Certification of the Follow-Up Report
March 15, 2014

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

Candi DePauw  
President, Board of Trustees, Hartnell Community College District  

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Superintendent/President  

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Date: 3/4/14  
Date: 3/5/14  
Date: 3/6/14  
Date: 3-5-14  
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Statement of Report Preparation

Hartnell College received the Team Report and the Commission’s Action Letter on July 3, 2013. The report and letter were broadly distributed via campus email and made available to the public on the college website immediately upon receipt.

This Follow-Up Report was prepared by the Accreditation Liaison Officer (ALO), lead administrators assigned to the 12 recommendations, and the Accreditation Council, a shared governance council comprising representatives from all employee groups. Information was gathered from all college constituents, including full- and part-time faculty, classified staff, students, and managers/administrators.

Drafts of this report were updated monthly by the lead administrators and posted on Google docs. These updates were reviewed and edited by members of the Accreditation Council on October 21, 2013, November 18, 2013, December 16, 2013, and January 27, 2014. A consultation draft was emailed to the Hartnell College community on February 5, 2014 asking them to review the draft for accuracy and to send in comments and corrections by February 12, 2014. All responses were compiled and sent to the lead administrators, who prepared a final version. This version was reviewed by the Accreditation Council at its February 18, 2014, meeting, and also was presented to the Board of Trustees as a first reading at its meeting later that day.

After the final review and approval of the Accreditation Council, the Follow-Up Report was then submitted to the College Planning Council (CPC) for review on February 19, 2014. Part of the report was approved by the CPC on February 19, 2014 and the remainder of the report was approved by the CPC on February 27, 2014. The Board of Trustees discussed and approved the final Follow-Up Report at its regular monthly meeting on March 4, 2014.

The Follow-Up Report, including all hyper-linked evidence files, was disseminated to the college community on March 15, 2014 by posting it to the college web site.
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Responses to the Commission Action Letter

Recommendation 1
In order for the college to meet the standard, the team recommends that the college develop a process for regular and systemic evaluation of its mission statement. Additionally, the team recommends that the college implement this process to thoroughly review and revise its mission statement to more clearly reflect its intended population and address student learning (I.A.; I.A.3).

Resolution and Analysis
During 2012-13 the process for review of the college’s vision, mission, and values statements was initiated. The Governance Planning Task Force was charged with conducting the review and recommending changes, if any, to these statements. During March 2013, all college employees had an opportunity to respond to a survey of vision, mission, and values statements (1.1). A report of the findings from the survey was completed and posted to the college website in August 2013 (1.2). The Governance Planning Task Force (GPTF) reconvened in the fall of 2013 to continue the review of the vision, mission, and values statements. All of the agendas, minutes, and document for the GPTF can be accessed [here](#). The GPTF reviewed the results of the survey of vision, mission, and values statements, reviewed accreditation recommendation 1, and reviewed the accreditation standards for college mission. The GPTF formed three small work groups comprised of faculty, staff, and administrators, and assigned each group to address one of the three types of statements. Each subcommittee reported its recommendations to the GPTF in October 2013. In its consideration of the mission statement, the GPTF focused its review to ensure that the statement reflected the intended student population and that the statement addressed student learning. The GPTF forwarded its recommendations to the College Planning Council.

The College Planning Council had its first review of the statements at its November 6, 2013 meeting (1.3) and subsequent reviews at its November 20, 2013 (1.4) and December 4, 2013 (1.5) meetings. The CPC approved the new vision and mission statements at its December 4, 2013, meeting and approved the values statements at its December 18, 2013, meeting (1.6). The CPC approved BP 1200 - Vision, Mission, and Values Statements, at the December 18, 2013, meeting. BP 1200 establishes a review schedule for vision, mission, and values statements that is linked to the cycle for the strategic plan. Under BP 1200, the review of vision, mission, and values statements will occur during the year preceding the final year of the strategic plan. In this way, vision, mission, and values statements will be established prior to the development of the next strategic plan and will be used to guide the development of the next strategic plan.

The Board of Trustees had its first reading of BP 1200 - Vision, Mission, and Values Statements, at its January 14, 2014, meeting (1.7). At its February 4, 2014, meeting, the Board of Trustees approved BP 1200, adopting the following vision, mission, and values statements including a process for the regular and systematic review of the statements (1.8).
Vision
Hartnell College will be nationally recognized for the success of our students by developing leaders who will contribute to the social, cultural, and economic vitality of our region and the global community.

Mission
Focusing on the needs of the Salinas Valley, Hartnell College provides educational opportunities for students to reach academic goals in an environment committed to student learning, achievement and success.

Values
Values are the essential enduring tenets that guide Hartnell College. They set forth what we believe and they define how we conduct ourselves. At the core of these values is the student.

Students First
We believe the first question that should be asked when making decisions is “What impact will the decision have on student access, learning, development, achievement, and success?”

Academic and Service Excellence
We commit to excellence in teaching and student services that develop the intellectual, personal, and social competence of every student.

Diversity and Equity
We embrace and celebrate differences and uniqueness among all students and employees. We welcome students and employees of all backgrounds.

Ethics and Integrity
We commit to respect, civility, honesty, responsibility, and transparency in all actions and communications.

Partnerships
We develop relationships within the college and community, locally and globally, that allow us to grow our knowledge, expand our reach, and strengthen our impact on those we serve.

Leadership and Empowerment
We commit to growing leaders through opportunity, engagement, and achievement.
Innovation
Through collaboration, we seek and create new tools, techniques, programs, and processes that contribute to continuous quality improvement.

Stewardship of Resources
We commit to effective utilization of human, physical, financial, and technological resources.

Next Steps
None.

Conclusion
Completed.

Supporting Evidence/Documentation
1.1 Survey instrument for Vision, Mission, and Values Statements
1.2 Report of the results from the Vision, Mission, and Values Survey
1.3 Minutes for CPC meeting November 6, 2013
1.4 Minutes for CPC meeting November 20, 2013
1.5 Minutes for CPC meeting December 4, 2013
1.6 Minutes for CPC meeting December 18, 2013
1.7 Minutes for Board of Trustees meeting January 14, 2014
1.8 Minutes (unadopted) for Board of Trustees meeting February 4, 2014
Recommendation 2

As previously noted in Recommendations 1, 2, and 3 in the 2007 Comprehensive Team Report and in order to meet the eligibility requirements and the standards, the team recommends that the college develop a comprehensive integrated planning process that includes participatory governance and meets both the strategic and annual needs of the college. The team further recommends that all institutional plans of the College (e.g., budgeting, technology, Student Services) be linked to its planning process and that the outcomes of these processes be regularly communicated to all college constituencies. The team further recommends that budget planning and allocation of resources inform financial projections. (Eligibility Requirement 19, Standards I.B.1; I.B.2; I.B.3; I.B.4; I.B.5; II.B.1; II.B.3; II.B.3.a,c,d,e,f; II.B.4; III.C.2; III.D.1; III.D.1.a, d; III.D.2.b; III.D.3)

Resolution and Analysis

Subsequent to several years during which the institutional research function was staffed by one person, and after an interim dean was appointed for a period that lasted several months in 2012-13, a permanent dean was hired in September 2013 and reports directly to the Superintendent/President. Establishing this office and deanship with the title “planning and effectiveness” has resulted in new foci on integrated planning and institutional effectiveness. This response emphasizes the role of comprehensive integrated planning at the college.

Decisions Prior and Parallel to Development of Integrated Planning Process

While planning, assessment, and resource allocations have historically been partially linked, certain key decisions and outcomes in FYs 2012-13 and 2013-14 have strategically informed, and provide a rich context for understanding, the recent development and implementation of a comprehensive integrated planning process for the college:

- In FY 2012-13, the formerly existing Resource Allocation Committee reviewed capital outlay requests submitted by, and approved requests for, various programs, services and offices totaling $1.9 million currently being allocated in FY 2013-14 (2.1).
- On February 4, 2014, the Board of Trustees approved Board Policy 1200 on Vision, Mission, and Value Statements (2.2, 2.3) that followed from internal input initially obtained in FY 2012-13, and subsequently dialogue and deliberations that occurred through fall 2013.
- Starting in FY 2012-13, it was required that agenda items for Board meetings specifically reference established strategic priorities and existing accreditation standards (2.4, 2.5).
- Beginning in FY 2012-13, completion of the grant concept review template includes items that specifically reference strategic priorities and existing accreditation standards, expanding in FY 2013-14 to include strategic goals (2.6).

Hence, mission review and revision, strategic focus, governance activities, and explicit attention to accreditation standards have collectively formed the necessary backdrop propelling integrated planning as the key driver for translating mission driven and strategic considerations into
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execution and continuous improvement activities, and thereby moving the institution productively forward.

Development and Implementation of Annual Integrated Planning Process
During fall 2013, with consideration to various unfolding strategic forces as noted above, and in conjunction with the vice president of administrative services (VPAS), the dean of institutional planning and effectiveness designed and began implementing an annual integrated planning process. Compared with the comprehensive program reviews that had previously been undertaken, most recently from fall 2010 through spring 2012, this annual integrated process was created to more effectively and systematically meet the college’s ongoing resource needs. The process continues to utilize planning components initiated in 2008 by the formerly existing Program Planning and Assessment (PPA) Committee, including the general activity flow and the evolving template for reviewing academic programs. The most important elements of this systematic process include program review/PPA (this element is discussed in greater detail in the response to Recommendation 9), governance, budget development, and continuous improvement. The most critical relationships within the complex system encompass linkages between:

- PPA and the new governance model.
- The new governance model and budget development and funding decisions.
- PPA and budget development, funding decisions and resource allocation.
- PPA and improvement in student learning and achievement and service outcomes.

The key constraint on all relationships/linkages is the time available to ensure that the system functions to ensure a complete and successful integrated process on a regular, ongoing basis. It was therefore of paramount importance to design the system for optimal overall functioning along with practicable functioning of all individual elements - though potentially at the expense of the ideal functioning of any one or more elements of the system.

Because it was necessary to begin implementing the fall 2013 PPA process in advance of its complete specification, and therefore prior to gaining approval of this process by the newly created College Planning Council (CPC), the dean of institutional planning and effectiveness ensured that the CPC was informed as possible and requested that approval be scheduled at the earliest available time. The CPC approved the integrated planning process and associated documents at its meeting on February 5, 2014 (2.7).

Annual program planning and assessment (2.8) consists of provisions for:
- Participation - relevant faculty, staff and/or administrators conduct the review.
- Completion of a report - an annual review of and action plan for either an academic program through which student outcomes data are analyzed, or a service, office or non-instructional program through which service area outcomes data are analyzed.
- Content review - by the supervising administrator.
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- Oversight - by the divisional VP and respective governance council(s).
- Housing of completed reports - by the dean of institutional planning and effectiveness.
- Improvements - to be determined and subsequently implemented by relevant faculty and their dean for an academic program, and relevant staff and their supervising administrator for a service, office or non-instructional program.
- Improvements in the process itself - to be determined and then implemented by the dean of and staff in institutional planning and effectiveness.

The new governance and planning model encompasses two tiers of governance, in addition to various other committees and workgroups that serve specific purposes (2.9). The first tier includes councils and planning groups that correspond largely to the college’s divisional structure - such as councils on academic affairs (2.10), administrative service (2.11), advancement (2.12), student affairs (2.13), and technology development (2.14). The College Planning Council (CPC) sits on the second tier; it reviews recommendations on policies and procedures, plans and initiatives, and resource allocation requests from the lower level councils, and in turn makes recommendations to the Superintendent/President (2.15), which may be operationalized through the President’s Executive Cabinet in accordance with the governance and planning model (2.9). Starting in Fall 2013, all program reviews, related budgetary requests, and planning documents or summaries began to flow through the new governance structure for discussion, recommendation, and approval as appropriate.

The key document governing budget development processes and funding decisions points to formalization of chronologically sequenced procedures for making four types of budgetary requests (2.16), inclusive of:

- Program planning and assessment for new activities and requests for augmentation, which occurs 12 to 18 months in advance of the applicable fiscal year. All designated programs, services and offices are required to engage in planning and assessment activities, and they must make these requests for funding if they intend to engage in new activities or augment their current activities.
- Budget rollover to fund ongoing, year-to-year needs, which occurs 3 to 6 months in advance of the applicable fiscal year. All designated programs, services and offices are required to engage in this budget development activity, otherwise they risk the prospect of receiving no funding whatsoever.
- Requests for supplemental funding, which occurs during the operating year for those occasions when requesting funds in advance of the fiscal year was not possible.
- Requests to meet urgent needs, which also occurs during the operating year, though rarely.

The compressed integrated planning process that commenced with program review/PPA in fall 2013 is being implemented through spring 2014 to inform budget development for FY 2014-15 (2.17). The master meeting schedule for AY 2013-14 displays when and how frequently governance councils meet (2.18), while the academic and governance council charts governance
meetings to inform all college employees on timely and ongoing basis (2.19). And, for the first time, the district budget development calendar for FY 2014-15 reflects key PPA activities of administrators and governance councils (2.20).

*The expanded integrated planning process* that has begun with program review/PPA in spring 2014 (2.21), and which applies to all subsequent annual integrated planning processes (starting in the spring) moving forward (2.22), allows for:

- A full (spring) semester of program planning/assessment activities and intra-divisional content review and oversight; followed by
- Summer months during which VPs summarize priorities for funding requests; then
- A full (fall) semester of governance council involvement in reviewing and discussing PPA results, and making recommendations concerning priorities for funding; and finally
- Transition into the next academic year via the superintendent/president’s decisions regarding which funding requests from program review/PPA will move forward into the tentative budget for the subsequent fiscal year--in this case, for FY 2015-16.

*Linkage of Long Term Institutional Plans to Integrated Planning Process*

The first step in linking institutional plans to the planning process was to identify which plans of the college are considered to be “long term institutional” plans. For this purpose, “long term” is interpreted as multiple years, toward the ideal that a plan parallels the same years or similar period as the Strategic Plan - 2013 through 2018 (2.23). A challenge in this regard is that certain long term plans were established prior to development of the Strategic Plan. Also for this purpose, “institutional” is interpreted as having an impact throughout the college or across all divisions.

The following six plans were identified as long term institutional plans in FY 2013-14; they are listed in chronological order according to their development and approval status.

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<td>1. Technology Master Plan 2011-2021</td>
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<tr>
<td>2. Foundation Funding Plan 2012-2017</td>
<td>Established 2012</td>
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<tr>
<td>4. Strategic Plan 2013-2018</td>
<td>Approved by Board 10/1/13</td>
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<tr>
<td>6. Facilities Master Plan</td>
<td>To be drafted - target approval 10/14</td>
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The college’s Strategic Plan 2013-2018 serves as the umbrella plan for the institution in that it encapsulates the Board’s six priorities through spring 2018 (2.23); it is therefore essential that all annual and long term plans are linked to one or more of its priorities and goals. Requests for funding that appear in annual action plans must establish such linkage regardless of the specific program, service or office submitting such plans. Although requests for funding specific
components of long term plans must be forwarded through the annual integrated planning process, it is nonetheless important that each long term institutional plan establish clear linkages to the college’s Strategic Plan, particularly as the latter has more recently been refined for assessment purposes (2.24). To this end:

- The Technology Master Plan 2011-2021 (2.25) has been updated as a re-draft to ensure explicit alignment with the Strategic Plan (2.26, 2.27).
- The funding priorities in the Foundation’s Funding Plan 2012-2017 (2.28), previously tied directly to the six priorities of the Board of Trustees as written into the college’s Strategic Plan, will be linked further to the strategic goals with the assistance of the Advancement Council (2.29).
- The Equal Employment Opportunity Plan (2.30) - developed in accordance with Title 5 of the California Code of Regulations - must be reviewed by the EEO Advisory Committee in view of changes to Title 5, and to assist the district in achieving its strategic goals relating to diversity (2.31, 2.32).
- The draft Continuous Improvement (CI) Plan 2013-2018 describes the alignment between specific CI processes and goals in the Strategic Plan, whereby each of the 11 goals is supported by at least one CI process (2.33); the draft CI Plan is being developed and vetted in accordance with a multi-step timeline and planning process (2.34), and will be presented as an information item at the College Planning Council’s meeting on February 19, 2014 (2.35).
- Development of the (new) Facilities Master Plan represents an opportunity to incorporate future space needs into the strategic planning process (2.36); the consultants are following a schedule and work plan (2.37), and gathering responses to needs assessment questions (2.38, 2.39).

In sum, three key activities have been identified as instrumental to linking the college’s long term plans to the planning process:

- Establishing appropriate linkage between each long term plan and the college’s Strategic Plan. The primary mechanism for accomplishing this is explicit clarification concerning which priorities and goals in the strategic plan are supported by the long term plan.
- Charting the steps in developing and/or refining each plan. The steps should include finalization of the plan and review by governance councils as needed.
- Budgeting and rollout activities as may be sequenced in the plan through the annual integrated planning process that all designated programs, services and offices must follow for the purpose of obtaining funding for requests. This requires a planning horizon of 15 to 18 months in advance of the fiscal year during which activities are to commence.

**Communication of Planning Process Outcomes to College Constituents**

Communication of important outcomes are being communicated in various ways. The superintendent/president began reporting regularly in AY 2013-14 on highlights of meetings of the Board of Trustees, including planning related actions taken by the Board (2.40). Minutes for governance council meetings are posted on the college website (2.41). Decisions by the
President’s Executive Cabinet regarding funding requests made within the operating year are communicated by the VPAS to the College Planning Council (2.35).

Strategic decisions and other key outcomes will be more systematically communicated by the superintendent/president in partial fulfillment of a continuous improvement process that is currently being developed to govern internal and external communications (2.42). Methods of communication will regularly include one or more of the following:

- President’s weekly report
- President’s periodic addresses to the college
- President’s video to staff and students
- President’s Corner postings on the college website
- President’s emails to staff and students

**Linkage between Budget Planning/Resource Allocation and Financial Projections**

Hartnell College has refined its financial planning and development process to demonstrate the linkage between resource allocation and institutional planning. Financial projections are built on this linkage. A three year financial projections worksheet was created in FY 2012 and designed for “what if” scenarios (2.43). This tool has been used in preparing PowerPoint presentations shared with the college community (2.44). The worksheet provides summary financial projections consolidating all departments and divisions.

The planning process follows a budget calendar designed to move forward all requested resources through the review process in a timely manner (2.16), (2.20), (2.22). Budget worksheets provided to Deans and VPs provide current year budget, current year activity to date, and prior year actuals (2.45).

**Next Steps**

Starting in late spring 2014, the dean of institutional planning and effectiveness will ensure finalization of, and institute and/or oversee, continuous improvement processes designed to ensure linkages between:

- Program planning and assessment and the new governance model.
- The new governance model and budget development and funding decisions.
- Program planning and assessment and budget development, funding decisions and resource allocation.
- Program planning and assessment and improvement in student learning and achievement and service outcomes.

The dean of institutional planning and effectiveness will ensure that all long term institutional plans identified in FY 2013-14 are updated or drafted to encompass explicit linkages to the college’s strategic priorities and goals, and are subsequently reviewed by appropriate governance councils by December 2014.

The dean of institutional planning and effectiveness will work with the communications director
and superintendent/president in finalizing the continuous improvement process on internal and external communications by June 2014.

**Conclusion**

Partially completed.

**Supporting Evidence/Documentation**

2.1 *Minutes for College Planning Council Meeting November 6, 2013*
2.2 *Highlights of Board of Trustees Meeting February 4, 2014*
2.3 *District Mission, Vision & Values Statements*
2.4 *Agenda Item for Board of Trustees Meeting April 2, 2013 - Curriculum Committee Actions*
2.5 *Agenda Item for Board of Trustees Meeting July 2, 2013 - Present Refinancing Opportunity*
2.6 *Grant Concept Review Form Template*
2.7 *Minutes for College Planning Council February 5, 2014*
2.8 *Annual Program Planning & Assessment - Components of Continuous Improvement*
2.9 *Governance & Planning Model*
2.10 *Academic Affairs Council Handbook*
2.11 *Administrative Services Council Handbook*
2.12 *Advancement Council Handbook*
2.13 *Student Affairs Council Handbook*
2.14 *Technology Development Council Handbook*
2.15 *College Planning Council Handbook*
2.16 *Budget Development & Funding Decision Processes*
2.17 *Timeline for 2013 PPA Process*
2.18 *2013-14 Master Meeting Calendar*
2.19 *Academic & Governance Calendar*
2.20 *Budget Development Calendar FY 2014-15*
2.21 *Timeline for 2014 PPA Process*
2.22 *Annual Budget Development Calendar*
2.23 *Strategic Plan 2013-2018*
2.24 *Strategic Plan 2013-2018 Refined February 11, 2014*
2.25 *Technology Master Plan 2011-2021*
2.26 *Agenda for Technology Development Council Meeting January 29, 2014*
2.27 *Draft Technology Plan 2011-2018*
2.28 *Summary of Foundation Funding Plan 2012-2017*
2.29 *Minutes for Advancement Council Meeting December 19, 2013*
2.30 *Equal Employment Opportunity Plan*
2.31 *Development, Approval & Revision of EEO Plan*
2.32 *EEO Advisory Committee Handbook*
2.33 *Draft Continuous Improvement Plan 2013-2018*
2.34 *Timeline for Development of Continuous Improvement Plan*
2.35 Agenda for College Planning Council Meeting February 19, 2014
2.36 Minutes for Facilities Development Council Meeting January 28, 2014
2.37 Schedule & Work Plan for Facilities Master Plan
2.38 Facilities Needs Assessment Questionnaire - Administration Offices
2.39 Facilities Needs Assessment Questionnaire - Services
2.40 Highlights of Meetings of the Board of Trustees: http://www.hartnell.edu/board/
2.41 Minutes for Governance Council Meetings
2.42 Agenda for President’s Executive Cabinet Meeting February 4, 2014
2.43 Projection worksheet
2.44 PowerPoint Presentation
2.45 Budget worksheets
**Recommendation 3**

As previously noted in Recommendation 3 in the 2007 Comprehensive Team Report and in order to meet the standards, the team recommends that the college develop a regular systematic process for assessing its long term and annual plans, as well as its planning process, to facilitate continuous sustainable institutional improvement. The team further recommends that the college systematically review effectiveness of its evaluation mechanisms. (Standards I.B.6; I.B.7)

**Resolution and Analysis**

As stated in the response to Recommendation 2, subsequent to several years during which the institutional research function was staffed by one person, and after an interim dean was appointed for a period that lasted several months in 2012-13, a permanent dean was hired in September 2013 and reports directly to the Superintendent/President. Establishing this office and deanship with the title “planning and effectiveness” has resulted in new foci on integrated planning and institutional effectiveness (3.1). This response highlights institutional effectiveness and sustainable continuous improvement.

**Systematic Review of Effectiveness of Evaluation Mechanisms**

In fall 2013, the dean of institutional planning and effectiveness conducted a systematic review of the college’s evaluation and assessment mechanisms relative to: (a) which mechanisms/processes were currently in place; (b) how frequently relevant elements were scheduled to be evaluated per the existing evaluation cycle; (c) whether a complete master list of elements existed; and (d) to what extent all elements in that inventory had recently been evaluated. It was determined that the college had 17 formalized evaluation mechanisms. A review showed varied weaknesses and challenges, such as irregularity of evaluation cycles, incomplete or non-comprehensive master lists, and inconsistent or irregular evaluation of specific elements (3.2).

More fundamentally, it was determined that certain key continuous improvement processes either did not exist or were not explicitly documented. Subsequent grouping of the existing mechanisms into 5 categories - organizational effectiveness, effectiveness of strategic planning, effectiveness of strategic operations, processes for employee hiring and job classification, and performance evaluation procedures - pointed to the limited usefulness of the then existing array of evaluative practices, particularly within the categories of organizational effectiveness, effectiveness of strategic planning, and effectiveness of strategic operations. Documenting the need for improvement in various critical institutional areas, deciding how improvement might best be accomplished, and determining whether improvement was later accomplished were all hampered by the relatively narrow range of existing evaluation mechanisms, the lack of fully developed evaluation processes, and the checkered history of their application at the college.
Design of Framework for Institutional Effectiveness & Creation of Continuous Improvement Plan

The aforementioned empirical findings and analysis led to the decision to create a structured system of evaluation procedures, based on the identification of all key institutional continuous improvement processes as the starting point for aligning evaluation mechanisms over the timeframe of the newly developed Strategic Plan (2013-2018). The processes have been developed utilizing a template that speaks to four areas with sub-components, including: (a) the continuous improvement process, cycle and process lead; (b) participants, tasks and evidence in the evaluation process; (c) participants, tasks and evidence in making improvements in effectiveness; and (d) participants, tasks and evidence in making improvements in process effectiveness. Designing this approach to cultivating institutional effectiveness is a detailed work in progress that currently encompasses a framework of the 5 continuous improvement categories delineated above and represents 30 total processes, nearly doubling the number previously in place (17): organizational effectiveness (5), effectiveness of strategic planning (7), effectiveness of strategic operations (6), processes for employee hiring and job classification (5), and performance evaluation procedures (7) (3.3). Of these, 13 processes were determined to be especially critical to develop/further develop in the near term, as they relate directly to the accreditation recommendations requiring deficiency resolution in this follow-up report (Recommendations 2, 3, 4 and 12):

Organizational Effectiveness
Board Policies & Administrative Procedures
Organizational Structure
Governance System
Organizational Climate

Effectiveness of Strategic Planning
Mission, Vision & Values Development, Review & Revision
Community Research & Environmental Scanning
Strategic Plan Development, Review & Revision
Long Term Institutional Plans - Development, Review & Revision
Comprehensive Program Review

Effectiveness of Strategic Operations
Annual Program Planning & Assessment
Annual SLO Assessment
Budget Development & Resource Allocation

Performance Evaluation Procedures
Board Evaluation

Drafts of the above processes have been completed (3.4 through 3.16); these processes are in various stages of execution/planned implementation. All finalized templates will be included in a
handbook of continuous improvement processes.

More broadly, a Continuous Improvement Plan has been drafted as one of the institution’s long term plans; this plan highlights the ongoing efforts that the college intends to devote to institutional effectiveness moving forward (3.17). The draft Continuous Improvement Plan is scheduled to be presented to the College Planning Council at its February 19 meeting (3.18). The handbook of all 30 continuous improvement processes will accompany, and therefore be integral to, this plan. The goal is to implement all evaluation processes starting in FY 2014-15, according to their specific cycle, and thereafter through expiration of the Strategic Plan in spring 2018. Many of these evaluation processes are already being implemented. Via systematic and consistent application of each continuous improvement process as overseen by the appropriate senior level administrator(s) and/or other leader(s), the college commits to sustainable continuous quality improvement throughout the institution, and endeavors to become a role model for other colleges in this regard.

**Development of Systematic Process for Assessing Long Term Plans**

The college has developed a regular systematic process for assessing its long term plans. While each plan may ultimately require an individualized approach to the extent that key evaluation criteria differ according to plan content, the generic process is documented in a continuous improvement process focused on the review and revision of long term institutional plans (3.11). The generic process will consist of an assessment of plan implementation over the previous year, along with an evaluation of progress made toward longer term goals. Because all institutional plans must be aligned with the college’s Strategic Plan, a separate continuous improvement process was developed for its annual review (3.10), which will encompass an assessment of goals, outcomes, and key performance indicators (KPIs).

A critical step prior to implementing a process for assessing long term plans was to identify which plans of the college are considered to be “long term institutional” plans. For this purpose, as stated in the response to Recommendation 2, “long term” is interpreted as multiple years, toward the ideal that a plan parallels the same years or similar period as the Strategic Plan - 2013 through 2018, and “institutional” is interpreted as having an impact throughout the college or across all divisions. The following six plans were identified as long term institutional plans in FY 2013-14; they are listed in chronological order according to their development and approval status.

<table>
<thead>
<tr>
<th>Title of Plan</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Technology Master Plan 2011-2021</td>
<td>Established 2011</td>
</tr>
<tr>
<td>2. Foundation Funding Plan 2012-2017</td>
<td>Established 2012</td>
</tr>
<tr>
<td>4. Strategic Plan 2013-2018</td>
<td>Approved by Board 10/1/13</td>
</tr>
<tr>
<td>6. Facilities Master Plan</td>
<td>To be drafted - target approval 10/14</td>
</tr>
</tbody>
</table>
Evaluation of implementation of the Foundation Funding Plan serves as an example of annual review of long term plans. Subsequent to FY 2012-13, effectiveness was evaluated by comparing funds raised in FY 2012-13 against the funding amounts established for the entire 2012-2017 period (3.19). Tracking outcomes and key performance indicators in the Strategic Plan serves as an example of an internal reporting template that has recently been developed to assist in evaluating plan implementation (3.20). This approach to tracking progress is critically important, as this plan encompasses 6 priorities, 11 goals, 38 outcomes, and 78 key performance indicators.

Moving forward, assessment of all long term plans, including the Strategic Plan, will occur in the summer following each previous fiscal year ending on June 30. Consisting of varied participative activities, the review process will include the lead administrator, the dean of institutional planning and effectiveness, the superintendent/president and/or cabinet, and the College Planning Council. Results across assessments of all long term plans will be reported to the Board in the fall at the same point in time to ensure that the college continues to make connections among the various plans, and that the Strategic Plan remains the guiding umbrella for all long term and annual plans through its expiration in spring 2018.

**Development of Systematic Process for Assessing Annual Plans**

The college has developed a comprehensive and systematic process for assessing annual plans consisting of both qualitative and quantitative indicators. Annual assessment includes completion of program planning and assessment (PPA) reports and submission of student learning or service area outcomes assessments. Continuous improvement processes have been developed and implemented for these interrelated assessments (3.13, 3.14). Faculty, staff and/or administrators in all designated programs, services, and offices (3.21) are responsible for completing an annual - and periodically, a comprehensive - review that requires responses to multiple evaluative items (3.22, 3.23). (Responses to Recommendations 4 and 9 provide details about student learning outcomes assessment and program review, respectively.)

**Development of Systematic Process for Assessing the Planning Process**

The college has developed a comprehensive and systematic process for evaluating the integrated planning process on an annual basis. As integrated planning is complex due to the fact that it encompasses long term institutional planning, annual program planning, governance, budget development, and other processes (3.6, 3.8, 3.10, 3.11, 3.12, 3.13, 3.14, 3.15), assessment of implementation across these relevant continuous improvement processes provides a broad spectrum of criteria for the purpose of conducting an overall evaluation. The key features of integrated planning have been charted to display an overview of continuous improvement that has occurred, and that is expected to occur, from 2010 through 2015 (3.24).

**Next Steps**

The dean of institutional planning and effectiveness will facilitate development and finalization of all continuous improvement processes, and include them in a handbook, by the end of FY 2013-14. The dean of institutional planning and effectiveness will finalize the college’s
Continuous Improvement Plan and present it to the College Planning Council for its review by September 2014.

Lead administrators and other college leaders will implement all continuous improvement processes as appropriate for the evaluation cycle starting July 1, 2014.

Lead administrators will assess all long term institutional plans by August 2014, submit these evaluations to the College Planning Council for its review by October 2014, and subsequently to the Board of Trustees by December 2014.

**Conclusion**

Partially completed.
Supporting Evidence/Documentation

3.1 Organizational Chart - Direct Reports to the Superintendent/President
3.2 Review of Evaluation Mechanisms - Fall 2013
3.3 Inventory of Continuous Improvement Processes
3.4 Board Policies & Administrative Procedures - Components of Continuous Improvement
3.5 Organizational Structure - Components of Continuous Improvement
3.6 Governance System - Components of Continuous Improvement
3.7 Organizational Climate - Components of Continuous Improvement
3.8 Mission, Vision & Values Development, Review & Revision - Components of Continuous Improvement
3.9 Community Research & Environmental Scanning - Components of Continuous Improvement
3.10 Strategic Plan Development, Review & Revision - Components of Continuous Improvement
3.11 Long Term Institutional Plans - Development, Review & Revision - Components of Continuous Improvement
3.12 Comprehensive Program Review - Components of Continuous Improvement
3.13 Annual Program Planning & Assessment - Components of Continuous Improvement
3.14 Annual SLO Assessment - Components of Continuous Improvement
3.15 Budget Development & Resource Allocation - Components of Continuous Improvement
3.16 Board Evaluation - Components of Continuous Improvement
3.17 Draft Continuous Improvement Plan 2013-2018
3.18 Agenda for CPC Meeting February 19, 2014
3.19 Funds Raised in FY 2012-13 for Foundation Funding Plan 2012-2017
3.20 Report Template for Strategic Plan Goal 4B - Outcome 4B3
3.21 Schedule of Annual and Comprehensive Reviews 2013-2018
3.22 Program Planning & Assessment Report Template for Academic Programs - Spring 2014
3.23 Program Planning & Assessment Report Template for Services, Offices & Non-Instructional Programs - Spring 2014
3.24 Continuous Improvement of Integrated Planning 2010-2015
Recommendation 4
As previously stated in Recommendation 4 by the 2007 Comprehensive Evaluation Team, to meet Eligibility Requirement 10, and in order to meet the Standards, the team recommends that the college fully engage 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 the outcomes.

The team further recommends that, in order to meet the standards, the College develop student learning outcomes and assessment that is ongoing, systematic, and used for continuous quality improvement, where student learning improvement in all disciplines is a visible priority in all practices and structures across the college.

The team further recommends that training be provided for all personnel in the development and assessment of learning outcomes at the course, program, institution and service levels.

The team further recommends that faculty teaching online be evaluated regularly and that assessment of student learning be measured regularly for online students. (Eligibility Requirement 10; 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).

Resolution and Analysis
In summer 2013, the college hired a dean of academic affairs, learning support and resources (LS&R) to help support and promote a campus environment that facilitates the achievement of student learning outcomes (SLOs) (4.1, 4.2). While outcome assessment is the responsibility of all staff, faculty, and administrators, the dean of academic affairs (LS&R) is responsible for coordinating assessment activities to ensure that outcome assessment at all levels is ongoing, systematic, and used for continuous quality improvement. In addition, faculty and staff are demonstrating that student learning improvement is a priority in all practices across the college, which is evidenced by increased meetings and discussion among colleagues regarding outcome development and assessment data (4.3, 4.4, 4.6, 4.32). The faculty recognize the importance of informing students of course-level outcomes and have included them on all course syllabi (4.59). The college has undergone a review process to ensure that SLOs appear on course syllabi and are those that appear in CurricUNET, the official repository of Hartnell’s curriculum (4.7). Faculty also reviewed the ACCJC training document that details the difference between student achievement data and SLO data (4.12).

In fall 2013, the SLO Committee renamed itself as the Outcomes & Assessment (O&A) Committee (4.8) and reevaluated its membership, purpose, and committee responsibilities. This new name and revised Outcomes & Assessment Handbook better reflects the role of the committee to support outcome development and assessment across the college (4.10). These changes were approved by the committee and by the Academic Senate (4.11). Hartnell further demonstrated its commitment to outcome assessment by creating and filling a formal faculty...
O&A coordinator position that includes the role of committee chair (4.9). While the coordinator’s responsibilities have been performed for many years by the SLO chair, the faculty in this newly created position reports to the dean of academic affairs (LS&R), thus creating a stronger infrastructure to support assessment activities. This faculty coordinator continues to work with faculty and staff in outcome development and assessment in both instructional and non-instructional areas.

**Course- and Program-Outcomes**

To effect a climate that endorses and participates in assessment and continuous improvement, the earlier process of alignment of course outcomes to program outcomes that began in 2010 was revised. In September 2013, the O&A coordinator and dean of academic affairs (LS&R) created an O&A Action Plan with timelines to systematically continue and sustain assessment and improvement activities across campus (4.13). Information regarding tasks and timelines was disseminated to faculty and administration to begin Phase I of the plan: ensuring the accuracy of outcomes and aligning course-level outcomes to program-level outcomes (4.14). The faculty have now completed mapping their course-level outcomes to their program-level outcomes.

The college recognizes that the assessment process must be ongoing and continuous to improve teaching and learning. As a result, faculty developed a calendar (Phase II) to outline a course assessment plan spanning a five-year period, thus indicating projected timelines for assessment (4.15, 4.16). This calendar will help to facilitate consistent course assessment by full-time and adjunct faculty. The calendar will be reexamined during 2014 to determine if adjustments need to be made (4.16).

The O&A coordinator and dean of academic affairs (LS&R) have met with faculty (individually and in group sessions) on the main campus and Alisal Campus to review SLOs and assessments at the course, program, and institutional levels throughout the fall 2013 semester (4.18). Workshops have been held on both campuses to ensure that outcome assessment at the course- and program-level are occurring and to provide faculty with the resources they need to authentically assess outcomes, analyze data, and develop interventions that lead to improvement in student learning (4.14, 4.15, 4.19).

Evidence shows that outcome assessment is occurring on an ongoing basis; course- and program-summary documents are currently being housed on and are available on the college computer network (R: Drive). To improve documentation of assessment results, the Course-Level Outcome Assessment Summary Report that was first developed in fall 2011 was revised to better prompt faculty to provide their minimum expectation and their achievement standard (criteria) along with the method of assessment. The revision more clearly encourages discussion among discipline faculty (4.23).

To facilitate improved assessment tracking and use, the college has purchased eLumen software; Colleague data as well as all outcome and assessment data will be uploaded to that software in spring 2014, with full campus-wide implementation in fall 2014 (4.20). The O&A coordinator,
dean of academic affairs (LS&R), and the vice president of information and technology resources are collaborating with eLumen; meetings began in December 2013, and an eLumen implementation planning document was created in January 2014 (4.21, 4.22). This purchasing decision was made after significant product review and discussion by the O&A Committee, the O&A chair, and the vice president of information and technology resources, resulting in the creation of a side-by-side comparison document to objectively measure the best product to meet our needs (4.28, 4.53).

All courses offered in fall 2013 were assessed, with the exception of those assessed in previous semesters. To support this endeavor, on November 22, 2013, assessment workshops were held on both the Main Campus and Alisal Campus; over 60 full-time and adjunct faculty attended. Faculty were able to discuss outcomes, assessment methods, criteria, tools used for assessment, and evaluation of assessment results (4.45, 4.57, 4.58). To ensure that faculty report their assessment activities in a consistent manner, area deans asked for course-level assessment documentation during faculty meetings with area deans held on December 6, 2013. At these meetings, deans and faculty had opportunities to discuss assessment elements and to ask questions of the deans and of one another (4.25). The follow-up activities regarding course- and program-level assessments were on January 17, 2014, when full-time and adjunct faculty again met to analyze their aggregated course data, which was also used in program-level outcome assessment (4.19, 4.24). To underscore the importance of this activity, these meetings were mandatory for all faculty, and a stipend was provided for adjuncts to participate. During the Third Annual Student Success Conference in January 2014, most adjunct and full-time faculty either agreed or strongly agreed that “Today’s activities provided a good opportunity for discussion with discipline/related discipline discussion about SLOs and PLOs”; however, faculty did indicate the need for more training on outcome assessment (4.27).

The percentage of courses offered that have been assessed has increased from the 57 percent reported on the College Status Report on SLO Implementation in March 2013 (4.47) to 71 percent (4.48). Faculty have engaged in broad-based discussion to examine results, to discuss potential modifications, and to use course-level assessment data to assess at least one program-level outcome (4.26). Program-level assessment data is being reported on a newly designed template (4.30) similar to one referenced in the ACCJC’s Summer 2013 newsletter (4.29). The College is pleased to report that over 75 percent of programs have been assessed; results of assessments are included in the Program-Level Assessment Summary Forms (4.30). However, analysis of compliance suggests that programs that were not assessed are those that lack full-time faculty. This issue has been addressed with solutions determined to ensure that all programs will be assessed or removed from active status (4.46).

The O&A Committee examined the current SLO website for Hartnell to determine how outcome and assessment information and analysis could be made more readily available to faculty, staff, students, and the community. The Committee evaluated other college websites, identifying features that could be incorporated into Hartnell’s SLO webpage to enhance the existing website. Changes to the current webpage are under way.
Core Competency (Institutional Outcomes) Assessments

Hartnell College has assessed five of our six core competencies; by Spring 2014, all six will have been assessed using a combination of tools that represent both direct and indirect measures. By June 2014, the College will have conducted multiple assessments of five of the six core competencies. Data from interventions are collected and evaluated; other methods to assess and improve student learning are also explored.

Since 2008, the College has engaged in three “rounds” of authentic assessment of the Communication Skills Core Competency by scoring student work using a rubric developed and approved by the SLO Committee. Through these iterations of assessment, modifications have been made to improve the process including changes made to rubrics and the criteria used to determine student work to be assessed (4.34, 4.55, 4.56). After the third round of assessment was completed, broad-based discussion resulted in the development of the College’s third web-based, self-service research tool, Persistence and Success for C Students (4.36). This tool is available on the College’s website and is currently used by faculty.

Another result of these assessments was the purchase of turnitin.com. As was explained to faculty in an e-mail invitation to the first turnitin.com workshop,

> The workshop will give you an overview of turnitin, a web-based product designed to help you manage your students' writing assignments. Originally designed as a method for testing for plagiarism by testing student papers against a huge database, it now includes systems for online grading and online peer review for students. It is designed to help students learn to write better and to understand how to write original work, including proper citations (4.37).

Students in disciplines across the campus (Biology, Early Childhood Education, Administration of Justice, Computer Science, ESL, Health, Business, Economics, Psychology, and Respiratory Care Practitioner) have demonstrated improvement in their writing and information competency skills by using feedback from turnitin.com and their instructors. As evidenced in the table below, the number of students using turnitin.com has doubled from Fall 2012 through Fall 2013. Our data show that student work having “No Match” or “0-24%” in the Similarity Index has improved from 22.9 percent to 25 percent and from 60.4 percent to 63.1 percent in just three semesters. It is interesting to note that in Fall 2012 when students began submitting documents in turnitin.com, 83.3 percent of student work was categorized in “No Match” or “0-24%” in the Similarity Index; just three semesters later, the percentage improved to 88.1 percent.
In Spring 2013, the College’s Student Success Committee (SSC), in recognition of the need for improvement in students’ written communication skills, approved Basic Skills Initiative funding for faculty to participate in Reading Apprenticeship activities sponsored by the California Community College Success Network (3CSN). Funding was also provided by the College’s Title V STEM grant as well as through the award of scholarships by 3CSN. The decision to take part in Reading Apprenticeship training was also based on the realization that all faculty had to participate in strengthening students’ writing and reading skills. According to research presented on the WestEd site, “data and observations collected from over 200 community college instructors over the past five years, Reading Apprenticeship has been seen to have the following impact on student success: Increased retention and course completion, increased depth in reading comprehension and written work, and increased willingness to persist through difficult texts (4.38, 4.39, 4.40).” Over fifty Hartnell faculty have participated in Reading Apprenticeship workshops, an online course, the Reading Apprenticeship Leadership Community of Practice (LCoP) and faculty inquiry groups. The SSC is recruiting faculty to continue or begin engaging in Reading Apprenticeship strategies in their classes.

In June 2012, a graduate survey for core competency assessment (focusing on the Global Awareness, Aesthetic Appreciation, and Personal Growth Core Competencies) was administered during graduation rehearsal. Approximately 280 surveys were completed (4.41). A second assessment of these Core Competencies, including Critical Thinking and Problem Solving, will be included as supplemental questions as part of the Center for Community College Student Engagement (CCSSE) survey that will be administered to Hartnell students in Spring 2014. These supplemental questions will be asked of students participating in the Spring 2014 Graduation Rehearsal as well. The 14 questions were reviewed and selected by the Outcomes &

<table>
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<tr>
<th>Term</th>
<th>Instructors</th>
<th>Students</th>
<th>Reports</th>
<th>75-100%</th>
<th>50-74%</th>
<th>25-49%</th>
<th>0-24%</th>
<th>No Match</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 2012</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>8/12 to 12/12</td>
<td>29</td>
<td>883</td>
<td>2,037</td>
<td>52</td>
<td>37</td>
<td>178</td>
<td>1,231</td>
<td>467</td>
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<tr>
<td>Percentages</td>
<td></td>
<td></td>
<td></td>
<td>2.6%</td>
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<td>Spring 2013</td>
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<td>1/13 to 6/13</td>
<td>59</td>
<td>1,897</td>
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<td>98</td>
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<td>1,209</td>
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<tr>
<td>Percentages</td>
<td></td>
<td></td>
<td></td>
<td>2.6%</td>
<td>2.2%</td>
<td>6.3%</td>
<td>56.9%</td>
<td>31.9%</td>
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<tr>
<td>Fall 2013</td>
<td></td>
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<td></td>
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</tr>
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<td>8/13 to 12/13</td>
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<td>1,734</td>
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<td>380</td>
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<tr>
<td>Percentages</td>
<td></td>
<td></td>
<td></td>
<td>1.7%</td>
<td>1.7%</td>
<td>8.5%</td>
<td>63.1%</td>
<td>25.0%</td>
</tr>
<tr>
<td>Since Inception</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>(also includes summer)</td>
<td>73</td>
<td>3,375</td>
<td>10,687</td>
<td>244</td>
<td>208</td>
<td>870</td>
<td>6,509</td>
<td>2,856</td>
</tr>
<tr>
<td>Percentages</td>
<td></td>
<td></td>
<td></td>
<td>2.3%</td>
<td>1.9%</td>
<td>8.1%</td>
<td>60.9%</td>
<td>26.7%</td>
</tr>
</tbody>
</table>
Assessment Committee from supplemental questions provided by CCSSE and then further reviewed and modified during several meetings among the Dean of Institutional Planning and Effectiveness, the Dean of Academic Affairs (LS&R), and the O&A Coordinator (4.42).

**Service Area Outcomes**
All non-instructional areas have completed at least one Hartnell College Service Area Outcomes (SAO) Assessment Plan and Summary Form, which identifies area outcomes, indicates criteria, tool/s for assessment and procedures, reflects assessment results, and outlines refinements or modifications to improve processes, satisfaction, or student learning. (4.31). Additional resources have been developed and reviewed to ensure that instructional and non-instructional staff have guidelines for developing and assessing outcomes at the course, program, institution, and service levels to ensure a systematic process. (4.32). For example, A Service Area Outcomes and Assessment Guide [SAO Guide] is available to assist in the development and assessment of outcomes for non-instructional areas (4.33). SAOs have been developed for all non-instructional areas on campus; assessment of these outcomes has either taken place or is scheduled to be completed in spring 2014. Outcomes will be assessed on a semester or yearly basis. The frequency of reassessment will be determined on the attainment of expected results (4.32). SAOs are aligned to the College’s strategic priorities.

**Distance Education (DE)**
All faculty teaching online courses will be evaluated according to the HARTNELL COMMUNITY COLLEGE DISTRICT AGREEMENT WITH HCFA/CTA/NEA, 2013-16. The same standards of quality for face-to-face evaluation are applied to DE evaluation. Evaluation of faculty is governed by extensive procedures contained in articles 13 (tenured faculty) (4.61), 14 (probationary faculty) (4.62), and 21 (adjunct faculty) (4.63) of the collective bargaining agreement between the faculty association and the District.

The components of the evaluation process for faculty teaching online and face-to-face are identical; however, because of the nature of the online environment, observations of faculty teaching distance education courses is as follows:

The evaluator will evaluate one learning unit of the course, which should be roughly equivalent to the material that would be covered in no more than one week of class. Access would include all materials posted by the instructor and discussion thread posts by both the instructor and students for that learning unit. Access will also include access to documents that apply to the entire course and are outside the unit, including: syllabus, class policies, required class activities, exams, and any current announcements posted for the course (4.64).

To be consistent with materials for face-to-face courses, online course materials are expected to have identical SLOs to the face-to-face course, which is detailed in both the course outline of record file in CurricUNET and course syllabi.
Next Steps
Assessments at all levels will continue to be conducted and evaluated on an on-going basis. The assessment processes will be reviewed and modified as needed.

Staff in non-instructional areas have developed and assessed outcomes and will continue the routine of assessment on a continuous basis.

The College administration will continue to reinforce the concept of “continuous quality improvement, where student learning improvement in all disciplines is a visible priority in all practices and structures across the college” and to ensure that activities that encourage broad-based discussion are scheduled and well-attended to achieve this goal.

To sustain this climate of assessment and improvement, workshops addressing assessment and forums for discussion and analysis will be regularly scheduled and ongoing. To ensure that learning be measured regularly for online students, the following goals have been identified by the DE Committee in its 2013 planning document (4.60):

- Implement a student survey evaluating the effectiveness of DE course design, materials, and technological support;
- Define a process for regular reviewing of student survey results and developing recommendations for improvement.

Conclusion
Partially completed.
Supporting Evidence/Documentation

4.1 Dean of Academic Affairs, (LS&R) job description
4.2 Hartnell College Academic Affairs Division Organization Chart
4.3 SLO Discussion Evidence
4.4 Course-level Assessment Summary Reports
4.6 Program-Level Assessment Summary Reports
4.7 SLO-CurricUNET Comparison (samples)
4.8 O&A Minutes (Name Change Approval/Handbook)
4.9 O&A Coordinator Job Description
4.10 O&A Handbook
4.11 O&A Minutes and Senate Minutes (Approval of O&A Handbook)
4.12 ACCJC Training Document
4.13 O&A Action Plan
4.14 Instructions for SLO Form Phase I
4.15 Instructions for SLO Form Phase II
4.16 BIO-SLO-PLO Mapping and Calendar
4.18 PowerPoint Presentation (SLOs and Assessment and That Loop!)
4.19 Assessment Workshop e-mail to faculty
4.20 eLumen-Hartnell Client Agreement
4.21 eLumen Implementation Plan
4.22 eLumen Planning Meeting
4.23 Course-Level Outcome Assessment Summary Report
4.24 Assessment Workshop (Attendees 11-22-2013)
4.25 Plan to Assess Course SLOs for Fall 2013, Mandatory Assessment Meetings Schedule
4.26 Third Annual Student Success Conference (Day 2) Agenda
4.27 Third Annual Student Success Conference (Day 2) Survey Results
4.28 SLO Management-Assessment Software - Side by Side Comparison
4.29 ACCJC Newsletter, Summer 2013
4.30 Program-Level Assessment Summary Example
4.31 Hartnell College Service Area Outcomes Assessment Plan and Summary Form (blank)
4.32 Hartnell College Service Area Outcomes Assessment Plan and Summary Forms
4.33 SAO Guide
4.34 Communication Skills Assessment Results
4.36 Persistence and Success for C Students Tool
4.37 Faculty e-mail Turnitin Workshops, 9/6/12
4.38 RA Workshop Participants
4.39 Faculty e-mail RA
4.40 Faculty e-mail RA (follow-up)
4.41 Core Competency Survey Results
4.42 CCSSE Supplemental Questions – S14
4.45 Checklist for SLO-PLO Assessments
4.46 Program Planning and Course Learning Outcome Assessment
4.47 College Status Report on SLO Implementation in March 2013
4.48 Colleague-Cognos Data
4.53 SLO Management-Assessment Software - Side by Side Comparison (e-mail)
4.55 Information Skills Rubric
4.56 Communication Skills Core Competency Rubric
4.57 Help Guide for Using the Course Level Outcome Assessment Report Form
4.58 BUS 50, SLO 1 Example
4.59 Syllabi Folder
4.60 Goals from 2013 DE Plan
4.61 Article 13 of HCFA Contract
4.62 Article 14 of HCFA Contract
4.63 Article 21B of HCFA Contract
4.64 HCFA Appendix DE 2013
Recommendation 5

In order to meet the Standard, the team recommends the college create an evaluation and assessment process for the library and support services that is integrated with the college’s program review processes, and that includes an assessment of the process for integrating library acquisitions into circulation in a timely manner and how the needs for staffing, maintenance, and technology support are addressed. The team further recommends that the College create a process to evaluate the impact of minimal library and learning support services at the King City Education Center and Alisal Campus to ensure the sufficient availability of library and support services, including better up-to-date counseling online. (Standards II.B.1; II.B.3; II.B.3.a,c,d,e,f; II.B.4; II.C;II.C.1; II.C.1.a; II.C.1.c.)

Resolution and Analysis

The library participated in the college-wide program planning and assessment (PPA) process and completed a comprehensive PPA report for 2013-14, with input from all library staff, including part-time librarians. These integrated processes allow the library’s identified needs for staff, maintenance, technology, and other resources to be considered along with the needs identified across the campus. Moreover, a librarian regularly participates on the college’s Outcomes & Assessment Committee to ensure greater integration. In the 2013-14 cycle of review, library needs for staffing, technology, and other resources that aligned with the library’s service area outcomes were identified, and evidence supporting the need for increased staffing was provided (5.8). Library staff meets regularly to discuss planning, and continues to assess services (5.2).

Integrated into the college-wide program planning and assessment process is an evaluation and assessment plan for library and support services. Among the services evaluated during the summer of 2013 was the cataloging backlog in Technical Services. As a result of the assessment, the backlog was reduced by 50 percent during the summer, and by the end of the fall 2013 semester, the backlog was eliminated entirely. The library staff also undertook an assessment of processes and procedures to keep the cataloging process up-to-date so that newly processed library materials reach patrons in a timely manner. Among the solutions we are exploring are to allocate more staff time to the technical services area of the library, to research and identify methods to improve workflow to increase efficiency, and to develop processes to begin receiving pre-processed books from our library jobber (5.1). These actions are expected to result in greater efficiencies so that library materials will be available to students much closer in time to when they are received by the library. Library staff will review new processes in fall 2014.

To evaluate the impact of particular levels of library and learning support services at the different campuses, deans from the main campus, the King City Education Center, and the Alisal Campus have met to create service area outcomes, to design an assessment tool for those outcomes, and to establish evaluation criteria. The first step the deans undertook was to establish a baseline assessment so that they could formulate necessary intervention strategies, and measure
improvements over the baseline assessment. The outcomes were created and assessed in fall 2013.

First, a student satisfaction outcome was developed to determine if students feel that they have adequate access to library and learning support services at the King City Education Center and Alisal Campus:

Students and faculty of the King City Center will report that they have adequate access to library and learning support services.

Students and faculty of the Alisal Campus will report that they have adequate access to library and learning support services.

We adopted a criterion for assessment that a minimum of 50 percent of respondents would indicate they were satisfied or very satisfied with library and learning support services at the satellite sites.

Surveys (using Google Forms) were administered at all three campuses in October and November 2013 to measure this outcome, with 113 students responding at the Alisal Campus, 151 responses at the King City Center, and 407 responses at the Main Campus. Staff at all three sites helped recruit patrons/students to participate. (5.4, 5.5, 5.6, 5.7).

A summary of responses is below:

<table>
<thead>
<tr>
<th>Question</th>
<th>Main Campus</th>
<th>Alisal Campus</th>
<th>King City Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfied/Very Satisfied with existing library and learning support services?</td>
<td>90%</td>
<td>39%</td>
<td>34%</td>
</tr>
<tr>
<td>Satisfied/Very Satisfied with access to library services?</td>
<td>NA</td>
<td>66%</td>
<td>39%</td>
</tr>
<tr>
<td>Satisfied/Very Satisfied with access to tutorial services?</td>
<td>NA</td>
<td>46%</td>
<td>48%</td>
</tr>
<tr>
<td>Importance of library services and resources in Hartnell classes?*</td>
<td>97%</td>
<td>94%</td>
<td>89%</td>
</tr>
<tr>
<td>Importance of tutorial services in Hartnell classes?*</td>
<td>85%</td>
<td>78%</td>
<td>87%</td>
</tr>
</tbody>
</table>

*Results represent services are important or very important

The results from these surveys clearly indicate that students who attend the Main Campus are more satisfied with library and learning support services than those students who attend classes.
at our satellite locations, while most students at all sites deem those services to be important or very important.

In addition, a Library Service User Survey was given to 237 students from 10 classes at the King City Center during the period between September 17 and 26, 2013. Survey results revealed that most students were either somewhat satisfied (43 percent) or not satisfied (38 percent) with library services provided at the King City Center. Many students indicated that they needed the following services to be successful in their classes: two-hour textbook check-out (68 percent), access to reference materials/dictionaries (44 percent), and a reference librarian to talk to or call (29 percent). Students also indicated that they would like to have a quiet place to read or to study on that campus (53).

We already have begun to address these needs. To better meet the reference service needs of students at our satellite locations, we are implementing an “Ask a Librarian” feature by creating a generic email address (reference@hartnell.edu) for student questions, and a process for implementing this service that will provide reference assistance remotely. We are now developing a promotional strategy to publicize this, as well as other library services.

We also eliminated a barrier to the use of the library’s subscription services in the fall of 2013, when we dropped the requirement that a student register in person before gaining access to these resources.

Finally, we worked to provide some of the specific services that were requested in the initial survey of King City Center students. Thus, beginning in January 2014, the King City Center has dedicated space set aside for quiet study areas, and will have reserve textbooks and other printed materials available onsite, as well as expanded online research help. We installed a dividing wall in Room 209, which will allow students access to carrels with upgraded computers, and reading chairs to make the environment more conducive for quiet study. We will assess the impact of these interventions as we continue to strive for continuous improvement to meet all of our students’ needs.

With regard to the provision of online counseling services, Hartnell College provides an e-mail service for students who have counseling questions. Student questions can be sent to a specific counselor’s e-mail address and are responded to within 24 hours. Specific counselor’s email addresses are readily accessible to students in the counseling section of the Hartnell College website, as well as in the online college directory. These email addresses provide students with remote access to individual counselors.

In addition, Hartnell College will launch a new interactive online orientation program in May 2014 that will provide a comprehensive college orientation to prepare students to fully engage in all that Hartnell College has to offer, thereby increasing their prospects for success. As a result of this orientation—which will be required for all students unless they have completed a BA/BS or
AA/AS degree--the college expects that many of the current frequently asked counseling questions will be addressed by the online orientation.

Next Steps
The library has set institutional goals for its services, and staff have engaged in conversations to develop these goals. These goals will be reviewed and updated in spring 2014 if necessary. In addition, the library staff will collaborate with the staff at satellite sites to improve awareness of the library’s online databases and other resources that are equally accessible for all students, regardless of which campus they attend. To better inform students and faculty of the many online services the library has to offer, faculty have received an e-mail and flyer inviting them to take advantage of both online and face-to-face services and encourage their students to do so as well; faculty often post informational flyers in locations accessible to students (5.9, 5.10).

During the 2014 spring semester, a mixed model quantitative/qualitative survey will be issued to students who submitted questions online to a counselor. The survey will gauge the usefulness of the online counseling service and whether it was effective in answering their questions in preparing for college success. Results will be compiled in the following fall, and refinements and modifications to the online counseling service will be made by the department after the data have been collected and analyzed.

Conclusion
Partially completed.
Supporting Evidence/Documentation

5.1 New Process for Improved Technical Services Workflow
5.2 Library Services Outcomes Assessment Calendar
5.3 Student Survey KCC Library Services Narrative
5.4 Student Survey KCC Library Services Data
5.5 Main Campus Library Survey Analysis
5.6 King City Center Survey II Analysis
5.7 Alisal Campus Survey Analysis
5.8 Library Services PPA
5.9 Hartnell College e-mail Regarding reference@hartnell.edu
5.10 Hartnell College Flyer for Promotion of Library ServicesBoard of Trustees Meeting Agenda, May 9, 2014
Recommendation 6
In order to fully meet the standard, the team recommends that the college regularly evaluate the contracted library services outlined in the "Memorandum of Clarification" finalized in March 2013. (Standard II.C.1.e)

Resolution and Analysis
The college finalized a Memorandum of Clarification (MOC) with California State University at Monterey Bay, Gavilan College, and Monterey Peninsula College in March 2013 to continue to address the following needs: Voyager catalog database hosting and maintenance, Voyager modules, shared server costs, exit stipulations, and individual library responsibilities (6.1, 6.2).

During the week of January 27-31, 2014, Hartnell library staff undertook a review and evaluation of the Memorandum of Clarification among Hartnell College, California State University, Monterey Bay, Gavilan College, and Monterey Peninsula College libraries. Hartnell librarian Margaret Mayfield interviewed the responsible parties from these participating libraries and recorded their responses (6.3). Evaluation criteria included the quality of the service that CSUMB provides, technical issues relating to the Voyager/Ex Libris system, the costs of the system, any needs not being met by the system, and a “vote” to continue participation or not with the consortium.

All member libraries expressed satisfaction with, and a desire to remain in, the consortium as long as CSUMB continues to host Voyager. Member libraries did have some suggested enhancements (see recorded responses under “Explanation of unmet needs”).

The member/provider of services, CSUMB Library Director Bill Robnett, also was interviewed. He reported that the CSU libraries are now actively working towards a unified library system. Within two or fewer years, CSUMB most likely will be migrating to another integrated library system (6.4).

Hartnell librarians (systems/technology librarian, the technical services librarian, and reference librarians), Hartnell’s vice president of information and technology resources, and the library staff also provided their input, either through interview or the completion of an online survey (6.5). Generally, the staff expressed satisfaction with the CSUMB service and Voyager. Most did not have knowledge about the costs. But, one staff member labeled the system as “slow, archaic, not intuitive,” while another complained about the system timing out when not in use. Problems with Voyager were reported as occurring “once or twice a year.”

Next Steps
The MOC will be evaluated on an annual basis to include a review of the costs associated with the agreement, CSUMB service, Ex Libris issues, and needs that are not being met by the Voyager system. As can be seen on the library services assessment calendar, the Voyager Consortium MOC will be reevaluated in spring 2015 (6.6). In addition, the systems/technology
librarian will maintain close contact with other MOC representatives to monitor potential changes and issues, including the likelihood of CSUMB migrating to another integrated library system. Potential solutions for hosting the Voyager-based catalog or Hartnell's migration to a new integrated library system will be considered in the future.

The systems/technology librarian will continue to meet monthly with MOC members as part of the Monterey Bay Cooperative Library System (MOBAC) Technology Committee.

**Conclusion**
Completed.

**Supporting Evidence/Documentation**

   6.1 Memorandum of Clarification (signed)
   6.2 Voyager Consortia Meeting Minute
   6.3 MOC Member Survey (response)
   6.4 MOC Eval-Provider Survey
   6.5 Hartnell College Staff Survey (responses)
   6.6 Library Services Outcomes Assessment Calendar
Recommendation 7

In order to meet the standard, the team recommends that the college ensure that evaluation processes and criteria necessary to support the college's mission are in place and are regularly and consistently conducted for all employee groups.

The team further recommends that professional learning opportunities be formally and regularly offered to all employee groups to ensure equity in employee development opportunities.

The team further recommends that faculty and others responsible for learning have as a component of their evaluation effectiveness in producing those student learning outcomes. Use the results of employee evaluations as a basis for continuous improvement. (Standard III.A.1.b, c; III.A.2; III.A.3.a; III.A.5.a)

Resolution and Analysis

Comprehensive evaluation processes and criteria necessary to improve performance and support the college’s mission are in place and are regularly and consistently conducted for all employee groups. For faculty, those evaluations contain a component concerning the employee’s effectiveness in producing student learning outcomes. Evaluations of all staff are used as a basis for continuous improvement.

The college has created a representative committee to ensure that professional learning opportunities are formally and regularly offered to all employee groups, and that every employee has access to those development opportunities.

Manager Evaluations

A comprehensive evaluation process for administrators, managers, and supervisors was put in place during the spring of 2013, and was implemented for the 2012-13 evaluation period. This process, found in Administrative Procedure (AP) 7150 - Evaluation of Management Employees (Administrators, Managers, and Supervisors) (7.1), provides that management employees will undergo a comprehensive performance evaluation in each of their first two years of employment and every three years thereafter, and that goal-setting and assessment will be conducted annually. Additionally, the superintendent/president may initiate an evaluation at any time.

The comprehensive evaluation process includes several elements: a self-evaluation; a co-workers’ assessment that includes input from 10 to 15 peers, faculty, and staff; the supervisor’s assessment of performance; goal setting for the next year and assessment of progress toward previous goals; and a summary of the evaluation. The process is on an academic year cycle, with all evaluations scheduled to be completed and approved by the superintendent/president by June 30 of each year. The evaluation provides the basis for assessing and improving performance as it relates to the responsibilities of the particular position and the mission and goals of the District,
for making decisions on continued employment, and for making decisions on advancement on
the salary schedule.

This evaluation process, including the tools and timelines, was discussed with all managers at a
management meeting on April 3, 2013 (7.2), and this discussion was followed by an e-mail from
the president to all management employees that linked to BP 7150 and AP 7150 and requested
that all evaluations be concluded by June 30, 2013 (7.3). The Human Resources Office then
purchased its own license for a survey tool to be used in administering the co-worker survey
assessment, tested the tool, and then delivered the instructions and tools to all supervisors of
management employees by e-mail of April 18, 2013 (7.4). This e-mail provided a sample e-mail
for them to send to the management employees that they would evaluate.

Evaluations of all managers hired before the spring 2013 were completed using the processes
outlined in AP 7150 (7.5). The supervisors of management employees who were hired
subsequent to that period were e-mailed in early September to remind them to meet with their
new employees to complete the goal-setting part of the evaluation process so that their
evaluations at the end of the 2013-14 academic year can include an assessment of their work
toward achieving those goals (7.6). All of those goal-setting meetings were completed, including
meetings with two management employees who were appointed in December 2013 and in
January 2014 (7.5).

One of the four parts of the manager performance evaluations is the establishment of annual
goals for the upcoming period and the assessment of goal attainment for the previous period.
Even when management employees have progressed to a three-year evaluation cycle, the goal
setting and assessment part of the evaluation process is done on an annual basis. The purpose of
this annual cycle is to help the evaluation process serve as a basis for continual improvement.

The goal setting and assessment tool asks the management employee to identify at least three
goals, list the tasks involved in accomplishing the goal, set forth a timeline for completing the
goals, and list the achievement criteria to determine whether the goal has been met. At the end of
the cycle, both the employee and his or her supervisor assess the employee’s progress. At the
goal assessment meeting, the two begin the process anew for the next year.

**Classified Staff Evaluations**

Comprehensive evaluation processes and tools for all classified staff members are written into
their collective bargaining agreements or working conditions. For the CSEA member employees,
evaluation procedures and rules are contained in article 7 of the collective bargaining agreement
(7.7) and the evaluation form is appendix F (7.8). For the Local 39 (L39) member employees,
evaluation procedures and rules are contained in article 31 of the collective bargaining agreement
(7.9), and for confidential employees, working conditions provide that the evaluation is the basis
for decisions about the employee’s eligibility for annual salary increases (7.10). The evaluation
tools for CSEA (7.8), L39 (7.11), and confidential (7.12) employees are posted on the Human
Resources Office’s website (7.13).
The Human Resources Office is taking a more assertive role in notifying managers of the evaluations that will become due in their area, and providing assistance for managers in how to conduct those evaluations (7.14). As part of the onboarding process for new employees, managers of new employees are now sent an email within the first week of the new employee’s employment, with the calendar of due dates for all evaluations due, the evaluation instrument, and the article of the CBA governing evaluations (7.15). A webinar on “Managing Performance Through Evaluation” will be available to all supervisors, managers, and administrators in February 2014 (7.16). This webinar comes with an excellent set of written workbooks and other materials that will be used for providing refresher workshops and trainings to keep these skills sharp.

With limited exception, all performance evaluations of classified staff are up-to-date (7.17). The exceptions are that the evaluations of two employees who have been out on extended leave are pending, the evaluations of four employees in a unit whose supervisor came on board only in the fall will be done in February, as will the evaluation of one employee whose supervisor became a management employee in December.

All classified employee evaluations provide an opportunity for the employee and supervisor to identify goals for the next period and to create a plan of assistance to help them in achieving the goals of this plan (7.13). For L39 and confidential employees, the evaluation always requires the parties to identify these goals and create this plan of assistance for the next review period. For CSEA employees, the improvement plans are mandatory in only three situations: (1) the employee is probationary, (2) the supervisor is new, and (3) the employee received a rating of deficient in any category of performance. The improvement plan is discretionary in other instances, though managers are encouraged to use this tool for continuous improvement.

**Faculty Evaluations**

Evaluation of faculty is governed by extensive procedures contained in articles 13 (tenured faculty) (7.18), 14 (probationary faculty) (7.19), and 21 (adjunct faculty) (7.20) of the collective bargaining agreement between the faculty association and the District. Those procedures ensure that performance is linked to attainment of the college’s mission, and include evaluation of professional competence and conduct. Articles 13 and 14 are in negotiations in spring 2014, and article 21 was one of the articles negotiated in 2013.

**Full-time Faculty Evaluations**

Probationary faculty members undergo a comprehensive performance review in each of their first four years of employment (7.19). This evaluation includes a peer review, student appraisals, supervisor’s review, self-evaluation, and a review of the instructional materials and professional growth and activities reports filed by the faculty member under review. The peer and supervisor reviews include at least six worksite observations. Observation tools are modified for counseling and library faculty whose primary work is not done in a classroom setting. A process for observing distance education faculty was added in fall 2013 (7.21).
Follow-Up Report  
March 15, 2014

Article 14 includes a timeline for these annual reviews, which culminate in a post-evaluation conference involving the probationary faculty member, peer reviewer, and supervisor prior to December 10. All materials and recommendations from this review are forwarded to the college tenure review committee, which reviews recommendations for all probationary faculty and makes its own recommendations to the superintendent/president prior to the March meeting of the Board of Trustees.

Evaluations of all probationary faculty have been routinely conducted on a timely basis, without exception. Moreover, faculty who have been hired on a full-time temporary basis also participate in the probationary faculty evaluation process.

Tenured faculty undergo a comprehensive evaluation at least once every three years following the attainment of tenured status (7.18). This evaluation includes a peer review, student appraisals, supervisor’s review, self-evaluation, a review of the instructor’s classroom materials, and it includes review of a professional growth report and college-related activities report filed by the faculty member under review. The peer and supervisor reviews include at least one worksite observation each. Observation tools are modified for counseling and library faculty whose primary work is not done in a classroom setting. A process for observing distance education faculty was added in fall 2013.

Article 13 includes a timeline for these annual reviews, which begin with a notification to the faculty member before September 30, and culminate with a post-evaluation conference among the faculty member, peer reviewer, and supervisor before the end of the academic year. All evaluation reports are scheduled to be given to the faculty member prior to April 1.

These evaluations are routinely done on a timely basis, but during the last seven years, the faculty association and District have three times negotiated a side letter agreement or adopted a resolution to delay the evaluations of a small group of tenured faculty members for a year or a semester (7.22). Now that the District has been able to stabilize the administrative structure of the college, it does not anticipate allowing the delay of required periodic evaluations.

During the negotiations for a successor collective bargaining agreement between the faculty association and the District, the parties amended the definition of “Professional Competence” in the article on tenured faculty evaluations (Article 13) to include the following:

“a. Article 13 shall include as an element of “Professional Competence,” the following:
   i. Demonstrates knowledge of student learning outcomes
   ii. Has included Student Learning Outcomes on course syllabus
   iii. Provides evidence that the faculty member is using the assessment of SLOs to improve teaching and learning.” (7.18)
This amendment was accomplished in a separate MOU entered into on September 20, 2013, so that faculty who were scheduled for review during the 2013-14 academic year would have ample notice of the amendment (7.23). Negotiations will continue on both article 13 and 14, the article on probationary faculty evaluation into the spring. The parties anticipate adding a similar requirement to the evaluation of probationary faculty, to be effective in 2014-15.

The faculty evaluation process also is used as the basis for continual improvement. Every year, faculty must submit their reports of professional growth, and the college’s adoption of the flex calendar was to encourage that its faculty members were always engaged in growth and improvement activities.

**Adjunct Faculty Evaluations**

On September 20, 2013, the District and the HCFA signed an MOU making a newly created adjunct faculty evaluation process effective immediately (7.23). The vice presidents of academic affairs and of student affairs promptly held meetings with their deans to review the new process and to begin scheduling evaluations under the new process. In late fall, deans and tenured faculty members began performing evaluations under the new process.

On January 31, a training session for deans and full-time tenured faculty was scheduled to provide guidance on how to conduct observations and evaluations of adjunct faculty using the new process (7.24). The training was jointly conducted by the director for teaching, learning, and assessment at California State University Monterey Bay, Rebecca Rosenberg, and the chair of Hartnell’s Curriculum Committee, psychology instructor Carol Kimbrough (7.25).

All adjunct faculty are on schedule to be evaluated by the end of the spring semester 2014, and will be evaluated at least every six semesters thereafter (7.26).

**Professional Learning Opportunities**

The District announced the formation of a Professional Development Committee at the start of the 2013-14 school year (7.27). The committee began meeting in October, targeting the end of the fall semester to have a blueprint for professional development at Hartnell. All agendas, minutes, resources, and calendars for this committee are posted to the governance section of the college’s website (7.28).

The Committee’s charge is to (1) develop policies and procedures for assuring that all employees have access to professional development opportunities and resources, (2) develop, acquire, and arrange for programs of professional development for all employees, (3) develop criteria, procedures, and forms that assure that professional development funds are expended equitably and serve the college’s mission, values, and strategic priorities and plan, and (4) make recommendations on staff, student, and instructional improvement activities based on a comprehensive planning process that includes needs assessment and evaluation (7.29).
The committee has identified several components as essential for a professional development program:

1--Access to travel and training funds on an equal basis for all employees, tied to achievement of student success
2--incentives for all employees to develop innovative solutions to enhance student success
3--making training accessible for all, and making the Faculty Resource Center the physical home of that training
4--supporting activities that create a culture of learning and development, e.g., brown bags, book clubs, sponsoring campus-wide and community-wide events
5--creating a unified calendar of development opportunities.
6--creating a first-year program for all new employees that includes orientation to community colleges, community college students, and Hartnell specifically (including its culture of learning) (7.30).

The committee has distributed a survey to assess interests and access to professional development opportunities across all employee groups (7.31), and is building the structure for a robust professional development program. The college has provided the committee with an annual budget of $100,000 to develop and sustain these programs. The committee’s annual review will be connected to the program planning and assessment and budgeting processes that all college areas undertake.

The college also has “rebuilt” its Faculty Resource Center (FRC) by hiring a gifted instructional technologist to work with all employees on their instructional technology needs and establishing the FRC as a hub of innovative teaching and learning activities. At the FRC, the college already has initiated regular training sessions on many topics, including course development tools and procedures, Drupal, Etudes, and Google apps. (See FRC website) The college also has invested in lynda.com, which will give all employees on campus access to thousands of tutorial videos on software tools and other work-related skills. These tools are accessible from any computer on campus.

Finally, the college is scheduled to deploy a talent management system for Human Resources that will include a performance evaluation system that is linked to professional development opportunities and tracking. This system will help each employee take control of their own professional development, and encourage continual dialog linking performance and development to the continuous improvement processes of the college. This system should be in place for the 2014-15 academic year.

**Next Steps**
The District will continue to enforce timelines for the regular evaluation of all employees, and will continue to use the results of those evaluations as the basis for continuous improvement.
Consulting with all employees, the Professional Development Committee will continue to create the processes and plans.

**Conclusion**

Evaluations: Completed

Professional Learning Opportunities: Partially completed and implemented.
Supporting Evidence/Documentation

7.1 AP 7150
7.2 Agenda for April 2013 managers meeting
7.3 E-mail to managers from superintendent/president
7.4 E-mail from CHRO to all supervisors of new managerial employees (April 2013)
7.5 Manager evaluation progress chart kept in spreadsheet
7.6 E-mail to managers from CHRO of September 2013
7.7 CSEA Article 7
7.8 CSEA Eval form
7.9 L39 article 31
7.10 Confidential working conditions
7.11 L39 eval form
7.12 Confidential eval form
7.13 All evaluation tools are linked from the HR website
7.14 email from A Marble to supervisor
7.15 email from A Marble to supervisor
7.16 Course offered to Central 14 consortium by Liebert Cassidy Whitmore (Hartnell was closed on day offered, so this will be watched as a taped presentation)
7.17 Evaluations are kept in each employee’s personnel file, this chart is always a work in progress
7.18 Article 13
7.19 Article 14
7.20 Article 21B
7.21 DE process is in exhibit to appendices in CBA
7.22 MOUs between HCFA and District
7.23 September 20, 2013 MOU and attached TA on adjunct faculty evaluations
7.24 E-mail from VPAA to all faculty
7.25 Agenda for adjunct evaluation training on January 31, 2014
7.26 This is chart of all adjunct evaluations; up-to-date chart will be provided
7.27 Announcement at flex day presentation in August 2013
7.28 Minutes, agendas, and resources of the Professional Development Committee
7.29 Committee Handbook
7.30 Minutes of December 16, 2013 meeting
7.31 Survey tool
Recommendation 8
In order to meet Eligibility Requirement 5, and in order to meet the standard, the team recommends that the college establish a stable infrastructure of sufficient administrative personnel to better ensure a consistent level of services to support the institution's mission and purpose. The team further recommends that the college expedite the process to fill vacant and interim positions. (Eligibility Requirement 5; Standards III.A.2; III.A.6; IV.B)

Resolution and Analysis
During 2012-13 an assessment of the college’s organizational structure was completed. In November 2012, faculty, classified staff, administrators/managers were given an opportunity to respond to survey questions pertaining to the college’s organizational structure (8.1). A total of 112 persons responded. The response rate was as follows: 60 faculty members responded, representing 53.6% of all respondents; 30 members of the classified staff responded, representing 26.8% of all respondents; and 22 administrators/managers responded, representing 19.6% of all respondents. A summary of the results of the assessment along with the actual responses to the survey were shared with the college community and posted on the college’s web site (8.2). Two themes emerged from the assessment: the need for stability in the organizational structure and the need for additional middle management positions. Results from the assessment were also presented to the Resource Allocation Committee (now the College Planning Council) in January 2013 (8.3). Based on these results and other considerations, the superintendent/president finalized the college’s organizational structure and the structure was implemented July 1, 2013 (8.4). As part of the revised organizational structure, the following new administrative positions were created (8.5):

Dean of Student Affairs (Student Success)
Director of Student Affairs (Student Life)
Dean of Academic Affairs (Learning Support and Resources)
Dean of Academic Affairs (Math, Science, and Engineering)
Dean of Institutional Planning and Effectiveness
Director of Communications
Director of Information Technology
Director of Ag Business and Technology Institute

In conjunction with the revised organizational structure effective July 1, 2013, the following administrative positions have been filled during 2012-13 and the beginning of 2013-14.

Vice President of Academic Affairs
Vice President of Student Affairs
Vice President of Administrative Services
Dean of Student Affairs (Student Success)
Director of Student Affairs (Student Life)
Dean of Academic Affairs (Learning Support and Resources)
The following administrative positions were filled in January 2014.

Director of Information Technology
Director of Ag Business and Technology Institute

As a result of the implementation of the new organizational structure there are currently no vacant administrative positions and no interim administrative appointments, thus providing a stable infrastructure of administrative personnel.

The following full-time faculty positions were filled for 2013-14:

Math (2)
Communications (1 year full-time temporary)
Welding
Spanish
Nursing (RN)
Physical Education - Coach
English
English (1 year full-time temporary)
Chemistry
Biology
Counselor
Respiratory Care
Physics

Next Steps
None.

Conclusion
Completed.
Supporting Evidence/Documentation

8.1 Organizational Structure Survey
8.2 Report of Results from Organizational Structure Survey
8.3 Minutes from RAC meeting 1-23-2013
8.4 Organizational structure effective July 1, 2013
8.5 Position descriptions for new administrative positions
Recommendation 9
In order to meet the standards, the team recommends that the college ensure that program review processes are ongoing, systematic, and used to assess and improve student learning, and that the college evaluate the effectiveness of its program review processes in supporting and improving student achievement and student learning outcomes. The team further recommends that the institution:

- Review and refine its program review processes to improve institutional effectiveness;
- Use the results of program review to clearly and consistently link institutional planning processes to resource allocation, including physical resources. (Standards III.B.2.b III.D.1.a, b; III.D.2.e; III.D.3.h)

Resolution and Analysis
As stated in the response to Recommendation 2, subsequent to several years during which the institutional research function was staffed by one person, and after an interim dean was appointed for a period that lasted several months in 2012-13, a permanent dean was hired in September 2013 and reports directly to the Superintendent/President. An important responsibility of the new dean is to coordinate the program review/program planning and assessment (PPA) process for the college.

Ensuring that Program Review Processes are Ongoing and Systematic
Recognizing that in recent years program planning and assessment was accomplished via comprehensive reviews undertaken on an inconsistent basis, and limited exclusively to (most) programs within the divisions of Academic Affairs and Student Affairs, the dean of institutional planning and effectiveness in fall 2013 constructed a comprehensive inventory of designated programs, services and offices that are required to undergo regular review (9.1). The list is based on the institution’s divisional structure encompassing the Office of the Superintendent/President, Academic Affairs, Administrative Services, Advancement and Development/Foundation, Information and Technology Resources, and Student Affairs. Programs, services and/or offices that are substantially interdependent may complete one report rather than multiple reports per advance administrative agreement; synergistic efforts, activities, outcomes and planning might otherwise be unrealistically considered and reported. The main exception to the general rule of mandatory review applies to existing grant-funded programs and services that already prepare reports for external agencies and other entities, and do not therefore rely on the college’s general fund for resources.

Ongoing program review is interpreted by the college to mean that every designated program, service and office must conduct an annual review each spring (9.2), and a comprehensive review at least once every five years, also in the spring (9.3). Career technical education programs are required to undertake a comprehensive review every two years for optimal conformance with applicable state education code. The most critical difference between annual and comprehensive review at the college is that, whereas the annual review involves conducting an assessment of (at least) the previous year and planning into the next applicable fiscal year, the comprehensive...
review involves conducting an assessment of several previous years and planning into the next several years.

The systematic cycle of annual and comprehensive reviews commenced this past fall 2013, and will continue each spring through spring 2018 to ensure alignment with the full 2013-2018 period comprising the college’s Strategic Plan. Decisions regarding in which spring semester(s) within the five year cycle programs, services and offices will undergo comprehensive review were made per consultation with divisional VPs to ensure that this important review will be undertaken at the most appropriate juncture (9.4). Regardless of whether an annual or comprehensive review is scheduled, all designated programs, services and offices are required to submit and justify an annual action plan leading into the next applicable fiscal year - FY 2014-15 for the compressed PPA process beginning in fall 2013 (9.5).

PPA report submissions for fall 2013, the first annual systematic PPA process, showed great overall success, as 58 of 59 required annual reviews were submitted, and 13 of 17 required comprehensive reviews were submitted, for a grand total of 71 or 93% of the 76 required reviews. This rate of success is especially encouraging, as it was the first time that many services and offices were asked and expected to conduct an annual or comprehensive review. As for non-compliance relative to reviews required with advance notice, one academic program did not submit its annual review, and one office and three services did not submit their respective comprehensive reviews.

Three important additional findings resulted from the construction of the program inventory, scheduling of programs within the review cycle, submission of required reports, and non-compliance with requirements and expectations. First, it was found that academic program review was previously focused on instructional disciplines; whereas disciplines appropriately represent nearly all degree programs, several degree programs cut across multiple disciplines (general studies, liberal arts, social sciences). Although it may require greater effort for faculty to collaborate across two or more disciplines in such reviews, a critical purpose of program review is to ensure that outcomes for students served by the program are considered relative to their overall impact, and overarching improvements to the program are made to serve enrolled students in addition to students who may subsequently enroll. These specific programs are slated for regular review starting in spring 2014 (9.4).

Second, it was determined that the list of programs, services and offices to be reviewed regularly will need to be updated to reflect program establishment, integration, coherence, separation, and/or discontinuance decisions. For example, during spring 2014, the newly created elementary teacher education program is undertaking its first (annual) review, and the newly created office of institutional planning and effectiveness is conducting its initial (comprehensive) review (9.4).

And third, it was found that the number and type (annual, comprehensive, summary, instructional, non-instructional) of PPA reporting templates was required streamlining for services, offices, and non-instructional programs. For instance, summary reports of
comprehensive reviews were at first required to be completed during the fall 2013 PPA process; it was determined by the new dean that it was sufficient for college employees to complete all items on the annual or comprehensive review templates, and that the incremental value of the additional work was not worth the extra time, effort and potential confusion. The minimal requirement for fall 2013 was that designated programs, services and offices submitted either an annual or comprehensive review, along with an annual action plan. During spring 2014, designated programs, services and offices are required to complete one of two templates: a PPA report for either academic programs (9.6) or services, offices and non-instructional programs (9.7). Within each template, whereas all three sections must be completed by programs undergoing comprehensive review, only the second and third sections must be completed by programs undergoing annual review.

**Use of Program Review Process to Assess and Improve Student Learning**

The program review process is used to assess student learning systematically, with the intention of improving student learning. The annual review section of the PPA report template for academic programs includes items on course level student learning outcomes (SLOs), program level SLOs, and core competencies (institutional learning outcomes/ILOs). Specific questions focus on faculty engagement, interventions, measurement, changes in courses and programs, and improvements in teaching and student learning. The annual action plan section encompasses items on desired and measurable outcomes for new activities, and how such activities support core competencies, program level outcomes, course level outcomes, program/discipline goals, and/or strategic priorities/goals (9.6).

The program review process supports student achievement and the improvement of student learning outcomes through the reporting and analysis of enrollment and success in courses within the annual review section of the PPA report template for academic programs, including success by teaching modality (distance education courses compared with face-to-face courses), and levels of and trends in achievement data, such as degree and certificate completions/awards (9.6). The first item in the comprehensive review section deals with overall program effectiveness, specifically asking about course sequencing, alignment, and alternative scheduling approaches to meet the needs of students. An item within the CTE programs subsection requests information about levels of and trends in achievement data over the past several years, inclusive of degree/certificate completions (awards) and employment statistics.

In parallel fashion, the annual review section of the PPA report template for services, offices and non-instructional programs provides prompts on target recipients; patterns and trends in users, needs and usage; service/program modality; and service area outcomes (SAOs). And the annual action plan section encompasses items on measurable outcomes for new activities, and how such activities support SAOs, program level outcomes, course level outcomes, service/program goals, and/or strategic priorities/goals (9.7).

Participative activities by faculty, administrators, and governance bodies in both annual and comprehensive program review are designed to ensure that assessment and improvement of
student learning are increasingly topics of review and discussion at different organizational levels and with varied groups - all of which/whom are integral components of/participants in the overall review process (9.2, 9.3). Each of the handbooks for the Academic Affairs, Administrative Services, Advancement, Facilities Development, Student Affairs, Technology Development, and College Planning councils incorporates explicit language concerning each council’s responsibility in program review, inclusive of reviewing reports and recommendations (9.8, 9.9, 9.10, 9.11, 9.12, 9.13, 9.14). The timeline for the spring 2014 integrated planning process reinforces the roles and responsibilities of key participants in program review (9.15).

**Evaluation of Effectiveness of Program Review Processes in Supporting and Improving Student Achievement and Learning Outcomes**

Evaluation of the effectiveness of program review processes is a work in progress. It is expected that additional items that speak to student achievement data and trends will prove useful in reporting on, and indirectly in improving, achievement and student learning. It is further expected that the encouragement of dialogue within divisions and in governance bodies will increasingly result in a more collaborative learning environment supportive of student achievement and learning.

**Review and Refinement of Program Review Processes to Improve Institutional Effectiveness**

Program review processes have been reviewed and refined to improve institutional effectiveness in the short term. The resulting continuous improvement processes for annual program planning and assessment (9.2) and comprehensive program review (9.3) are prominent examples of this new systematic approach. More broadly, the recent evaluation of and expectations for integrated planning at the college from 2010 through 2015 provides evidence of enhanced institutional effectiveness in key process features associated with program review (9.16). Following is a list of specific improvements from 2010 through fall 2013 and/or spring 2014 (the list includes only process features already improved in, and not simply planned for, the latter).

- Scheduling of comprehensive reviews
- Scheduling of annual reviews
- Consistency of items across PPA templates
- Incorporation of proposed revisions to ACCJC standards
- Planning horizon for budget requests
- Long term planning linked to PPA process
- Justification for budget requests - link to Strategic Plan
- Completed PPA reports
- Central housing of PPA reports
- Governance role - oversight of results
- Governance role - budget recommendations
- PPA linked to budget development
- Information flow - PPA reports to budget decisions
- PPA process linked to annual budget calendar
- Timeline of activities for complete process
Use of Program Review Results to Link Institutional Planning Processes to Resource Allocation, including Physical Resources

Program review results have recently been increasingly used to link planning to resource allocation. In FY 2012-13, the formerly existing Resource Allocation Committee reviewed capital outlay requests submitted by, and approved requests for, various programs, services and offices totaling $1.9 million (9.17). As anticipated, these resources have largely been allocated during FY 2013-14.

Implementation of the new governance and planning model in AY 2013-14, integral to the program planning and assessment (PPA) process, has provided specific vehicles (governance councils) that help ensure that program, service and office planning is ultimately tied to budget development, funding decisions, and resource allocation. For example, in leading to budget development for FY 2014-15, the Academic Affairs Council approved a PPA summary and prioritization list for the Academic Affairs division, including full-time faculty priorities, at its meeting on November 13, 2013 (9.18); the summary and prioritization list was then forwarded to the College Planning Council for its consideration. As another example, the Student Affairs Council approved the priority faculty and resource requests from the Student Affairs division at its meeting on November 26, 2013 (9.19). The College Planning Council began to consider resource allocation requests for 2014-15 at its meeting on February 19, 2014 (9.20). These governance activities have followed the timeline for the fall 2013 PPA process in budgeting for the upcoming fiscal year (9.21).

Finally, with respect to facilities planning, development of the (new) Facilities Master Plan represents an opportunity to incorporate future space needs into the strategic planning process. In addition to undertaking primary research at the college, consultants are reviewing PPA reports completed in fall 2013 (9.22).

Next Steps

In summer 2014 the dean of institutional planning and effectiveness will evaluate the effectiveness of program review processes in improving student achievement and student learning outcomes and, accordingly, develop additional improvements in the program planning and assessment (PPA) process toward institutionalization of a more robust integrated planning process for spring 2015. Improvements will minimally include the following features:

- Place increased emphasis on evaluation of student achievement through the review of academic programs.
- Ensure more focused justification for budget requests as linked to specific goals in the Strategic Plan.
- Lead migration from PPA reports completed in Word documents to an informational and data capturing software system (eLumen). This system will also house all student learning and service area outcome assessment data, thereby contributing to a greater synergistic effort relative to data analysis, interpretation, and reporting.
Conclusion
Partially completed.

Supporting Evidence/Documentation

9.1 **Inventory of Programs, Services & Offices Designated for Review - Starting Fall 2013 or Later**
9.2 **Annual Program Planning & Assessment - Components of Continuous Improvement**
9.3 **Comprehensive Program Review - Components of Continuous Improvement**
9.4 **Schedule of Annual & Comprehensive Reviews 2013-2018**
9.5 **PPA Report Template for Instructional Disciplines - Fall 2013**
9.6 **Academic PPA Report Template - Spring 2014**
9.7 **Non-Instructional PPA Report Template - Spring 2014**
9.8 **Academic Affairs Council Handbook**
9.9 **Administrative Services Council Handbook**
9.10 **Advancement Council Handbook**
9.11 **Facilities Development Council Handbook**
9.12 **Student Affairs Council Handbook**
9.13 **Technology Development Council Handbook**
9.14 **College Planning Council Handbook**
9.15 **Timeline for 2014 PPA Process**
9.16 **Continuous Improvement of Integrated Planning 2010-2015**
9.17 **Minutes for College Planning Council Meeting November 6, 2013**
9.18 **Minutes for Academic Affairs Council Meeting November 13, 2013**
9.19 **Minutes for Student Affairs Council Meeting November 26, 2013**
9.20 **Agenda for College Planning Council Meeting February 19, 2014**
9.21 **Timeline for 2013 PPA Process**
9.22 **Minutes for Facilities Development Council Meeting January 28, 2014**
**Recommendation 10**

To fully meet the standard the team recommends that the college develop a process for regular and systemic evaluation of all Human Resources and Business and Fiscal Affairs policies. (Standard III.A.3.a; III.D.)

**Resolution and Analysis**

A review calendar for all board policies (BPs) and administrative procedures (APs) was developed during 2012-13. This calendar includes all BPs and APs, not just those related to human resources and business services (10.1). Board Policy 2410 - Board Policies and Administrative Procedures was approved by the governing board on December 10, 2013 (10.2a; 10.2b). Administrative Procedure 2410 - Board Policies and Administrative Procedures was approved by the College Planning Council (CPC) on November 6, 2013, and approved by the superintendent/president on November 6, 2013 (10.3a; 10.3b). The review process outlined in AP 2410 involves review of all BPs and APs by all constituent groups and the newly established governance councils. A tracking form has been developed and implemented to record input from constituent groups and governance councils and to document the action taken by various constituent groups and councils (10.4). Per BP and AP 2410, following input and review by all constituent groups and appropriate councils, the CPC will make final recommendation to the superintendent/president, who will then take the BP and AP forward to the governing board. The governing board will consider approving each BP, and the APs will go forward as information items.

**Next Steps**

Complete review of board policies and administrative procedures identified for review during 2013-14. All BPs and APs will be reviewed over a 5 year period (2013-2018). A group of BPs and APs will selected for review each year.

**Conclusion**

Completed. The recommendation was to develop a process for regular and systematic review of board policies and administrative procedures. Per the next steps above, it will take several years to review all BPs and APs.

**Supporting Evidence/Documentation**

- **10.1 Board Policies and Administrative Procedures Review Calendar**
- **10.2a BP 2410**
- **10.2b Agenda and Minutes for Board of Trustees meeting December 13, 2013**
- **10.3a AP 2410**
- **10.3b Minutes of CPC meeting November 6, 2013**
- **10.4 Tracking Form for BPs and APs is part of AP 2410**
Recommendation 11

To fully meet the standards, the team recommends that the college implement and evaluate a governance model and establish a key participatory governance group to provide an avenue for meaningful input into decision-making including but not limited to resource allocation. (Standards IV.A.2; IV.A.2.a)

Resolution and Analysis

An assessment of the college’s governance model and structures was completed through a governance planning retreat held on November 19, 2012, that included participation from all constituent groups. A summary report from that retreat was shared with the college community and posted on the college’s web site (11.1). The next step in the continued assessment and review of the college’s governance model and structures was the formation of a Governance Planning Task Force (GPTF). The task force met during the spring 2013. Agendas, minutes, and documents of the task force are posted on the governance section of the college web site (11.2). The GPTF reviewed the retreat report and examined other governance models in making recommended changes and improvements to the existing governance model. At the end of the spring 2013, the GPTF recommended a revised governance model that is designed to facilitate planning, decision-making, and resource allocation (11.3). The model includes the implementation of several governance councils to carry out this work. The purpose, membership, and responsibilities of each governance council is found in each council’s handbook (11.4).

The new governance model was shared with the college community at a Town Hall meeting in May 2013 (11.5).

The revised governance structure was implemented in fall 2013 (11.6). A web site for all governance councils has been established so that all employees, students, and the community has access to council meeting calendars, agendas, actions, and documents (11.7). A master meeting calendar of all councils and committees has been established to enhance the coordination of the work of these groups (11.8).

The governance model implemented for 2013-14 includes the establishment of the College Planning Council. This council is the highest level governance group that facilitates institutional planning and decision-making and also serves as the college budget committee (11.9).

Next Steps

Develop methods and procedures for evaluating the effectiveness of the governance model at the end of 2013-14.

Conclusion

Partially completed. The first evaluation of the governance model will be completed at the end of the 2013-14 academic year.
Supporting Evidence/Documentation

11.1 Report from Governance Planning Retreat, November 19, 2012
11.2 Agendas, minutes, and documents of the Governance Planning Task Force
11.3 Governance model
11.4 Governance Council Handbooks
11.5 Town Hall presentation May 22, 2013 on Planning and Governance
11.6 Fall flex day presentation on August 16, 2013, announces implementation plan
11.7 Governance web site
11.8 Governance Councils Master Meeting Calendar
11.9 College Planning Council Handbook
Recommendation 12
In order to meet standards, the team recommends that:
- Each board member adhere to the Governing Board's Ethics policy;
- The board self-evaluation continues to be done with full participation of each board member. (Standards IV.B.1.a-j; IV.B.2.a-e)

Resolution and Analysis
The governing board has established Board Policy 1055 on ethical conduct (12.1). The policy includes statements about ethical conduct expectations and procedures for handling alleged ethical conduct violations. The Board of Trustees has utilized BP 1055 to address two alleged ethical conduct violations by governing board members. In June of 2011, the Board of Trustees adopted a resolution issuing a warning to two governing board members as a result of violations of BP 1055 (12.2). In August of 2008, the Board of Trustees discussed an alleged violation of BP 1055, but no action was taken (12.3). Adherence to BP 1055 is demonstrated by using the board policy to address alleged ethics violations. There have been no alleged violations of ethical conduct since 2011.

At its December 18, 2012, board development session (12.4), the Board of Trustees reviewed a self-evaluation instrument and procedure that it had previously used in its 2011 self-evaluation. The governing board decided to utilize the previous instrument and procedure to conduct its self-evaluation at the January 15, 2013, meeting and there was 100% participation from governing board members. The governing board did conduct a self-evaluation at its January 15, 2013, meeting (12.5). The results from the survey that was utilized as part of the self-evaluation process are included in the minutes from the meeting. At its April 2013 development meeting, the governing board again reviewed the instrument and procedure utilized for self-evaluation, and adopted some changes to the instrument, particularly the rating scale (12.6). The self-evaluation instrument also was revised to include reference/linkage to relevant accreditation standards. At its May 28, 2013, meeting, the governing board conducted another self-evaluation facilitated by Dr. Jerome Hunter, a retired chancellor from the North Orange County CCD. There was 100% participation from governing board members in this evaluation (12.7). From this self-evaluation the Board of Trustees adopted activities with outcomes to improve governing board effectiveness and these were reviewed by the governing board at its August 2013 meeting (12.8). These activities and outcomes will be reviewed at the next self-evaluation scheduled for spring 2014.

Next Steps
Governing board will conduct self-evaluation at the end of the spring semester 2014.

Conclusion
Completed.
Supporting Evidence/Documentation

12.1 Board Policy 1055
12.2 Board of Trustees Resolution June 2011
12.3 Board of Trustees Ethics Discussion August 2008 (page 5)
12.4 Board of Trustees Meeting December 18, 2012 minutes (page 1)
12.5 Board of Trustees Meeting January 15, 2013 minutes
12.6 Board of Trustees Meeting April 16, 2013 minutes
12.7 Board of Trustees Meeting May 28, 2013 minutes
12.8 Board of Trustees Meeting August 6, 2013 (self-evaluation activities and outcomes)
Appendix A: Master List of Evidence

Recommendation 1

1.1 Survey instrument for Vision, Mission, and Values Statements
1.2 Report of the results from the Vision, Mission, and Values Survey
1.3 Minutes for CPC meeting November 6, 2013
1.4 Minutes for CPC meeting November 20, 2013
1.5 Minutes for CPC meeting December 4, 2013
1.6 Minutes for CPC meeting December 18, 2013
1.7 Minutes for Board of Trustees meeting January 14, 2014
1.8 Minutes (unadopted) for Board of Trustees meeting February 4, 2014

Recommendation 2

2.1 Minutes for College Planning Council Meeting November 6, 2013
2.2 Highlights of Board of Trustees Meeting February 4, 2014
2.3 District Mission, Vision & Values Statements
2.4 Agenda Item for Board of Trustees Meeting April 2, 2013 - Curriculum Committee Actions
2.5 Agenda Item for Board of Trustees Meeting July 2, 2013 - Present Refinancing Opportunity
2.6 Grant Concept Review Form Template
2.7 Minutes for College Planning Council February 5, 2014
2.8 Annual Program Planning & Assessment - Components of Continuous Improvement
2.9 Governance & Planning Model
2.10 Academic Affairs Council Handbook
2.11 Administrative Services Council Handbook
2.12 Advancement Council Handbook
2.13 Student Affairs Council Handbook
2.14 Technology Development Council Handbook
2.15 College Planning Council Handbook
2.16 Budget Development & Funding Decision Processes
2.17 Timeline for 2013 PPA Process
2.18 2013-14 Master Meeting Calendar
2.19 Academic & Governance Calendar
2.20 Budget Development Calendar FY 2014-15
2.21 Timeline for 2014 PPA Process
2.22 Annual Budget Development Calendar
2.23 Strategic Plan 2013-2018
2.24 Strategic Plan 2013-2018 Refined February 11, 2014
2.25 Technology Master Plan 2011-2021
2.26 Agenda for Technology Development Council Meeting January 29, 2014
2.27 Draft Technology Plan 2011-2018
Follow-Up Report  
March 15, 2014

2.28 Summary of Foundation Funding Plan 2012-2017
2.29 Minutes for Advancement Council Meeting December 19, 2013
2.30 Equal Employment Opportunity Plan
2.31 Development, Approval & Revision of EEO Plan
2.32 EEO Advisory Committee Handbook
2.33 Draft Continuous Improvement Plan 2013-2018
2.34 Timeline for Development of Continuous Improvement Plan
2.35 Agenda for College Planning Council Meeting February 19, 2014
2.36 Minutes for Facilities Development Council Meeting January 28, 2014
2.37 Schedule & Work Plan for Facilities Master Plan
2.38 Facilities Needs Assessment Questionnaire - Administration Offices
2.39 Facilities Needs Assessment Questionnaire - Services
2.40 Highlights of Meetings of the Board of Trustees: http://www.hartnell.edu/board/
2.41 Minutes for Governance Council Meetings
2.42 Agenda for President’s Executive Cabinet Meeting February 4, 2014
2.43 Projection worksheet
2.44 PowerPoint Presentation
2.45 Budget worksheets

Recommendation 3

3.1 Organizational Chart - Direct Reports to the Superintendent/President
3.2 Review of Evaluation Mechanisms - Fall 2013
3.3 Inventory of Continuous Improvement Processes
3.4 Board Policies & Administrative Procedures - Components of Continuous Improvement
3.5 Organizational Structure - Components of Continuous Improvement
3.6 Governance System - Components of Continuous Improvement
3.7 Organizational Climate - Components of Continuous Improvement
3.8 Mission, Vision & Values Development, Review & Revision - Components of Continuous Improvement
3.9 Community Research & Environmental Scanning - Components of Continuous Improvement
3.10 Strategic Plan Development, Review & Revision - Components of Continuous Improvement
3.11 Long Term Institutional Plans - Development, Review & Revision - Components of Continuous Improvement
3.12 Comprehensive Program Review - Components of Continuous Improvement
3.13 Annual Program Planning & Assessment - Components of Continuous Improvement
3.14 Annual SLO Assessment - Components of Continuous Improvement
3.15 Budget Development & Resource Allocation - Components of Continuous Improvement
3.16 Board Evaluation - Components of Continuous Improvement
3.17 Draft Continuous Improvement Plan 2013-2018
3.18 Agenda for CPC Meeting February 19, 2014
3.19 Funds Raised in FY 2012-13 for Foundation Funding Plan 2012-2017
3.20 Report Template for Strategic Plan Goal 4B - Outcome 4B3
3.21 Schedule of Annual and Comprehensive Reviews 2013-2018
3.22 Program Planning & Assessment Report Template for Academic Programs - Spring 2014
3.23 Program Planning & Assessment Report Template for Services, Offices & Non-Instructional Programs - Spring 2014
3.24 Continuous Improvement of Integrated Planning 2010-2015

Recommendation 4

4.1 Dean of Academic Affairs, (LS&R) job description
4.2 Hartnell College Academic Affairs Division Organization Chart
4.3 SLO Discussion Evidence
4.4 Course-level Assessment Summary Reports
4.6 Program-Level Assessment Summary Reports
4.7 SLO-CurricUNET Comparison (samples)
4.8 O&A Minutes (Name Change Approval/Handbook)
4.9 O&A Coordinator Job Description
4.10 O&A Handbook
4.11 O&A Minutes and Senate Minutes (Approval of O&A Handbook)
4.12 ACCJC Training Document
4.13 O&A Action Plan
4.14 Instructions for SLO Form Phase I
4.15 Instructions for SLO Form Phase II
4.16 BIO-SLO-PLO Mapping and Calendar
4.18 PowerPoint Presentation (SLOs and Assessment and That Loop!)
4.19 Assessment Workshop e-mail to faculty
4.20 eLumen-Hartnell Client Agreement
4.21 eLumen Implementation Plan
4.22 eLumen Planning Meeting
4.23 Course-Level Outcome Assessment Summary Report
4.24 Assessment Workshop (Attendees 11-22-2013)
4.25 Plan to Assess Course SLOs for Fall 2013, Mandatory Assessment Meetings Schedule
4.26 Third Annual Student Success Conference (Day 2) Agenda
4.27 Third Annual Student Success Conference (Day 2) Survey Results
4.28 SLO Management-Assessment Software - Side by Side Comparison
4.29 ACCJC Newsletter, Summer 2013
4.30 Program-Level Assessment Summary Example
4.31 Hartnell College Service Area Outcomes Assessment Plan and Summary Form (blank)
4.32 Hartnell College Service Area Outcomes Assessment Plan and Summary Forms
4.33 SAO Guide
4.34 Communication Skills Assessment Results
4.36 Persistence and Success for C Students Tool
4.37 Faculty e-mail Turnitin Workshops, 9/6/12
4.38 RA Workshop Participants
4.39 Faculty e-mail RA
4.40 Faculty e-mail RA (follow-up)
4.41 Core Competency Survey Results
4.42 CCSSE Supplemental Questions – S14
4.45 Checklist for SLO-PLO Assessments
4.46 Program Planning and Course Learning Outcome Assessment
4.47 College Status Report on SLO Implementation in March 2013
4.48 Colleague-Cognos Data
4.53 SLO Management-Assessment Software - Side by Side Comparison (e-mail)
4.55 Information Skills Rubric
4.56 Communication Skills Core Competency Rubric
4.57 Help Guide for Using the Course Level Outcome Assessment Report Form
4.58 BUS 50, SLO 1 Example
4.59 Syllabi Folder
4.60 Goals from 2013 DE Plan
4.61 Article 13 of HCFA Contract
4.62 Article 14 of HCFA Contract
4.63 Article 21B of HCFA Contract
4.64 HCFA Appendix DE 2013

Recommendation 5

5.1 New Process for Improved Technical Services Workflow
5.2 Library Services Outcomes Assessment Calendar
5.3 Student Survey KCC Library Services Narrative
5.4 Student Survey KCC Library Services Data
5.5 Main Campus Library Survey Analysis
5.6 King City Center Survey II Analysis
5.7 Alisal Campus Survey Analysis
5.8 Library Services PPA
5.9 Hartnell College e-mail Regarding reference@hartnell.edu
5.10 Hartnell College Flyer for Promotion of Library Services
    Board of Trustees Meeting Agenda, May 9, 2014
Recommendation 6

6.1 Memorandum of Clarification (signed)
6.2 Voyager Consortia Meeting Minute
6.3 MOC Member Survey (response)
6.4 MOC Eval-Provider Survey
6.5 Hartnell College Staff Survey (responses)
6.6 Library Services Outcomes Assessment Calendar

Recommendation 7

7.1 AP 7150
7.2 Agenda for April 2013 managers meeting
7.3 E-mail to managers from superintendent/president
7.4 E-mail from CHRO to all supervisors of new managerial employees (April 2013)
7.5 Manager evaluation progress chart kept in spreadsheet
7.6 E-mail to managers from CHRO of September 2013
7.7 CSEA Article 7
7.8 CSEA Eval form
7.9 L39 article 31
7.10 Confidential working conditions
7.11 L39 eval form
7.12 Confidential eval form
7.13 All evaluation tools are linked from the HR website
7.14 email from A Marble to supervisor
7.15 email from A Marble to supervisor
7.16 Course offered to Central 14 consortium by Liebert Cassidy Whitmore (Hartnell was closed on day offered, so this will be watched as a taped presentation)
7.17 Evaluations are kept in each employee’s personnel file, this chart is always a work in progress
7.18 Article 13
7.19 Article 14
7.20 Article 21B
7.21 DE process is in exhibit to appendices in CBA
7.22 MOUs between HCFA and District
7.23 September 20, 2013 MOU and attached TA on adjunct faculty evaluations
7.24 E-mail from VPAA to all faculty
7.25 Agenda for adjunct evaluation training on January 31, 2014
7.26 This is chart of all adjunct evaluations; up-to-date chart will be provided
7.27 Announcement at flex day presentation in August 2013
7.28 Minutes, agendas, and resources of the Professional Development Committee
7.29 Committee Handbook
7.30 Minutes of December 16, 2013 meeting
7.31 Survey tool
Recommendation 8

8.1 Organizational Structure Survey
8.2 Report of Results from Organizational Structure Survey
8.3 Minutes from RAC meeting 1-23-2013
8.4 Organizational structure effective July 1, 2013
8.5 Position descriptions for new administrative positions

Recommendation 9

9.1 Inventory of Programs, Services & Offices Designated for Review - Starting Fall 2013 or Later
9.2 Annual Program Planning & Assessment - Components of Continuous Improvement
9.3 Comprehensive Program Review - Components of Continuous Improvement
9.4 Schedule of Annual & Comprehensive Reviews 2013-2018
9.5 PPA Report Template for Instructional Disciplines - Fall 2013
9.6 Academic PPA Report Template - Spring 2014
9.7 Non-Instructional PPA Report Template - Spring 2014
9.8 Academic Affairs Council Handbook
9.9 Administrative Services Council Handbook
9.10 Advancement Council Handbook
9.11 Facilities Development Council Handbook
9.12 Student Affairs Council Handbook
9.15 Timeline for 2014 PPA Process
9.16 Continuous Improvement of Integrated Planning 2010-2015
9.17 Minutes for College Planning Council Meeting November 6, 2013
9.18 Minutes for Academic Affairs Council Meeting November 13, 2013
9.19 Minutes for Student Affairs Council Meeting November 26, 2013
9.20 Agenda for College Planning Council Meeting February 19, 2014
9.21 Timeline for 2013 PPA Process
9.22 Minutes for Facilities Development Council Meeting January 28, 2014

Recommendation 10

10.1 Board Policies and Administrative Procedures Review Calendar
10.2a BP 2410
10.2b Agenda and Minutes for Board of Trustees meeting December 13, 2013
10.3a AP 2410
10.3b Minutes of CPC meeting November 6, 2013
10.4 Tracking Form for BPs and APs is part of AP 2410
Recommendation 11

11.1 Report from Governance Planning Retreat, November 19, 2012
11.2 Agendas, minutes, and documents of the Governance Planning Task Force
11.3 Governance model
11.4 Governance Council Handbooks
11.5 Town Hall presentation May 22, 2013 on Planning and Governance
11.6 Fall flex day presentation on August 16, 2013, announces implementation plan
11.7 Governance web site
11.8 Governance Councils Master Meeting Calendar
11.9 College Planning Council Handbook

Recommendation 12

12.1 Board Policy 1055
12.2 Board of Trustees Resolution June 2011
12.3 Board of Trustees Ethics Discussion August 2008 (page 5)
12.4 Board of Trustees Meeting December 18, 2012 minutes (page 1)
12.5 Board of Trustees Meeting January 15, 2013 minutes
12.6 Board of Trustees Meeting April 16, 2013 minutes
12.7 Board of Trustees Meeting May 28, 2013 minutes
12.8 Board of Trustees Meeting August 6, 2013 (self-evaluation activities and outcomes)