus, it looks for ways to keep costs low while also respecting the environment. This includes the move away from a stills setup to a filtering setup for its water usage and condensing water towers that will be air-cooled versus water-cooled. All renovations and new construction projects keep water and energy conservation in mind. This includes the installation of variable frequency drives for the potable water distribution system, replacement of older cafeteria equipment, and the installation of LED lighting in 70% of campus facilities and the remaining 30% by the end of year 2016. The primary source of funding for these projects was Proposition 39 funds.

The college building construction and renovation program also works to contain costs. All of the new buildings on campus were built according to LEED Standards. Additionally, all building renovation projects are built to meet LEED certification. This concentration on efficiency has led to a significant reduction in energy costs on campus. This increase in energy efficiency has reduced the college’s annual combined electrical and natural gas usage from an annual average of 1502 BTUs per Gross Square Foot (GSF) per week in fiscal year 2001-2002, to 901 BTUs per GSF per week in fiscal year 2013-2014. This is a 40.04% reduction in energy use. (Plan 11.xx utility bill reduction although square footage has increased)[[175]](#endnote-175) In 2015, the college used deferred maintenance funding to update the campus bathroom facilities with low-flow water fixtures to ensure water conservation. A reduction was also made in its irrigation cycle, allowing the college to reduce its water usage by approximately 33%.

One major project the college is considering, that is both economically and environmentally friendly, is the adoption of a solar energy plan. Introduced to the Board of Trustees at its

October 21, 2015 meeting, Green Light Energy was selected via a Request for Qualifications (RFQ) to present a campus solar-energy plan for consideration. The Board approved Green Light Energy to draft a proposal for final consideration at a future Board meeting prior to the end of 2015-2016. This project is projecting an energy cost savings of approximately 33%. In looking at the various options, the most cost-effective is the solar farm option, which was chosen because it provided the most energy savings. The solar farm is projected to save the college $3 million over the next 20 years, while reducing the carbon foot print of the college. (Plan 11.xx CITE)[[176]](#endnote-176) The maximum energy generation under the solar energy plan is the maximum allowed by the local utility company. These actions taken by the college will assure the ongoing feasibility and effectiveness of physical resources in supporting institutional programs and services.

**Standard III.C. Technology Resources**

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| --- |
| *Standard III.C.2. Technology planning is integrated with institutional planning. The institution systematically assesses the effective use of technology resources and uses the results of evaluation as the basis for improvement.* |

**12. 2012 Actionable Improvement Plan**

By June 2013, the college will develop a plan to assess the effective use of technology on campus by faculty, staff, and students.

**District Response:**

The Technology Planning Committee and Distance Education (DE) Committee established a task force to review data and present findings to each committee. (Plan 12.xx [TPC Minutes](http://www.imperial.edu/index.php?option=com_docman&task=doc_view&gid=6291&Itemid=762))[[177]](#endnote-177) The task force membership consists of members from each committee, along with the Institutional Researcher. The goal of the committee is to semi-annually accumulate, review, and evaluate the collected data to determine the effective use of technology on campus. The task force uses various forms of data collection, such as surveys, site data, focus groups, requests via program review, and review of requested actions placed in the “service-ticket” online system. The recommendations of the task force advance through the participatory governance process. (Plan 12.xx CHECK WITH MICHAEL HEUMANN Re survey about TECH AND FACULTY)[[178]](#endnote-178)

**Standard III.D. Financial Resources**

*Standard III.D.1. The institution relies upon its mission and goals as the foundation for financial planning.*

*Standard III.D.1.a. Financial planning is integrated with and supports all institutional planning.*

**13. 2012 Actionable Improvement Plans**

The successful development and implementation of recommendations from the Fiscal Crisis and Management Assistance Team (FCMAT) will ensure that the college will have sufficient funding to support educational programs that support a smaller student population.

The college has created a Strategic Transition Action Response Team (START) to act as a recommending body to the Board of Trustees and the Superintendent/President, and to facilitate the transition from recommendation to implementation. [(Plan 13.xx START Team First Meeting Notice 10/2/12)](http://accreditation.imperial.edu/docs/2013/Standard%20IIID%20Financial%20Resources/START%20Team%20first%20meeting%20notice%2010-2-12.pdf)[[179]](#endnote-179) [(Plan 13.xx IIID1 START Team Charter)](http://accreditation.imperial.edu/docs/2013/Standard%20IIID%20Financial%20Resources/START%20redesign%20team%20charter.pdf)[[180]](#endnote-180) [(Plan 13.xx START Team Webpage](http://accreditation.imperial.edu/docs/2013/Standard%20IIID%20Financial%20Resources/START%20team%20web%20page.pdf)[[181]](#endnote-181))

**District Response:**

The 2012 FCMAT Report Follow-Up

The ACCJC External Evaluation Team that visited the college in April 2014 acknowledged in its report dated May 6, 2014, that the college “is clearly taking steps towards compliance. It has implemented some of the 72 recommendations from the 2012 FCMAT report.” (Plan 13.xxEvaluation Team Report, 05-06-14)

This outcome was made possible through the efforts of START, which was established as a redesign team to assist in the development of a district-wide strategic vision regarding programs and services that should be offered, redesigned, added, or deleted to sustain the college’s fiscal solvency, following the agreement with FCMAT in March 2012. (Plan 13.xx FCMAT Management Review Report 12/3/12) The committee is comprised of administrators, teaching and non-teaching faculty, classified managers, classified employees, and a student. The role of START is to (1) act as a source of communication regarding the FCMAT report and follow-up actions, (2) act as a conscience for the college as we will have to address the consequences if we fail to act on FCMAT, and (3) act as a recommending body to the Superintendent/President to facilitate transition from recommendation to implementation. (Plan 13.xx START Charter)

START prioritized then merged the 72 FCMAT recommendations into 65 action plans that serve as a blueprint to the college Superintendent/President to address all recommendations (some of the action plans cover more than one recommendation). (Plan 13.xx FCMAT Management Review Report 12/3/12) (Plan 13.xx START Summary Meeting Notes 12/11/12, START Prioritization Table. These action plans identify the party responsible, outline the steps needed to fulfill the recommendation, and provide a projected timeline for full implementation of the recommendation. A tracking tool was developed to monitor the progress of fully addressing the recommendations. (Plan 13.xx START Tracking Tool)

The Superintendent/President has determined that START has completed all action plans necessary to implement the FCMAT recommendations. Some of the detailed action plans will take a few years to address fully, such as achieving a 16.6% reserve over the next ten years. The process that will be followed to ensure that the recommendations continue to be analyzed and addressed is as follows: Each action plan depicts a responsible President’s Cabinet leader responsible for continuously reviewing the action plans, updating them, and discussing them during President’s Cabinet meetings. (Plan 13.xx PRESIDENTS CABINETS NOTES) In addition, the Superintendent/President provides updates to the Board of Trustees during board meetings and/or board retreats. (Plan 13.xx START Team Summary Meeting Notes 09-23-14)

The Integration of Financial Planning and Institutional Planning

The college understands that collaboration is crucial to sustainable program quality improvement, and that financial resource planning must integrate with institutional planning to provide a reasonable expectation of the college’s short-term and long-term financial projections. To that end, the college has established integrated planning processes and a data-mining infrastructure that supports sustainable program review and enrollment management.

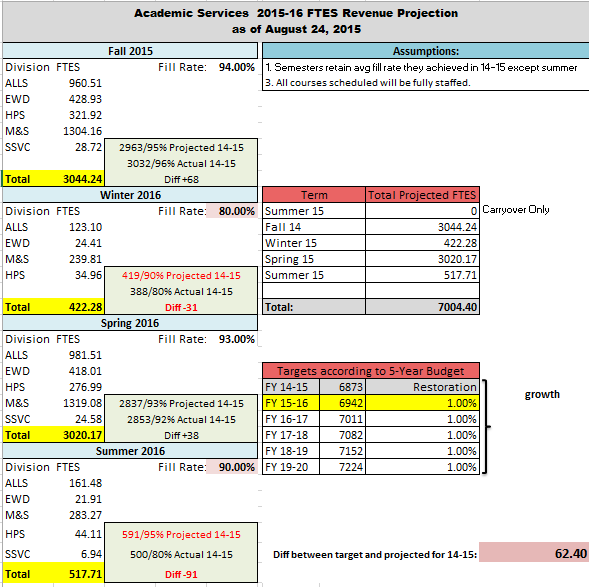
The adoption of the Strategic Planning Online (SPOL) system allowed for the college to integrate program review, student learning outcomes, and planning and budgeting. Substantial time and effort was dedicated to the implementation of SPOL as a means to fuse the college’s processes with the architecture of SPOL so that it accurately reflected the ongoing work of linking institutional planning to resource allocation. Appropriate access roles, ACCJC Standards, institutional goals, student learning outcomes, courses, general ledger and account codes, and budget data were assigned to the applicable modules in SPOL to create a comprehensive look at planning, assessment, and budgeting.

One important aspect of SPOL is its ability, in identifying enhanced costs, to quantify new costs for consideration in the budget. These enhanced budget requests are associated with the appropriate account and general ledger codes prior to preliminary approvals and prioritization by the five resource-planning committees, the Budget and Fiscal Planning Committee, and the President’s Cabinet. Although not all enhanced requests can be funded, this process affords each program the opportunity to review its goals and request funds that would be needed to achieve those goals. This process also illuminates how enhanced budget requests obligate the college to generate new revenue, increase cost efficiencies, and tie the budget to the institutional goals and mission. The complete implementation of SPOL, combined with the college’s Enrollment Management Plan, allows for distribution of resources to support the development, maintenance, and enhancement of the college’s programs and services.

Enrollment Management Planning

The 2012 FCMAT report includes a recommendation that the college ensure that the FTES planning process is “dynamically continued throughout the academic year so the plan can be adjusted for external funding changes and actual enrollment results.” Since this recommendation was made, the availability and use of data in the planning processes at the college has increased exponentially to inform the college’s budget allocation, planning, and decision-making processes. The Academic Services Office and the Business Services Office, in a joint effort, review the FTES revenue projection (as depicted below) on census day, as well as at the end of each term, to determine the college’s standing on its ability to achieve its targeted growth, or whether adjustments to future semester course scheduling and instructional salary accounts are warranted. (Figure 12) This directly addresses FCMAT’s recommendation to “Develop and share a regular schedule of FTES updates and modeling of annual FTES so that there is broad understanding of where the college stands regarding FTES targets, providing time for corrective action if warranted.” (Plan 13.xx FCMAT REPORT)

Figure 12. FTES Revenue Projection Document

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A multi-year budget projection has allowed the college to determine how existing budget transactions affect the college’s overall operating budget, while affording sufficient time to develop and initiate a plan to address any untoward impact. Since the college has chosen to project a conservative 1% growth factor for 2015-2016, it understands that the expense side of the budget will need to be well controlled so that a balanced budget continues to be attainable. Projecting overly optimistic estimates of state economics, coupled with overly aggressive estimates of enrollment, can expose the college to an unhealthy level of risk. Instead, the college has chosen to complete financial forecasting with realistic budget assumptions and a conservative approach to projecting FTES revenue, including growth.

The present forecasting provides the means for the college to express its goals and priorities and to ensure internal consistency. This process has allowed the college to realize not only full restoration, but also 1% growth in fiscal year 2014-2015. With the reinstatement of the winter intersession in 2015, the college is confident that conservative growth will be achieved in both 2015-2016 and 2016-2017, as reflected in the college’s multi-year budget projection.

The college completed a full cycle under the Enrollment Management Plan in 2013-2014, including the evaluation of the effectiveness of the plan to achieve the college’s enrollment and FTES targets with the development of the Enrollment Management Rubric. (Plan 13.xx Administrative Procedure AP 3260) The Enrollment Management Rubric was distributed to all members of the Enrollment Management Task Force in May of 2014 to ensure broad participation. The results of this evaluation were used to update the draft of the Enrollment Management Plan, which was sent through the participatory governance process during the latter part of 2014 as an official Administrative Procedure. These evaluations provide documentation that the Enrollment Management Plan has been successfully implemented and that it assures systematic review of the planning and decision-making processes. (Plan 13.xx Enrollment Management Task Force Minutes \_\_\_-\_\_\_-\_\_)

The college continues to improve its enrollment management processes by ensuring that the college’s mission and goals are the foundation for financial planning through this comprehensive evaluation process.

*Standard III.D.1.b. Institutional planning reflects realistic assessment of financial resource availability, development of financial resources, partnerships, and expenditure requirements.*

**14. 2012 Actionable Improvement Plan**

The Budget and Fiscal Planning Committee has begun discussion regarding the appropriate reserve level based on the specific needs of the college. It is anticipated that the committee will make a recommendation on the minimum reserve amount by June 2013.

**District Response:**

Prudent Minimum Reserve Level

As committed to in the 2013 Comprehensive Report, in June 2013 the Budget and Fiscal Planning Committee made a recommendation to the President’s Cabinet, College Council, Academic Senate, and finally to the Board of Trustees as a formal resolution to establish a goal of reaching a 16.6% reserve level within a period of 10 years. (Plan 14.xx Board Minutes, Resolution 15732 \_\_-\_\_-13)[[182]](#endnote-182) The Board approved the resolution unanimously. This recommendation stemmed from the determination that the reserve should contain enough funding to sustain the college’s operations for a period of two months, to address unexpected challenges that may come up with daily operations, as well as to safeguard the college from future state budget shortfalls. The college continues to see an increase in its reserve levels since the adoption of this resolution. (Figure 13)

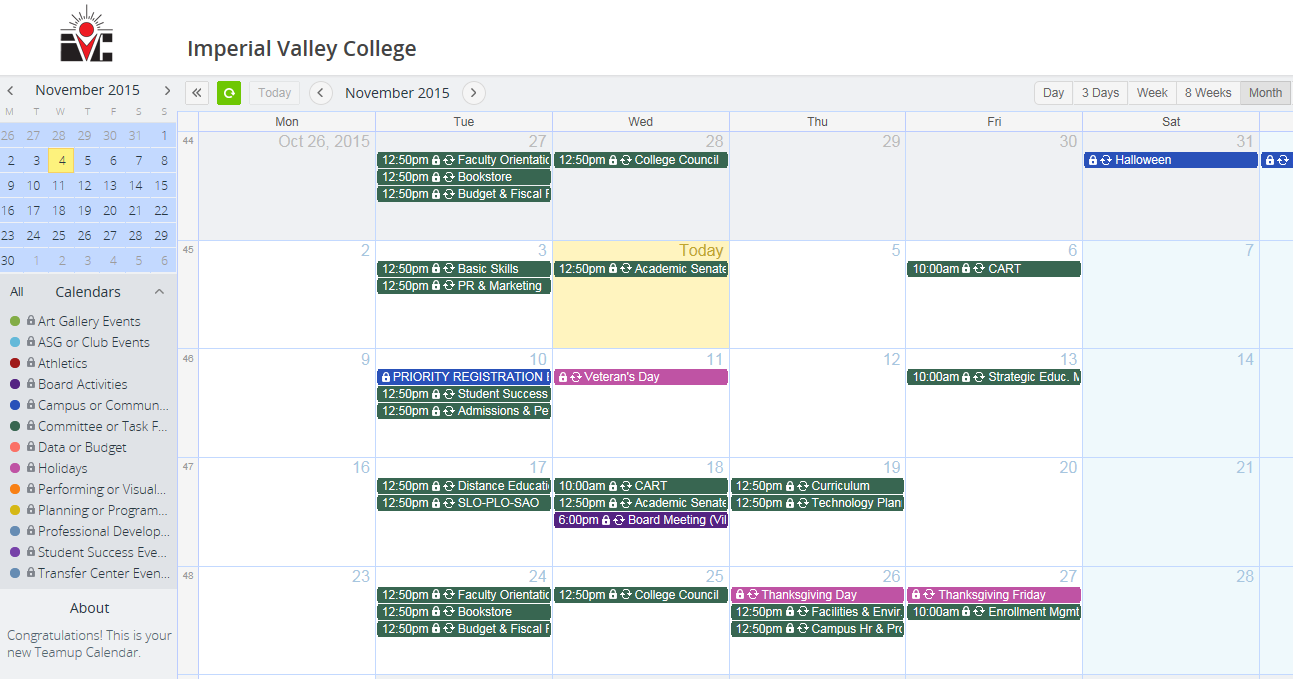
Figure 13. Reserve Budget as a Percentage of Total Expenditures UPDATE !!!

|  |  |  |  |
| --- | --- | --- | --- |
| **Fiscal Year** | **Reserve** | **Percentage** | **Total Expenditures** |
| 12-13 | $2,335,864 | 7% | $33,370,040 |
| 13-14 | $2,473,273 | 7% | $35,551,000 |
| 14-15 | $3,116,178 | 8.5% | $36,650,359 |

The Planning and Budget Calendar

The 2012 FCMAT report included a recommendation to “Implement a budget calendar that outlines the process, actions, and dates that personnel district-wide should know.” (Plan 14.xx CITE)[[183]](#endnote-183) To address this recommendation, during the 2014-2015 Academic Year, the college established a dynamic online planning and budget calendar using the TeamUp software (<http://teamup.com/ksc1bb71d5d0db3b1f/>). TeamUp is a shared calendar application for groups and projects. The online comprehensive calendar has made it easier for programs to view the planning calendar to be aware of due dates and meeting schedules, allowing for more effective processes and adherence to the planning cycle calendar. The calendar can be accessed on the official College website home page ([www.imperial.edu](http://www.imperial.edu)). (Figure 14)

Figure 14. Image of the Dynamic Online Planning and Budget Calendar

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Institutional Planning and Partnerships

As outlined in Resolution 16601, on October 21, 2015, the Board approved a Memorandum of Understanding between Imperial Valley College and the Imperial County Office of Education (ICOE) regarding the Adult Education Block Grant Governance Board., Under the MOU, the college has partnered with ICOE to provide much needed adult education services to Imperial County residents, under the direction dictated in the Adult Education Block Grant. (Plan 14.xx BOARD MINUTES \_\_-\_\_-\_\_)[[184]](#endnote-184) Providing these services will not only pave the way to increased access to adult education in the county, it also provides the college with another alternative for seeking enrollment (FTES) growth. The college looks forward to expanding this partnership in the near future.

*Standard III.D.2.e. The institution’s internal control systems are evaluated and assessed for validity and effectiveness and the results of this assessment are used for improvement.*

**15. 2012 Actionable Improvement Plans**

The college will continue to implement the recommendations of the FCMAT Management Review.

**District Response:**

As reported in the response to Actionable Improvement Plan #13, the college has made significant progress to implement the action plans developed by START to address all of the FCMAT recommendations.

Internal Control Evaluation

The college budget process is reviewed on an ongoing basis by the Budget and Fiscal Planning Committee (BFPC) so that improvements can be identified and implemented. At the

September 30, 2015 meeting, the BFPC identified the need to improve the budget timeline and ensure data integrity. This included the need to ensure that the sequences of the processes that support budget development are completed in a timely manner. (Plan 14.xx BFPC Minutes 09-30-15)[[185]](#endnote-185)

In addition, the Continuous Accreditation Readiness Team (CART) and Strategic Educational Master Planning Committee (SEMPC) review the program review and planning process, among other processes, for impact on the college budget and other processes of the college. As an example, representatives from these committees, BFPC, and representatives from academic services and student services, met on November 9, 2015, to review the timelines for key processes, including program review, curriculum, scheduling, and budget development. This meeting was held in response to the discovery that the curriculum process and schedule development process did not align with the program review and budget development process. (Plan 15.xx Updated Process Timelines Notes)[[186]](#endnote-186) As part of the review, the timelines for program review and planning, budget development, curriculum and scheduling were revised to ensure that the processes were in alignment. For example, a variance analysis will be conducted earlier in the budget process so the BFPC can confirm the validity of the numbers in the preliminary budget and prevent material errors from being included in the final draft of the budget. (Plan 15.xx Process Timelines Chart)[[187]](#endnote-187)

As another example, it was determined that a delay in the development of the 2016-2017 academic calendar negatively impacted the schedule development process, which influenced the ability to compose data-driven revenue projections for that year. Identifying this impact allowed the college to take action to address this delay immediately so that the process could move forward.

As recommended by FCMAT in its 2012 report, the college took action to implement strict controls to limit expenditure budget transfers that decrease the ending fund balance. These internal controls included additional restrictions on line-item budget transfers and Purchase Order requests. (Plan 15.xx BFPC Minutes \_\_-\_\_-\_\_; Plan 15.xx Board Minutes showing approval of department budget increases)

By reviewing the annual budget process, as well as other processes that impact the budget, on an ongoing basis, the college has a means of identifying improvements so that they can be assessed and implemented in a timely manner.

*Standard III.D.3. The institution systematically assesses the effective use of financial resources and uses the results of the evaluation as the basis for improvement.*

*Standard III.D.3.a. The institution has sufficient cash flow and reserves to maintain stability, strategies for appropriate risk management, and realistic plans to meet financial emergencies and unforeseen occurrences*

**16. 2012 Actionable Improvement Plans**

The college is working with FCMAT (Fiscal Crisis and Management Assistance Team) on a fiscal review that will be presented to the Board of Trustees in December 2012. The college is committed to implementing the recommendations of the study in order to improve the effectiveness and efficiency of the college and to fulfill its mission and goals.

**District Response:**

As mentioned earlier in the report, the FCMAT provided the college with a total of 72 recommendations. (Plan 13.xx FCMAT Management Review Report 12/3/12)[[188]](#endnote-188) START prioritized these recommendations and developed 65 action plans that serve as a blueprint to the college Superintendent/President to address the 72 recommendations. (Plan 13.xx START Summary Meeting Notes 12/11/12, START Prioritization Table)[[189]](#endnote-189) The ACCJC External Evaluation Team that visited the college in April 2014 acknowledged in its report dated May 6, 2014, that the college “is clearly taking steps towards compliance. It has implemented some of the 72 recommendations from the 2012 FCMAT report.” (Plan 13.xx Evaluation Team Report, 05-06-14)[[190]](#endnote-190)

Cash Flow and Reserves

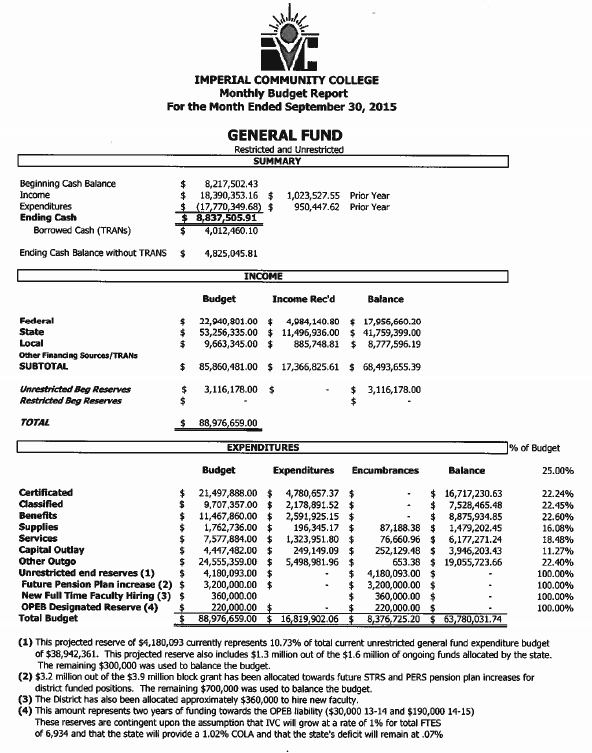
Fiscally, the college is in a stable position and has adequate cash flow to meet its obligations. The recent health of the state budget has allowed the state to fully fund deferred revenue.

The college did not use reserves to balance the ongoing operational budget in Fiscal Year 2014-2015. Ongoing revenues were used to meet ongoing expenditures as required. (Plan 16.xx Board Minutes?)[[191]](#endnote-191) The college’s budget reserves continue to increase at a steady pace. In recent years, additional restrictions have been placed on line-item budget transfers and purchase order requests, as recommended in the 2012 FCMAT report. (Plan 15.xx BFPC Minutes \_\_-\_\_-\_) [[192]](#endnote-192)These processes have assisted the college in increasing its reserve level, a goal approved by the Board in Board Resolution 15732, during the June 16, 2013 Board of Trustees meeting. (Plan 16.xx Board Minutes 06-16-13)[[193]](#endnote-193)

The college projects that achieving the longer term goal of a 16.6% reserve level will take several years, but by continuing its conservative approach to budgeting, a 16.6% reserve (two months of operational costs) can be reached.

In Fiscal Year 2015-2016, the college received one-time revenue of $3.9 million. One of the recommendations made by FCMAT in its 2012 report was to “Ensure any additional revenue or savings are first used to improve its fund balance.” (Plan 16.xx CITE)[[194]](#endnote-194) The college and its Board of Trustees acknowledged this recommendation when the Board took action to approve that $3.2 million of this additional revenue be placed in the reserves. These funds are earmarked to address the cost increases in PERS and STRS anticipated over the next three to four years, as reflected in the college’s Monthly Budget Report for the Month Ended September 30, 2015, depicted below. (Figure 15) While the college projects that this $3.2 million will allow the college to offset the upcoming PERS and STRS increases, this funding will be expended before the end of Fiscal Year 2018-2019. While the state is not committing to providing additional revenue beyond this one-time money to address the projected increases in PERS and STRS, and this designation does not fully fund the increases beyond this point, it does give the college adequate time to develop and implement a long-term plan to address this ongoing volatile cost. (Plan 16.xx BFPC Minutes, 08-26-15)[[195]](#endnote-195)

Figure 15. Monthly Budget Report, September 30, 2015

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Risk Management

The college has a number of risk management plans in place to ensure that the college is in a position to address financial emergencies and unforeseen occurrences. In addition to building up the college’s Operational Reserves, these plans include a $5,000,000 Statutory Workers Compensation benefit covering all employees and volunteers, an optional excess liability coverage plan totaling $25,000,000 ultimate net loss for each occurrence covering the college’s infrastructure, and a student health insurance plan that provides basic coverage to include general health screenings, immunizations, and physicals. (Plan 16.xx Student Health Services Brochure [www.imperial.edu/studenthe.pdf](http://www.imperial.edu/studenthe.pdf))[[196]](#endnote-196)

To further manage risk, the college remains conservative with all of its investment of idle cash. The college invests its funds in a Local Agency Investment Fund (LAIF) operated by Imperial County. This fund is extremely low risk and allows the college to maintain liquidity in the event that funds are needed to address emergency measures. (Plan 16.xx Local Agency Investment Fund, <https://www.icoe.org/business/fiscal-advisory-services>)[[197]](#endnote-197)

*Standard III.D.3.h. The institution regularly evaluates its financial management processes, and the results of the evaluation are used to improve internal control structures.*

**17. 2012 Actionable Improvement Plan**

The college has established a Strategic Transition Action Response Team (START), which acts as a source for communication regarding the forthcoming FCMAT report and the follow-up actions necessary. START will also prioritize and make recommendations to the president on the implementation of the FCMAT recommendations Additional reviews will be completed by the college’s shared governance committees (Academic Senate, College Council, Budget and Fiscal Planning Committee).

**District Response:**

In response to FCMAT’s recommendations and the action plans developed by START, and to comply with the Standard, the college continues to evaluate its financial management processes and improve its internal control structures.

Effective Evaluation and Improvement Practices

In its 2012 comprehensive report, FCMAT recommended that the college aggressively reduce expenditures by implementing ongoing budget adjustments to avoid insolvency. One suggested adjustment was to decrease the amount of reassigned time provided to full-time faculty members. In the 2013-2015 negotiations, the college and full-time faculty union (CTA) agreed to reduce the amount of reassigned time for some of its classifications and to reclassify others as stipend positions. (Plan 17.xx TA with CTA)[[198]](#endnote-198) (Figures 16 and 17) These positions were reviewed again during negotiations for the 2015-2017 collective bargaining agreement.

Figure 16. Year to Year Comparison of Faculty Reassigned (Release) Time

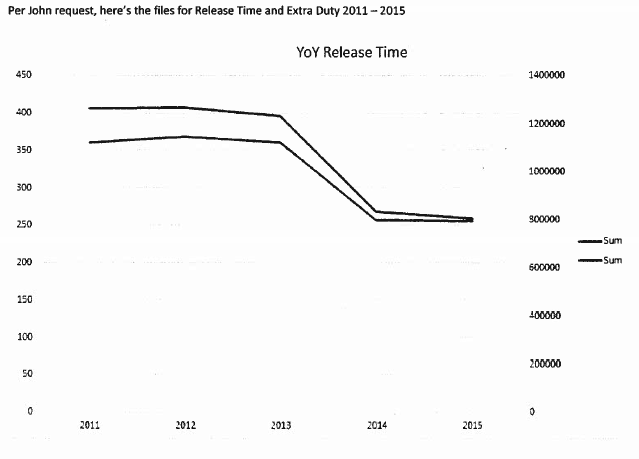
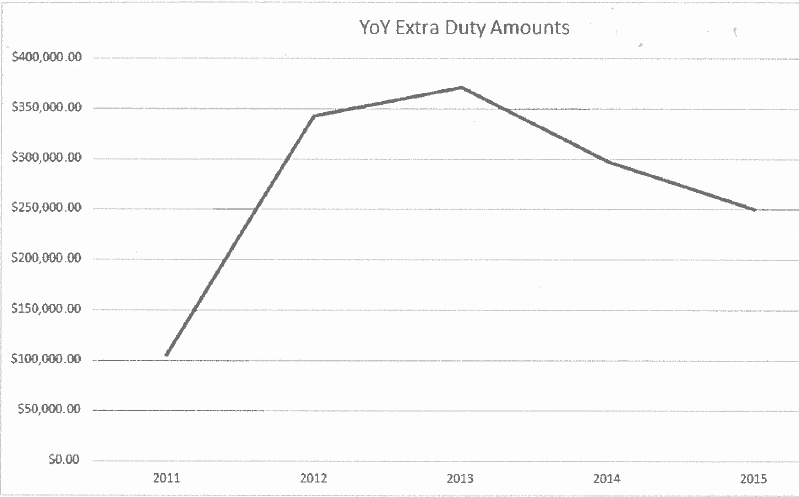


Figure 17. Year-to-Year Comparison of Faculty Extra Duty Costs



These are only a few of the aggressive reductions in expenditures the college has made to solidify its financial health.

In order to ensure the accuracy of the data used in both the college’s revenue and expenditure projections, the college formed the Data Reliability Committee. The committee created a venue for a systematic evaluation of the college’s data integrity to ensure that its data-driven decision making process was based on the correct and most up-to-date data available. (Plan 17.xx CART AGENDA 08-23-12)[[199]](#endnote-199) The Data Reliability Committee, along with the departments that “own” the data, regularly review and evaluate the data within their areas of responsibility. (Plan 17.xx Data Reliability Committee meeting minutes 09-13-12)[[200]](#endnote-200) Where are most current DRC minutes?

The process of evaluating the effectiveness of budget enhancements is handled through the program review process. Due to the recent financial crisis with the state, the college has been in a position to do no more than maintain the current operating budget. Fiscal Year 2015-2016 has been the first year that enhancements were brought into the budget without negatively impacting reserves. The effectiveness of these approved enhancements will be captured in the succeeding program review cycle.

Internal Control Structures

As recommended by FCMAT, the college has developed clear, consistent budget information to better present and inform those responsible for making key decisions. This action is evidenced by the Budget and Fiscal Planning Committee’s annual adoption of the Budget Guidelines and Budget Principles Guidelines and Priorities. (Plan 17.xx Adoption in SEPT and OCT BFP Minutes)[[201]](#endnote-201) These guidelines identify who is responsible for completing crucial budget components and when they must be completed to adhere to the dynamic planning and budget calendar. (Plan 17.xx 2015-2016 Budget Guidelines and Budget Principles Guidelines and Priorities)[[202]](#endnote-202)

Additionally, financial internal controls are evaluated annually through the audit process. The audit process allows for an assessment of the college’s internal control over financial reporting and compliance with requirements that could have a direct and material effect on its major federal programs. OMB circular A-133 requires that an annual audit of the financial statements be performed in accordance with government auditing standards. (Plan 17.xx ICCD Audit Report 06-30-14)[[203]](#endnote-203) Any deficiency is noted through a management letter comment. The college has not received a management letter comment in several years.

*Standard III.D.4.**Financial resource planning is integrated with institutional planning. The institution systematically assesses the effective use of financial resources and uses the results of the evaluation as the basis for improvement of the institution.*

**18. 2012 Actionable Improvement Plan**

The Strategic Transition Action Response Team (START) has been formed to act as a recommending body to the president and to the Board of Trustees to prioritize and implement the recommendations of the Fiscal Crisis and Management Assessment Team report due in December 2012. The team is composed of Executive Council members as well as representatives of administration, faculty, and classified staff.

**District Response:**

START developed and submitted action plans, addressing the FCMAT recommendations, to the Superintendent/President. A President’s Cabinet leader is responsible for continuously reviewing the action plans and discussing updates during President’s Cabinet meetings. (Plan 13.xx PRESIDENTS CABINETS NOTES)[[204]](#endnote-204) In addition, the Superintendent/President provides updates to the Board of Trustees during board meetings and/or board retreats. (Plan 13.xx START Team Summary Meeting Notes 09-23-14)[[205]](#endnote-205) This process was put in place to ensure that the recommendations continue to be analyzed and addressed.

Improvements included a transition from a paper-based program review to the web-based planning tool Strategic Planning Online (SPOL). The Academic Program Review (APR) and Service Area Program Review (SAPR) templates housed in the program review handbook guide faculty leaders into writing goals and objectives that both fit the SMART model and align with the architecture and terminology of SPOL and with specific accountability provisions. (See also 2013 Recommendation 1 and 2012 Actionable Improvement Plan 13.) (Plan 18.xx Program Review Handbook)[[206]](#endnote-206)

Department leads assign responsibility and accountability to the implementation of each future program goal and objective in SPOL. The department lead identifies how the program goals and budget requests contribute to improved work efficiency, reduced costs, or improved student success and link to institutional goals. Program goals with additional funding requests are linked to the appropriate resource-planning committee (Facilities, Marketing, Technology, Professional Development, Staffing), which prioritizes the enhanced requests according to criteria developed by each committee during the program review process. (See also 2013 Recommendation 1 and 2012 Actionable Improvement Plan #13.)

Once the resource-planning committees have completed the prioritization process, their reports are forwarded to the college’s Budget and Fiscal Planning Committee (BFPC). The BFPC reviews each committee’s prioritization and compiles an overall prioritization for all resource areas. The BFPC’s prioritized list is then forwarded on to the President’s Cabinet, where final decisions are made as to which requests are to be included in the preliminary budget. The 2015-2016 program review process resulted in the funding of the top four prioritized budget enhancement requests. A chart has been developed to show the status of the prioritized lists and the action taken by the President’s Cabinet. This chart is sent to the department leads, ensuring that all programs have feedback on the status of their resource requests. (Plan 18.xx Efrain’s email to departments with status of budget requests)[[207]](#endnote-207)

The college completed a full budget evaluation for the 2015-2016 budget using SPOL and the program review and planning process. This model proved useful as it allowed all programs to submit budget requests based on specific needs for student success. The state’s financial crisis had put the college in an unfortunate position to do no more than maintain the current operating budget in recent years. Fiscal Year 2015-2016 is the first year that enhancements were brought into the budget without negatively impacting reserves. (Plan 18.xx EVIDENCE???)[[208]](#endnote-208) Although continued funding limitations resulted in the denial of a majority of requests, the transparent process allowed for collegial discussions and decisions.

**UPDATE ON SUBSTANTIVE CHANGE IN PROGRESS, PENDING, OR PLANNED**

Imperial Valley College reported in its 2015 Annual Report to the Accrediting Commission for Community and Junior Colleges (ACCJ) that it anticipated the following changes. (UP 1.01 2015 Annual Report)[[209]](#endnote-209)

**Change in Mission, Objectives, Scope, or Name of the Institution**

During the development of the Strategic Educational Master Plan, a task force comprised of SEMPC and CART members, including administrators and faculty, reviewed the college’s vision, mission, and values statements. While changes were made to the vision and values statements, the college Mission remain unchanged. Consequently, a substantive change proposal will not be submitted.

**Change in the Nature of the Constituency Served and Intended Student Population**

During Academic Year 2014-2015, the college signed a Memorandum of Understanding with the Imperial County Sheriff’s Office and piloted an inmate education program, “Inside/Out College Program.” The Inside/Out College Program was designed to provide higher educational opportunities for ‘inside’ (incarcerated) and ‘outside’ (campus) students and to explore critical sociological issues through individual and group activities, assignments, and projects. The program was modelled after The Inside-Out Prison Exchange Program developed and designed by Lori Pompa of Temple University in 1997 to bring college students and incarcerated individuals together as peers in a classroom setting that emphasizes dialogue and critical thinking. By the end of the pilot year, the National Association of Counties (NACo) granted the college the 2015 Achievement Award for its innovative program.

The success of the Inside/Out College Program led to discussions with administrators from the two local state prisons. The college is in the process of preparing a substantive change proposal to offer classes at the Centinela and Calipatria state prisons. The proposal will be submitted to the Commission for review by the Substantive Change Committee in spring 2016.

**Change in the Location or Geographic Area Served at which Students were able to Complete at least 50% of an Educational Program**

The completion of two new CTE buildings on the main college campus has enabled the college to offer most of the Fire Technology Program courses at the main campus. As a result, the college no longer offers 50% or more of a program, certificate, or degree at instruction sites other than the home campus. This information was provided in the 2015 Annual Report for inclusion in the institutional file that ACCJC maintains for Imperial Valley College.

**Change in Courses or Programs or their Mode of Delivery that Represents a Significant Departure from Current Practice**

Addition of a Program or Courses that Represents a Significant Departure from an Institution’s Current Programs or Curriculum

In March 2015, the college informed ACCJC of the proposed addition of a new CTE certificate program, Diesel Farm Machinery and Heavy Equipment Certificate. The college’s Substantive Change Proposal is completed and will be submitted to the Commission in spring 2016.

In addition, while not considered a substantive change, the college deleted or suspended the following programs:

* 1. Disability Services Technician A.A. and Certificate
  2. Journalism A.S.
  3. Legal Assistant A.A and Certificate (suspended effective 2015-2016)
  4. Communication Arts A.A. (replaced by Communication Studies AA-T)
  5. Human Relations A.A. and Certificate (suspended effective 2014-2015)
  6. Business Financial Services A.S. and Certificate
  7. Business Marketing A.S. and Certificate
  8. Court Services Specialist Certificate

Addition of Courses that Constitute 50% or More of the Units in a Program Offered through a Mode of Distance or Electronic Delivery, or Correspondence Education

The college anticipates submitting a Substantive Change Proposal in spring 2016 to expand its distance education program to include the following programs:

1. Administration of Justice for Transfer

2. Communication Studies for Transfer

3. Correctional Science A.S. Degree

4. Elementary Teacher Education for Transfer

5. English for Transfer

6. History for Transfer

7. Political Science for Transfer

8. Psychology for Transfer

9. Spanish for Transfer

**LIST OF EVIDENCE DOCUMENTS**

1. RP 1.01 College Council Minutes, \_\_\_/\_\_\_/16 [↑](#endnote-ref-1)
2. RP 1.02 Academic Senate Minutes, \_\_/\_\_/16 [↑](#endnote-ref-2)
3. RP 1.03 Board Minutes, \_\_/\_\_/16 [↑](#endnote-ref-3)
4. 13 [REC.1.01 ACCJC Report of External Evaluation Team 5-6-14](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.11%20External%20Evaluation%20Team%20Report%205-6-14.pdf) [↑](#endnote-ref-4)
5. 13 [REC.1.02 2013-2014 Academic Program Review Template](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.12%202013-2014%20Academic%20Program%20Review%20Template.pdf) [↑](#endnote-ref-5)
6. 13 [REC.1.03 2014-2015 Academic Program Review Template](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.13%202014-2015%20Academic%20%20Program%20Review%20Template.pdf) [↑](#endnote-ref-6)
7. 13 [REC.1.04 2014-2015 Service Area Program Review Template](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.14%202014-2015%20Service%20Area%20Program%20Review%20Template.pdf) [↑](#endnote-ref-7)
8. 13 Rec. 1.05 Processes Impacted by 2014 Accreditation Standards [↑](#endnote-ref-8)
9. 13 [REC.1.06 Educational Master Planning Committee Minutes 10-10-14](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.16%20Educational%20Master%20Planning%20Committee%20Minutes%2010-10-14.pdf) [↑](#endnote-ref-9)
10. 13 [REC.1.07 Resource Planning Committees](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.17%20Resource%20Committees%20Reports.pdf) [↑](#endnote-ref-10)
11. 13 [REC.1.08 Budget & Fiscal Planning Minutes 6-9-14](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.18%20Budget%20&%20Fiscal%20Planning%20Minutes%206-9-14.pdf) [↑](#endnote-ref-11)
12. 13 [REC.1.09 Resource Allocation Summary](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.19%20Resource%20Allocation%20Summary.pdf) [↑](#endnote-ref-12)
13. 13 Rec. 2.xx Resource Allocation Summary [↑](#endnote-ref-13)
14. 13 Rec. 2.xx SEMPC Minutes \_\_-\_\_-\_\_ [↑](#endnote-ref-14)
15. 13 Rec. 2.xx SEMPC Minutes, \_\_-\_\_-\_\_ [↑](#endnote-ref-15)
16. 13 Rec. 2.xx Institutional Effectiveness Report [↑](#endnote-ref-16)
17. 13 Rec. 2.xx SPOL planning reports [↑](#endnote-ref-17)
18. 13 Rec. 2.xx Survey [↑](#endnote-ref-18)
19. 13 Rec. 2.xx Survey [↑](#endnote-ref-19)
20. 13 Rec. 2.xx SEMP Progress Report [↑](#endnote-ref-20)
21. 13 Rec. 2.xx Board Minutes \_\_-\_\_-\_\_ [↑](#endnote-ref-21)
22. 13 Rec. 2.xx Integrated Planning and Prioritization Model [↑](#endnote-ref-22)
23. 13 Rec. 2.xx Strategic Educational Master Plan 2015-2021 [↑](#endnote-ref-23)
24. 13 Rec. 2.xx Academic Senate Minutes \_\_\_\_\_\_\_\_\_\_\_; College Council Minutes \_\_\_\_\_\_\_\_\_\_\_\_ [↑](#endnote-ref-24)
25. 13. Rec. 2.xx Board Minutes 05-20-15 [↑](#endnote-ref-25)
26. 13 Rec. 3.01 Academic Senate Minutes 09-03-14 [↑](#endnote-ref-26)
27. 13 Rec. 3.02 College Council Minutes 09-08-14 [↑](#endnote-ref-27)
28. 13 Rec. 3.03 SPOL Training Schedule [↑](#endnote-ref-28)
29. 13 Rec. 3.04 SPOL Assessment Basics – Measures and Rubrics [↑](#endnote-ref-29)
30. 13 Rec 3.05 SPOL Assessment Basics – Programs and Outcomes [↑](#endnote-ref-30)
31. 13 Rec 3.06 SPOL Assessment Data Quick Step Guide [↑](#endnote-ref-31)
32. 13 Rec. 3.07 SLO Assessment Template [↑](#endnote-ref-32)
33. 13 Rec. 3.08 PLO Assessment Template [↑](#endnote-ref-33)
34. 13 Rec. 3.09 PLO Training and Attendance [↑](#endnote-ref-34)
35. 13 Rec. 3.10 PLO Workshop 01-15-15 [↑](#endnote-ref-35)
36. 13 Rec. 3.11 SLO and PLO Assessment Workshop 08-14-15 [↑](#endnote-ref-36)
37. 13 Rec. 3.12 Focus Group Moderator Instructions [↑](#endnote-ref-37)
38. 13 Rec. 3.13 Focus Group Activity 1 [↑](#endnote-ref-38)
39. 13 Rec. 3.14 Focus Group Activity 2 [↑](#endnote-ref-39)
40. 13 Rec. 3.15 Focus Group Activity 3 [↑](#endnote-ref-40)
41. 13 Rec. 3.16 Focus Group Activity 3B [↑](#endnote-ref-41)
42. 13 Rec. 3.17 Focus Group Participants [↑](#endnote-ref-42)
43. 13 Rec. 3.18 SLO Committee Minutes 10-20-15 [↑](#endnote-ref-43)
44. 13 Rec. 3.19 SLO Committee Agenda 11-17-15 [↑](#endnote-ref-44)
45. 13 Rec. 4.01 PLO Assessment Template [↑](#endnote-ref-45)
46. 13 Rec. 4.02 Focus Group Activity 3 [↑](#endnote-ref-46)
47. 13 Rec. 4.03 Focus Group Activity 3B [↑](#endnote-ref-47)
48. 13 Rec. 5.01 Syllabus Template – Information Literacy [↑](#endnote-ref-48)
49. 13 Rec. 5.02 DE Committee Minutes 04-09-2014 [↑](#endnote-ref-49)
50. 13 Rec. 5.03 Professional Development Plan 11-20-14 [↑](#endnote-ref-50)
51. 13 Rec. 5.04 2015 Campus Hour Survey Summary [↑](#endnote-ref-51)
52. 13 Rec. 6.01 Information Literacy Workshop Statistics [↑](#endnote-ref-52)
53. 13 Rec. 6.02 Learning Services Lab Usage Summary [↑](#endnote-ref-53)
54. 13 Rec. 6.03 Tutor Appointments [↑](#endnote-ref-54)
55. 13 Rec. 6.04 minutes of Library and Learning Services departments for Fall 2015 semester showing collection and analysis of data [↑](#endnote-ref-55)
56. 13 Rec. 7.01 CTA Contract 2013-2015 [↑](#endnote-ref-56)
57. 13 Rec. 7.02 PTFA Contract 2013-2015 [↑](#endnote-ref-57)
58. 13 Rec. 7.03 Faculty Evaluation Forms [↑](#endnote-ref-58)
59. 13 Rec. 7.04 Administrator Evaluation Form [↑](#endnote-ref-59)
60. 13 Rec. 8.xx BFPC Minutes Oct Meeting [↑](#endnote-ref-60)
61. 13 Rec. 8.xxBFPC Minutes 12-08-15 [↑](#endnote-ref-61)
62. Student Success and Equity Committee Minutes 11-xx-15, 12-08-15 [↑](#endnote-ref-62)
63. 13 Rec. 8.xx Questionnaire [↑](#endnote-ref-63)
64. 13 Rec. 8.xx BFPC Minutes12-08-15 [↑](#endnote-ref-64)
65. 13 Rec. 8.xx Student Success and Equity Committee Minutes 11-xx-15, 12-08-15 [↑](#endnote-ref-65)
66. 13 Rec. 8.xx BFPC Minutes xx-xx-xx??? [↑](#endnote-ref-66)
67. 13 Rec. 8.xx BFPC Minutes xx-xx-xx??? [↑](#endnote-ref-67)
68. 13 Rec. 8.xx Board Minutes 06-19-13 [↑](#endnote-ref-68)
69. 13 Rec. 8.xx Most recent 311 Report submitted to state [↑](#endnote-ref-69)
70. 13 Rec. 8.xx BFPC Minutes 03-26-15 [↑](#endnote-ref-70)
71. 13 Rec. 8.xx Board Minutes xx-xx-15 [↑](#endnote-ref-71)
72. 13 Rec. 8.xx Board Minutes xx-xx-15 [↑](#endnote-ref-72)
73. 07 Rec. 1.01 Reaffirmation Letter from ACCJC 06-29-15 [↑](#endnote-ref-73)
74. 07 Rec. 2.01 SLO Committee Minutes 11-13-13 [↑](#endnote-ref-74)
75. 07 Rec. 2.02 SLO Assessment Template [↑](#endnote-ref-75)
76. 07 Rec. 2.03 PLO Assessment Template [↑](#endnote-ref-76)
77. 07 Rec. 2.04 Objective and Assessment Outcome Detail [↑](#endnote-ref-77)
78. 07 Rec. 5.01 Technology Planning Committee Minutes 03-19-15 [↑](#endnote-ref-78)
79. 07 Rec. 5.02 Technology Planning Committee Minutes 11-13-14 [↑](#endnote-ref-79)
80. [REC.1.03 Sample Committee Self-Evaluation](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.03%20Sample%20Committee%20Self%20Evaluation%20Form.pdf) [↑](#endnote-ref-80)
81. 07 Rec. 6.02 College Council Minutes showing changes to committees [↑](#endnote-ref-81)
82. 07 Rec. 6.03 CART Bylaws [↑](#endnote-ref-82)
83. 07 6.04 CART Minutes 11-4-14 [↑](#endnote-ref-83)
84. 07 Rec. 6.05 EMPC Bylaws [↑](#endnote-ref-84)
85. 07 Rec. 6.06 EMPC Minutes 12-5-14 [REC.1.04 CART Bylaws; CART Minutes 11-4-14](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.04%20Revised%20CART%20Bylaws%3b%20Cart%20Minutes%20dated%2011-4-14.pdf) [↑](#endnote-ref-85)
86. [REC.1.06 Summary Evaluation of Academic Senate Sub-Committee Self Evaluations](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.06%20Summary%20Evaluation%20for%20Committees.pdf) [↑](#endnote-ref-86)
87. 07 Rec. 6.08 Academic Senate Minutes 08-20-14, 09-3-14 [↑](#endnote-ref-87)
88. 07 Rec. 6.09 College Council Minutes 09-22-14[REC.1.07 Academic Senate Minutes 8-20-14, 9-3-14; College Council Minutes 9-22-14](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.07%20Academic%20Senate%20Minutes%208-20-14,%209-3-14%3b%20College%20Council%20Minutes%209-22-14.pdf) [↑](#endnote-ref-88)
89. 07 Rec. 6.10 Selection form and committee structure chart [↑](#endnote-ref-89)
90. [REC.1.08 Academic Senate Minutes 9-17-14; College Council Minutes 9-8-14](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.08%20Academic%20Senate%20Minutes%209-17-14%3b%20College%20Council%20Minutes%209-8-14.pdf) [↑](#endnote-ref-90)
91. 07 Rec. 6.xx Academic Senate and College Council Minutes re Committee Dates for Campus Hour [↑](#endnote-ref-91)
92. [REC.1.09 EMPC Bylaws; CART Bylaws](http://accreditation.imperial.edu/docs/2015/follow-up-report/Response%20to%20Recommendation%201/REC.1.09%20Revised%20EMPC%20Bylaws%3b%20Revised%20CART%20Bylaws.pdf) [↑](#endnote-ref-92)
93. Plan 1.01 Academic Program Review Template Data Section; Sample Data Report [↑](#endnote-ref-93)
94. Plan 1.02 Board Minutes 12-17-14 [↑](#endnote-ref-94)
95. Plan 2.01 Letter to ACCJC 02-13-13 [↑](#endnote-ref-95)
96. Plan 2.02 DE Committee Minutes 09-25-13 [↑](#endnote-ref-96)
97. Plan 2.03 DE Course Evaluation Form [↑](#endnote-ref-97)
98. Plan 2.04 DE Committee Minutes 10-23-13 [↑](#endnote-ref-98)
99. Plan 2.05 DE Committee Minutes 11-27-13 [↑](#endnote-ref-99)
100. Plan 2.06 HR Recruitment Email 11-01-13 [↑](#endnote-ref-100)
101. Plan 2.07 DE Coordinator Job Description [↑](#endnote-ref-101)
102. Plan 2.08 DE Committee Minutes 02-12-14 [↑](#endnote-ref-102)
103. Plan 2.09 DE Committee Minutes 03-12-13 [↑](#endnote-ref-103)
104. Plan 2.10 DE Course Evaluation Form [↑](#endnote-ref-104)
105. Plan 2.11 DE Regular and Effective Contact Policy [↑](#endnote-ref-105)
106. Plan 2.12 DE Committee Minutes 09-10-14 [↑](#endnote-ref-106)
107. Plan 2.13 DE Committee Minutes 10-08-14 [↑](#endnote-ref-107)
108. Plan 2.14 DE Course Development Process [↑](#endnote-ref-108)
109. Plan 2.15 DE Committee Minutes 11-12-14 [↑](#endnote-ref-109)
110. Plan 2.16 DE Course Map Template [↑](#endnote-ref-110)
111. Plan 2.17 DE Committee Minutes 12-10-14 [↑](#endnote-ref-111)
112. Plan 2.18 DE Committee Minutes 03-11-15 [↑](#endnote-ref-112)
113. Plan 2.19 DE Committee Minutes 04-14-15 [↑](#endnote-ref-113)
114. Plan 2.20 IVC General Catalog - Student Complaint Procedure [↑](#endnote-ref-114)
115. Plan 2.21 DE Committee Minutes 05-13-15 [↑](#endnote-ref-115)
116. Plan 2.22 DE Committee Minutes 06-10-15 [↑](#endnote-ref-116)
117. Plan 2.23 DE Committee Minutes 08-18-15 [↑](#endnote-ref-117)
118. Plan 2.24 DE Committee Minutes 09-22-15 [↑](#endnote-ref-118)
119. Plan 2.25 DE Committee Minutes 10-27-15 [↑](#endnote-ref-119)
120. Plan 3.01 SPOL Training Schedule [↑](#endnote-ref-120)
121. Plan 3.02 PLO Training Attendance [↑](#endnote-ref-121)
122. Plan 3.03 SLO Assessment Template [↑](#endnote-ref-122)
123. Plan 3.04 PLO Assessment Template [↑](#endnote-ref-123)
124. Plan 4.01SPOL Assessment Basics – Measures and Rubrics [↑](#endnote-ref-124)
125. Plan 4.02 SPOL Assessment Basics – Programs and Outcome [↑](#endnote-ref-125)
126. Plan 4.03 SPOL Assessment Quick Step Guide [↑](#endnote-ref-126)
127. Plan 4.04 13 Rec. 3.xx PLO Assessment Plan [↑](#endnote-ref-127)
128. Plan 5.01 General Catalog – Program Descriptions with PLOs [↑](#endnote-ref-128)
129. Plan 5.02 Sample Program PLO Data [↑](#endnote-ref-129)
130. Plan 6.01 General Catalog – Program Descriptions with PLOs [↑](#endnote-ref-130)
131. Plan 6.02 Syllabus Template [↑](#endnote-ref-131)
132. Plan 6.03 Sample Course Syllabus [↑](#endnote-ref-132)
133. Plan 7.01 Public Relations and Marketing Plan [↑](#endnote-ref-133)
134. Plan 7.02 Social Media Policy [↑](#endnote-ref-134)
135. Plan 7.03 Public Relations and Marketing Committee Minutes 10-28-15 [↑](#endnote-ref-135)
136. Plan 7.04 College Council Minutes 12-\_\_-15 [↑](#endnote-ref-136)
137. Plan 8.xx A&R Program Reviews [↑](#endnote-ref-137)
138. Plan 9.01 CHPD Standing Rules [↑](#endnote-ref-138)
139. Plan 9.02 Campus Hour and Time Block PowerPoint [↑](#endnote-ref-139)
140. Plan 9.03 Academic Senate Minutes 09-03-14 [↑](#endnote-ref-140)
141. Plan 9.04 College Council Minutes 09-08-14 [↑](#endnote-ref-141)
142. Plan 9.05 Campus Hour Survey Summary [↑](#endnote-ref-142)
143. Plan 9.06 College Council Minutes 05-18-15 [↑](#endnote-ref-143)
144. Plan 10.xx MAINTENANCE SERVICE DESK TICKET [↑](#endnote-ref-144)
145. Plan 10.xx EHSC MINUTES WITH RAMP DISCUSSION \_\_-\_\_-\_\_ [↑](#endnote-ref-145)
146. Plan 10.xx: COLLEGE COUNCIL MINUTES WITH RAMP DISCUSSION \_\_-\_\_-\_\_ [↑](#endnote-ref-146)
147. Plan 10.xx BOARD AGENDA WITH PERSONNEL APPROVAL AND/OR CSO PERSONNEL BUDGET [↑](#endnote-ref-147)
148. Plan 10.xxCSO JOB DESCRIPTION [↑](#endnote-ref-148)
149. Plan 10.xx INSPECTION LOGS [↑](#endnote-ref-149)
150. Plan 10.xx CSPC MEETING MINUTES WITH POLICY DISCUSSION [↑](#endnote-ref-150)
151. Plan 10.xx Red Cross Shelter Agreement [↑](#endnote-ref-151)
152. Plan 10.xx Red Cross Supply Storage Agreement [↑](#endnote-ref-152)
153. Plan 10.xx - contracts?? [↑](#endnote-ref-153)
154. Plan 10.xx EVIDENCE: A RECENT (2013-15) CONTRACT OR MOU WITH SHERIFFS OFFICE [↑](#endnote-ref-154)
155. Plan 10.xx ICFD INSPECTION REPORT [↑](#endnote-ref-155)
156. Plan 10.xx: ICHD CERTIFICATION THAT THE COLLEGE IS IN COMPLIANCE [↑](#endnote-ref-156)
157. Plan 10.xx EXAMPLE OF MONTHLY REPORT [↑](#endnote-ref-157)
158. Plan 10.xx IVPRESS COVERAGE? [↑](#endnote-ref-158)
159. Plan 11.xx CITE PRESIDENTS UPDATE LETTER WHERE CAMPUS MOVES IS DISCUSSED [↑](#endnote-ref-159)
160. Plan 11.xx ACADEMIC SENATE MINUTES [↑](#endnote-ref-160)
161. Plan 11.xx BOARD MEETING 8/20/14 MINUTES – SHC program review [↑](#endnote-ref-161)
162. Plan 11.xxAnnouncement of grand opening [↑](#endnote-ref-162)
163. Plan 11.xx CITE OCT BOARD MINUTES WHERE THEY APPROVED THE POSITION [↑](#endnote-ref-163)
164. Plan 11.xx: Technology Services Multi-Year 2013-2022 Projection Document [↑](#endnote-ref-164)
165. Plan 11.xx CITE 5-YR PLAN [↑](#endnote-ref-165)
166. Plan 11.xx CITE FUSION REPORT [↑](#endnote-ref-166)
167. Plan 11.xx CITE AN APR THAT REFLECTS ADDITIONAL SPACE OR EQUIPT BEING REQUESTED, the SEMP, and the FYCP [↑](#endnote-ref-167)
168. Plan 11.xx CITE SIR 17 [↑](#endnote-ref-168)
169. Plan 11.xx CITE BOARD MINUTES WHEN THIS WAS LAST SENT TO THE BOARD [↑](#endnote-ref-169)
170. Plan 11.xx: grant narrative [↑](#endnote-ref-170)
171. Title 5 Grant 5/4/15 Meeting Notes [↑](#endnote-ref-171)
172. Plan 11.xx: Title 5 Grant 4/20/15 Meeting Notes [↑](#endnote-ref-172)
173. Plan 11.xx CITE BOND DETAIL FOR CTE BUILDING [↑](#endnote-ref-173)
174. Plan 11.xx ADVISORY MINUTES [↑](#endnote-ref-174)
175. Plan 11.xx utility bill reduction although square footage has increased [↑](#endnote-ref-175)
176. Plan 11.xx CITE [↑](#endnote-ref-176)
177. Plan 12.xx [TPC Minutes](http://www.imperial.edu/index.php?option=com_docman&task=doc_view&gid=6291&Itemid=762) [↑](#endnote-ref-177)
178. Plan 12.xx CHECK WITH MICHAEL HEUMANN Re survey about TECH AND FACULTY [↑](#endnote-ref-178)
179. [Plan 13.xx Strategic Transition Action Response Team (START) Meeting Notice 10/2/12](http://accreditation.imperial.edu/docs/2013/Standard%20IIID%20Financial%20Resources/START%20Team%20first%20meeting%20notice%2010-2-12.pdf) [↑](#endnote-ref-179)
180. [Plan 13.xx Strategic Transition Action Response Team (START) Charter](http://accreditation.imperial.edu/docs/2013/Standard%20IIID%20Financial%20Resources/START%20redesign%20team%20charter.pdf) [↑](#endnote-ref-180)
181. [Plan 13.xx Strategic Transition Action Response Team (START) Webpage](http://accreditation.imperial.edu/docs/2013/Standard%20IIID%20Financial%20Resources/START%20team%20web%20page.pdf) [↑](#endnote-ref-181)
182. Plan 14.xx Board Minutes, Resolution 15732 \_\_-\_\_-13 [↑](#endnote-ref-182)
183. Plan 14.xx CITE [↑](#endnote-ref-183)
184. Plan 14.xx BOARD MINUTES \_\_-\_\_-\_\_ [↑](#endnote-ref-184)
185. Plan 14.xx BFPC Minutes 09-30-15 [↑](#endnote-ref-185)
186. Plan 15.xx Updated Process Timelines Notes [↑](#endnote-ref-186)
187. Plan 15.xx Process Timelines Chart [↑](#endnote-ref-187)
188. Plan 13.xx FCMAT Management Review Report 12/3/12 [↑](#endnote-ref-188)
189. Plan 13.xx START Summary Meeting Notes 12/11/12, START Prioritization Table [↑](#endnote-ref-189)
190. Plan 13.xx Evaluation Team Report, 05-06-14 [↑](#endnote-ref-190)
191. Plan 16.xx Board Minutes? [↑](#endnote-ref-191)
192. Plan 15.xx BFPC Minutes \_\_-\_\_-\_ [↑](#endnote-ref-192)
193. Plan 16.xx Board Minutes 06-16-13 [↑](#endnote-ref-193)
194. Plan 16.xx CITE [↑](#endnote-ref-194)
195. Plan 16.xx BFPC Minutes, 08-26-15 [↑](#endnote-ref-195)
196. Plan 16.xx Student Health Services Brochure [www.imperial.edu/studenthe.pdf](http://www.imperial.edu/studenthe.pdf) [↑](#endnote-ref-196)
197. Plan 16.xx Local Agency Investment Fund, <https://www.icoe.org/business/fiscal-advisory-services>) [↑](#endnote-ref-197)
198. Plan 17.xx TA with CTA [↑](#endnote-ref-198)
199. Plan 17.xx CART AGENDA 08-23-12 [↑](#endnote-ref-199)
200. Plan 17.xx Data Reliability Committee meeting minutes 09-13-12) Where are most current DRC minutes? [↑](#endnote-ref-200)
201. Plan 17.xx Adoption in SEPT and OCT BFP Minutes [↑](#endnote-ref-201)
202. Plan 17.xx 2015-2016 Budget Guidelines and Budget Principles Guidelines and Priorities [↑](#endnote-ref-202)
203. Plan 17.xx ICCD Audit Report 06-30-14 [↑](#endnote-ref-203)
204. Plan 13.xx PRESIDENTS CABINETS NOTES [↑](#endnote-ref-204)
205. Plan 13.xx START Team Summary Meeting Notes 09-23-14 [↑](#endnote-ref-205)
206. Plan 18.xx Program Review Handbook [↑](#endnote-ref-206)
207. Plan 18.xx Efrain’s email to departments with status of budget requests [↑](#endnote-ref-207)
208. Plan 18.xx EVIDENCE??? [↑](#endnote-ref-208)
209. UP 1.01 2015 Annual Report [↑](#endnote-ref-209)