

MAY 19 2008

## **EVALUATION TEAM REPORT**

**HARTNELL COLLEGE  
156 Homestead Avenue  
Salinas, California 93901**

**A Confidential Report Prepared for  
The Accrediting Commission of Community and Junior Colleges  
Western Association of Schools and Colleges**

**This report represents the findings of the evaluation team that visited Hartnell  
College from April 29-30, 2008**

**J. Christopher McCarthy, Ed.D., Chair**

**Evaluation Visiting Team Roster  
Hartnell College  
April 28-29, 2008**

Chris McCarthy, Ed.D. (Chair)  
Superintendent/ President  
Napa Valley College  
Napa, CA

Sue Lorimer, Ph.D.  
Vice President of Instruction  
Folsom Lake College  
Folsom, CA

## **Introduction**

In a letter to the president of Hartnell College from the Accrediting Commission for Community and Junior Colleges of the Western Association of Schools and Colleges dated January 31, 2008, the college was formally notified that it had been removed from Probation and placed on Warning status. This action was taken after the college submitted an initial Progress Report, which was followed by an October, 2007 team visit that focused upon the resolution of Recommendation 7 (which is revisited below as the result of being partially met in October, 2007) and Commission Concern 1 (which dealt with Eligibility Requirement 21, and which was considered fully met in October, 2007).

The college was given a deadline of March 15, 2008 to submit a second Progress Report demonstrating resolution the following:

**Recommendation 1.** *The team recommends that the college develop a professional ethics code for all personnel and use it as a foundation for conducting an ongoing, collegial, self reflective dialogue about the continuous improvement of student learning and institutional processes, including the governance process. (Standards I.B.1; III.A.1.d; IV.A.1)*

**Recommendation 2.** *The team recommends that college constituencies agree upon and implement an ongoing, systematic, integrated process for program review, planning, budgeting and hiring, and that a means be developed to communicate decisions made in those arenas back to the campus at large. (Standards I.B.3; I.B.5; III.A.6; III.B.2.b; III.C.2; III.D.1.a; III.D.2; III.D.2.b)*

**Recommendation 3.** *The team recommends that a planning process be completed that will address the needs for staffing and maintenance in new buildings and for technology support in both new and existing buildings. (Standards I.B.3; I.B.4; I.B.6; III.A.2; III.A.6; III.B.1.a; III.B.1.b; III.B.2; III.2.a; III.B.2.b; III.C.1.c; III.C.2)*

**Recommendation 4.** *The team recommends that the college engages in a broad-based dialogue that leads to:*

- *The identification of Student Learning Outcomes at the course and program levels; and*
- *Regular assessment of student progress toward achievement of these outcomes. (Standards II.A.1.c; II.A.2.a; II.A.2.b; II.A.2.e; II.A.2.f; II.A.2.g; II.A.2.h; II.A.2.i; II.A.3)*

**Recommendation 5.** *The team recommends that the college complete the review and revision of all course outlines and ensure that the catalog information regarding currently offered courses and programs is accurate. (Standard II.A.2.c; II.A.6.c).*

**Recommendation 6.** *The team recommends the creation of an enhanced long range fiscal stability/enrollment management effort, which utilizes the services of*

*the Offices of Business and Finance, Instruction, Admissions and Records, Student Services, Outreach Services and other appropriate college resources. (Standards III.D.1.a; III.D.1.b; III.D.1.c; III.D.2.c)*

**Commission Concern 2:** *The Commission asks Hartnell College to demonstrate that it meets Eligibility Requirement 10 which requires the institution “defines and publishes for each program the program’s expected student learning and achievement outcomes. Through regular and systematic assessment, it demonstrates that students who complete programs, no matter where or how they are offered, achieve these outcomes.*

The Commission also required that Hartnell College provide additional information related to Recommendation 7, which had been examined during the October 2007 visit. The team found that the portion of the recommendation that addressed completion of the Ethics policy had been met, but evidence of a comprehensive trustee development plan was still forthcoming, and the recommendation was considered partially met:

**Recommendation 7.** *The team recommends that the Board of Trustees completes their Ethics Policy by developing procedures for sanctioning those who commit ethical violations, and that they develop a comprehensive trustee development plan that provides training focused upon appropriate board behavior, roles and responsibilities. (Standards IV.B.1.a; IV.B.1.e; IV.B.1.f; IV.B.1.g; IV.B.1.h)*

As noted earlier, Commission Concern 1, which dealt with Eligibility Requirement 21, was considered fully met by the Commission at their January, 2008 meeting, and was not part of the April, 2008 evaluation.

Hartnell College submitted a Progress report to the Commission detailing their work to resolve the recommendations listed above. After reviewing the report, a two-person team visited the college on April 29 and 30, 2008 to conduct the progress visit.

It should be noted that there have been many administrative staffing changes since the spring, 2007 comprehensive visit and the October, 2007 progress visit. At the time of the April 2008 progress visit, an interim president had been in place for ten months, and a presidential search was underway. In December, 2007, in preparation for an administrative reorganization aimed at increasing efficiency and reducing expenses, all management employees were given notice of potential termination of their positions as of July 1, 2008. Nine of those employees have left the college, either to assume new positions or as a result of resignations. Those positions were unfilled at the time of the visit.

As the following indicates, extensive changes in governance, staffing, budgeting, curriculum and other key areas of campus life are underway at Hartnell College. Most of these changes are directly tied to the recommendations of the Accrediting Commission. The college appears sincerely involved and invested in the sweeping changes that are underway, and the team found a sense of shared purpose and optimism about the potential for renewal and stability at Hartnell College.

## **Evaluation of Progress**

**Recommendation 1:** *The team recommends that the college develop a professional ethics code for all personnel and use it as a foundation for conducting an ongoing, collegial, self reflective dialogue about the continuous improvement of student learning and institutional processes, including the governance process. (Standards I.B.1; III.A.1.d; IV .A.1)*

### **Observations**

The college has developed an Ethics Code for all employees.

In preparation for the development of the Ethics Code, board members, board candidates, and significant number of faculty, staff and students received an Ethics in Public Service Certification after attending a three-hour ethics workshop provided by the law firm of Liebert Cassidy Whitmore. Others completed an online certificate in Public Service Ethics.

An Ethics Code Task Force examined codes used at other colleges and solicited input from the campus. A draft Ethics Code was presented for comment at a Town Hall meeting in February, 2008. A final version was subsequently adopted by the Board of Trustees.

The Ethics Code contains no provision for enforcement. The college regarded the establishment of the code as the first phase of the process, central to meeting the accreditation recommendation. They are researching how other colleges have incorporated sanction language into their ethics codes, and they regard the addition of such language as the next phase of development of the code.

The Ethics Code appears to be informing and guiding a campus-wide dialogue about governance. While the team was at the college, people often used the language of the Ethics Code as they described the manner in which they were discussing and resolving critical college issues.

### **Conclusion**

While the Ethics Code is brief, and it contains no guidelines for the treatment of ethical violations, it fulfills the requirements of the standard and the recommendation. This recommendation has been addressed.

**Recommendation 2:** *The team recommends that college constituencies agree upon and implement an ongoing, systematic, integrated process for program review, planning, budgeting and hiring, and that a means be developed to communicate decisions made in those arenas back to the campus at large. (Standards I.B.3; I.B.5; III.A.6; III.B.2.b; III.C.2; III.D.1.a; III.D.2; III.D.2.b)*

### **Observations**

The college has been involved in significant revision of their governance process, their program review procedures, their planning efforts, their financial approaches, and their staffing plan.

As noted elsewhere in this report, the college participated in a *Salinas 20/20* study that identified community educational needs. This, in concert with the development of a new financial plan, led to a number of changes that are relevant to the college's ability to meet this recommendation.

At the heart of the effort is a new Program Planning and Assessment process that is data-driven and that includes regular self-assessment. This process will be used to evaluate instructional programs, student services and administrative areas of the college. It will be linked to technology, facilities and human resources planning, as well as to budget decisions directly related to the areas being assessed.

A Program Review electronic screening model informs the process, with data on enrollments, course completions, revenue/cost ratios, efficiency and WSCH, and the number of degrees and certificates earned.

Each college program will be evaluated every five years, with an annual self study process that includes newly produced data. Included in the process will be assessment of student learning outcomes at the program level.

The college is currently in the pilot year of this model. All instructional programs participated in the process during the past year, and all have submitted program plans that contain resource needs, including equipment, facilities, staffing and technology requests.

A new governance model has been put into place that will integrate and oversee the various decision-making processes at the college. Effective communication appears to be an important element of the governance plan. Staff report that during the past year the communications climate has improved dramatically.

### **Conclusions**

The pilot institutional assessment, planning, and resource allocation processes are informed by data and actively engage faculty across the institution in seeking ways to further improve their programs. This is an important first step. It has been intentionally

designed and implemented within one year's time, and it demonstrates the college's commitment to making significant progress toward meeting this recommendation.

The overall institutional assessment, planning and resource allocation processes, if implemented as described in the March 15, 2008 Progress Report, should result in an ongoing, systematic, integrated process for program review, planning, budgeting and hiring, that is effectively communicated to the entire college. However, the successful implementation of the overall process is dependent upon appropriate committee review and allocation processes and continued collaboration by all constituent groups. Until the college's new governance structure and administrative reorganization is in place and operating as intended, it is too soon to see how well the college will be able to meet this recommendation.

The college has successfully engaged in significant work to implement the initial steps necessary to address Recommendation 2. This recommendation has been partially addressed.

**Recommendation 3:** *The team recommends that a planning process be completed that will address the needs for staffing and maintenance in new buildings and for technology support in both new and existing buildings (Standard I.B.3; I.B.4; I.B.6; III.A.2; III.A.6; III.B.1.a; III.B.1.b; III.B.2; III.2.a; III.B.2.b; III.C.1.c; III.C.2)*

### **Observations**

Prior to the October visit, the college reviewed its technology staffing needs and identified areas where additional staffing is needed. The Chancellor's office Technology II Strategic Plan was used as the basis of the analysis.

The college also brought in a consultant who has analyzed college finances and developed strategies for improving stability. Included in these strategies was the need for identification of consistent funding streams for technology.

Since the October visit, the college has added two custodians and a maintenance mechanic. They have plans to add two new computer technicians and a network administrator. They have used facilities consultants to update the Five year Construction Plan and draft a template for a new Facilities Master Plan. The Facilities Master Plan includes two new buildings – one on the main campus in 2009-2010 and one on the Alisal Campus (formerly known as the East Campus) in 2011-2012. The college has developed a model that identifies maintenance staffing increases that are tied to the number of square feet added.

The college anticipates savings and new revenue as a result of the reorganization and other elements of the new financial plan. The bulk of that savings has been redirected to cover needs addressed in this recommendation, with \$500,000 set aside for the network,

\$800,000 for technology, \$200,000 for facilities and \$200,000 for instruction. The college plans to replace computers in student labs every three years.

The district has also formed a Reorganization Committee that will look into, among other issues, the need to consider technology staffing in three areas: infrastructure, instructional support and web services. The analysis of these areas is expected to occur in 2008-2009.

### **Conclusions**

The college has addressed immediate needs in the technology and maintenance areas, they have updated their Construction and Facilities Plans, they have established a model that ties custodial staffing to campus square footage, and they have developed a process for analyzing needs as part of their reorganization efforts.

The institution's response to Recommendation 6 reports additional information related to college efforts to stabilize the budget, which will offer support in achieving this recommendation over the long term.

The college has made major steps aimed at addressing Recommendation 3 by funding needed positions and identifying a process to address future needs. However, the process has is still in development, and this recommendation is not yet fully met.

**Recommendation 4:** *The team recommends that the college engages in a broad-based dialogue that leads to:*

- *The identification of Student Learning Outcomes at the course and program levels; and*
- *Regular assessment of student progress toward achievement of these outcomes. (Standards II.A.1.c; II.A.2.a; II.A.2.b; II.A.2.e; II.A.2.f; II.A.2.g; II.A.2.h; II.A.2.i; II.A.3)*

### **Observations**

The college has continued its extensive efforts, started in fall 2007, to develop Student Learning Outcomes (SLOs) for programs and courses. Faculty have attended regional and national conferences and consulted with SLO experts to assist in this endeavor. In 2007-2008, faculty received stipends totaling \$150,000 to work on SLOs and course revisions. This was a one-time expense that resulted in numerous course updates intended to allow the college to address its backlog of needed curriculum review and revision and to design a process to perform curriculum updates on a systemic, annual basis.

The college has defined six institutional or general education SLOs, which it calls *core competencies*. All courses identified as helping students achieve one or more of the desired competencies have been mapped to the appropriate competency. An assessment model has been developed to assess how well students enrolled in core competency courses are actually meeting the competency requirements. At the time of the visit, the



college was just completing its assessment of student achievement in meeting the communication core competency. Beginning next year, three competencies are scheduled to be assessed each year, thus assessing the six core competencies every two years.

Individual courses undergoing revision and courses new to the college must have defined SLOs and SLO assessment strategies in order to be approved by the Curriculum Committee. At the time of the visit, 45% of the college's courses had defined SLOs in place. Additional courses were on track for review and action by the Curriculum Committee before the end of the academic year.

All college programs leading to a degree have individual learning outcomes defined for each of the courses required for the major. These major course outcomes combined with the core competency outcomes from the general education portion of the degree are considered by the college to meet the definition of program learning outcomes. While these outcomes are an important part of creating overall program learning outcomes, they do not meet the Commission's definition of program learning outcomes that should be identified for each college program. Discussion during the visit indicated the college was willing to revisit their definition of program learning outcomes for inclusion in the 2009-2010 Catalog. The online version of the still-in-progress 2008-2009 Catalog will have links from each course listed on each program's major course requirement list to the SLOs for that course.

### **Conclusions**

The college has engaged in a broad-based, informed, faculty-led dialogue to identify SLOs and create SLO assessment strategies. Further, the college is actively piloting SLO assessment strategies, which are designed to result in regular, ongoing SLO assessment. Thus, the college has demonstrated serious commitment to engaging in the necessary dialogue and work required to fully address this recommendation. With the exception of revisiting the definition of program outcomes (referenced above), they are in the Development Stage of the Commission's SLO rubric. This recommendation has been partially addressed.

**Recommendation 5:** *The team recommends that the college complete the review and revision of all course outlines and ensure that the catalog information regarding currently offered courses and programs is accurate. (Standard II.A.2.c; II.A.6.c)*

### **Observations**

The college Curriculum Committee has completed and documented a review of all college curricula. As a result of the review, discipline faculty have revised, deleted, or inactivated all outdated programs and courses. Further, an ongoing review cycle has been established to ensure programs and courses are reviewed and acted upon within a timely cycle. In order to complete the required review, Curriculum Committee members

and discipline faculty have undergone appropriate training. Faculty members have identified SLOs for all courses undergoing revision and are scheduled to do so as review for current courses become due. New courses must have SLOs and SLO assessment strategies in place in order to be approved. This significant amount of work, undertaken with the support of a locally designed curriculum monitoring data base, has prepared the college to transition to an online curriculum system (CurricUNET) this summer. The new system should help streamline future program and course revisions and development, as well as provide support for documenting SLOs, SLO assessment strategies, and overall degree and certificate program assessment.

Concurrently with the curriculum review process, the college has redesigned its catalog and piloted a guaranteed class schedule. The redesigned catalog will include only active programs and courses. The catalog was strategically designed with input from counselors and students to ensure a product that is both accurate and user-friendly. Although the 2008-2009 Catalog had not been printed at the time of the visit, team members were able to view sample pages and verify that program listings included only active programs. In spring 2008, the college piloted a guaranteed class schedule which included all the course offerings necessary for students to progress toward their educational goals in a timely manner. The term "guarantee" meant the college would not cancel any sections listed in the schedule. Then, as the guaranteed sections filled, the college added sections to meet student enrollment demands. While this worked well for students, it did create operational challenges for administrators adding new sections and for adjunct faculty waiting until near the start of the semester to find out if they would be offered sections to teach. The college likes the concept of this approach to meeting student needs, but is planning to work on refining the process to make it easier to implement.

### **Conclusions**

The college has worked very hard and successfully to bring its curricula up-to-date and to put in place processes that should support normal, ongoing program and course review and revision processes. The redesigned catalog should accurately reflect college program and course offerings. The catalog development process now has in place important steps to make each year's catalog responsive to student needs. The guaranteed class schedule process, while not yet perfected, indicates the college's renewed commitment to offering the class sections needed to allow students to complete their educational goals in a timely manner.

The college has successfully addressed Recommendation 5, and it is institutionalizing sustainable processes to maintain current programs and courses, as well as to produce an accurate catalog.

**Recommendation 6:** *The team recommends the creation of an enhanced long range fiscal stability/enrollment management effort, which utilizes the services of the Offices of Business and Finance, Instruction, Admissions and Records, Student Services, Outreach Services and other appropriate college resources. (Standards III.D.1.a; III.D.1.b; III.D.1.c; III.D.2.c)*

### **Observations**

Prior to the October 2007 visit, the college hired a forensic consultant to review its budget and its processes. The consultant identified a series of strategies aimed at stabilizing the financial situation. These included the following:

- Identify consistent funding streams for technology
- Restore the reserve (this involves an increase in revenue and a decrease in expenditures)
- Prepare for negotiations (all three labor groups have contracts that expire this year)
- Make recommendations as to how public and private grants might be better utilized to support the mission of the college and reduce redundancies.

Since that visit, the college has used the consultant's information to develop an eight-year financial plan that is aimed at achieving long term stability. The plan is dependent upon a number of assumptions: 1) revenue growth at 3 percent per year, 2) added revenue from the application of an indirect cost rate from applicable grants, 3) wages and benefits held at no more than a 3 percent annual increase, 4) reducing the cost of operating the Western Stage, and 5) investment of an additional \$1.2 to 2.3 million annually in new infrastructure improvements and programs. The Board of Trustees approved this plan in December, 2007, and they formed an ad-hoc Audit Committee to better exercise budget oversight.

In tandem with the adoption of the financial plan, the Board of Trustees also approved a resolution giving notice of potential termination to all managers effective July 1, 2008. The Board directed the college to complete a reorganization plan, which has been achieved. The plan reduces the administration by eight positions and reorganizes the titles and duties of most management positions. The new positions will be advertised, and existing managers must apply for them. This reorganization is designed to save approximately \$1 million each year in salary and benefits.

As a result of the reorganization, nine managers resigned, retired or left to assume positions at other colleges. Some remaining managers are covering multiple job duties as a result. The new positions should be filled during the summer of 2008.

The team noted some uncertainty among classified staff, as job descriptions may be modified to meet the needs of the new management positions.

The college also developed *Salinas Valley Vision 20/20*, which analyzes the region's educational needs, in partnership with business and government leaders. This analysis has informed the Hartnell College Educational Master Plan and is assisting in development of programs that are aimed at meeting the emerging needs to the district.

As a result of the *Salinas Valley Vision 2020* study, the college is expanding its agriculture programs, creating an Agricultural Business and Technology Institute, and increasing evening, weekend and distance learning options.

As noted under Recommendation 5, the college also implemented a guaranteed course schedule for spring, 2008, which has resulted in an increase in average class size of five students, from just over 23 to 28.4. Seventeen hundred additional students enrolled in a schedule that offered 45 fewer classes than were offered in the previous year.

The college is expanding facilities on the Alisal Campus, which they expect will result in increased enrollments in vocational programs, ESL and general education. The college has set up advisory committees of industry leaders through the Foundation, which they believe will assist with funding and equipment donations. The new Agriculture Business and Technology Institute is expected to have large enrollments. The college is looking into developing the noncredit program, enhancing basic skills, and coordinating admissions and outreach.

An additional activity aimed at increasing enrollments was a thirty-hour Registration Rally, which was held on the main campus and at the King City Educational Center. Faculty, staff and students were available to assist registrants, and the college offered music, games and food to those who attended.

These efforts, in concert with enhanced outreach activities, resulted in a 23% increase in enrolled students and a 15% increase in the number of units taken in the spring of 2008. The revenue gained from these increased enrollments have restored the college base funding and slightly exceeded the growth cap.

## **Conclusions**

The comprehensive visiting team was concerned that the college had been in a pattern of declining enrollments and deficit spending for a number of years. In October, 2007, a \$1.3 million deficit was projected in the current year. The activities the college has undertaken to stabilize enrollment, develop a financial stability plan, and reorganize the college have resulted in a turnaround of the deficit spending pattern.

While the long range financial plan (which extends to 2016) is dependent upon factors that may have some flux (such as regular revenue growth and a limit on the size of

negotiated salary increases), the college has established a comprehensive financial plan and is acting upon it.

This recommendation has been met.

**Recommendation 7:** *The team recommends that the Board of Trustees complete their Ethics Policy by developing procedures for sanctioning those who commit ethical violations, and that they develop a comprehensive trustee development plan that provides training focused upon appropriate Board behavior, roles and responsibilities (Standard IV.B.1.a; IV.B.1.e; IV.B.1.f; IV.B.1.g; IV. B.1.h)*

### **Observations**

The Board of Trustees has completed a Board Ethics Policy that includes sanctions for those who commit ethical violations. This policy was formally adopted on September 13, 2007 and, according to members of the board, already put into action on two occasions.

The college has initiated a number of board development activities. The board conducted an annual goal setting workshop in July, 2007, at which they established that responding to accreditation recommendations would be a major goal for the coming year.

The board held an Ethics Policy Workshop in July, 2007. In this workshop, they clarified the roles of the board chair and the college president. Board members report that they will be conducting self-evaluations every year in April.

Board members, along with board candidates and approximately one hundred fifty college staff members, attended ethics certification training in September. Board members who could not attend the two-day training completed the certification online.

The Board attended a college-wide shared governance workshop, which focused upon developing a common understanding of roles and responsibilities in college decision-making and creating clear processes that involve all constituent groups.

The college has put together a Trustee Development Plan, which identifies upcoming study sessions that the board will hold, workshops that members will attend, and readings that the board will discuss in public session, all aimed at ongoing board development. The college has also put together a binder that identifies relevant printed materials, Community College League publications, related websites and pertinent conferences. The plan also indicates orientation activities for new members that include mentor assignments, an orientation to college issues, and a tour of the college sites.

### **Conclusions**

The college has developed a board ethics sanction policy that is being used when board members act outside of accepted protocols.

The college has developed a comprehensive Trustee Development Plan and an orientation plan for new board members.

This recommendation has been met.

**Commission Concern 2:** *The Commission asks Hartnell College to demonstrate that it meets Eligibility Requirement 10 which requires the institution "defines and publishes for each program and the program's expected student learning and achievement outcomes. Through regular and systematic assessment, it demonstrates that students who complete programs, no matter where or how they are offered, achieve these outcomes.*

### **Observations**

The college's discipline faculty have developed SLOs for each required major course for their respective degrees and certificates. Further, the faculty have developed SLOs for each general education course (core competency) required as part of every associate degree. The SLOs for core competencies will be published in the 2008-2009 Catalog and on the web version of the catalog. The individual major course SLOs will not be in the print catalog, but will be linked via web to the courses listed in the online catalog. The college believes that this information for program course SLOs and core competency SLO requirements will address the each program's expected SLO requirements.

Concurrently, in developing the SLOs for each program major course and core competency course, the faculty have defined SLO assessment strategies. The Student Learning Outcomes and Assessment Committee (SLOA) has identified a set of strategies and timeline for assessing each core competency and for providing assessment outcomes to the departments teaching those courses. The college has piloted an assessment of the communication core competency for which the results had been gathered, but not yet institutionally discussed at the time of the visit.

### **Conclusions**

College faculty, supported by administration and classified staff, were clearly engaged and making significant, thoughtful progress in addressing Commission Concern 2. However, the college has not yet developed and will not publish program learning outcomes for the 2008-2009 Catalog. Work on assessing outcomes is clearly in progress.

This recommendation has been partially met.