PROGRESS REPORT

HARTNELL COLLEGE
156 Homestead Avenue
Salinas, California 93901

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

This report represents the findings of the evaluation team that visited Hartnell College from October 30-31, 2007

J. Christopher McCarthy, Ed.D., Chair
Comprehensive Evaluation Visiting Team Roster
Hartnell College
October 30-31, 2007

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

Barbara McNiese-Stallard
Director of Research and Institutional Effectiveness
Mt. San Antonio College
Walnut, CA
Introduction

In a letter to the president of Hartnell College from the Accrediting Commission for Community and Junior Colleges of the Western Association of Schools and Colleges, dated June 29, 2007, the college was formally notified that it had been placed on probation. This action was taken after a visiting team conducted a comprehensive evaluation as part of the college’s application for reauthorization of accreditation. Accredited status would continue during the period of probation; however, the college was given a finite time period during which it is expected to resolve the Commission’s seven recommendations and two concerns.

The college was given a deadline of October 15, 2007 to submit a Progress Report demonstrating resolution of Recommendation 7 and Commission Concern 1:

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

**Commission Concern 1:** The Commission asks Hartnell College to demonstrate the way in which it meets and commits to continuing to meet Eligibility Requirement 21 which requires the institution to "...comply with Commission requests, directives, decisions, and policies, and...make complete, accurate, and honest disclosure."

Further, the October 15 Progress Report was to provide evidence of “clear and significant institutional progress” in resolving Recommendations 1 - 6:

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

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

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

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

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

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

A second Progress Report will be due to the Commission by March 15, 2007, providing evidence of resolution of Recommendations 1-6 and Commission Concern 2, which follows:

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

It should be noted that at the time of the comprehensive visit in March, 2007, the college had recently settled faculty contract negotiations that had reached stalemate and culminated in a six-day faculty strike. For approximately six months prior to the strike, the faculty had adopted a "work to contract" stance, which limited their campus involvement to only those activities required by contract. As a result, faculty involvement in governance, course revision, and the development of Student Learning Outcomes was minimal.

When the comprehensive visiting team arrived in March, 2007, there was significant dispute concerning the validity of information contained in the Self Study, which was written with little faculty involvement. Three days before the visit, team members received a rebuttal to the Self Study sponsored by the Academic Senate.

The superintendent/president had announced his pending retirement, to be effective June 30, 2007. When the team arrived, they found significant tension on campus. Relations between faculty and administration were strained, and a general lack of trust permeated the campus climate.
An interim superintendent/president began service at the college on July 1, 2007. Her first actions as president involved organizing the college to meet the October 15, 2007 deadline established by the Accrediting Commission.

A two-person team visited on October 30-31, 2007, during which time they reviewed the college Progress report, interviewed key individuals and groups, and reviewed the written evidence gathered in support of college efforts to address the Commission recommendations and concerns. The team found a climate markedly different than the one that existed during the comprehensive visit. The bitterness and distrust that characterized campus relations appeared to be gone. Campus constituents were clearly working with each other for the benefit of student learning. The college is to be commended for the positive change in attitude and for their collaborative work in addressing the recommendations and concerns of the Accreditation Commission.

During a relatively short period of time, the college has achieved a great deal related to student learning, including formulating new committees and implementing a new database course tracking system. Faculty have taken a more active leadership role in developing student learning outcomes and the administration has adopted a more transparent approach to governance. The college has instituted a collaborative decision-making process.

While all the above activities illustrate progress, the college still has much work to do to fully satisfy the Accreditation Commission expectations by the next deadline of March 15, 2007. Beyond that date, the work they have initiated needs to be sustained and fully institutionalized, so that any future change in leadership does not set back their progress.
Evaluation of Progress: Recommendations with an October 15, 2007 Deadline

By October 15, 2007, the college was to have met the criteria outlined in Recommendation 7 and Commission Concern 1. The following is an evaluation of the status of the college in each of those two areas.

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

**Observations**

The Board of Trustees has completed a Board Ethics Policy that includes sanctions for those who commit ethical violations. This policy was formally adopted on September 13, 2007 and, according to members of the board, already put into action when one board member had a concern about the behavior of another member. The college has not yet developed a procedure to evaluate the policy and make appropriate changes as warranted.

The college has initiated a number of board development activities. The board conducted an annual goal setting workshop in July, 2007, at which they established complying with accreditation recommendations and standards as a major goal for the coming year.

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

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

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

The college has developed a new trustee orientation plan that relies on printed college information and documents offered by the Community College League as well as meetings with college staff.

The college progress report cites the size of the district, and the resulting distances trustees must travel for development activities, as a mitigating factor for face-to face trustee development meetings.

The college reports that they now have a Trustee Development Plan, contained in a binder that identifies relevant printed materials, Community College League publications,
related websites and pertinent conferences. The plan also indicates that mentor assignments will be established and new trustees will be given a tour of the college sites. The team found no documentation that addressed how the plan will be implemented and sustained. Timelines, action plans, clear assignments of responsibility, and assessment measures were not made clear, along with how the plan will be evaluated and improved as necessary over time.

Conclusions

The college has met the portion of the recommendation that deals with the development of a board ethics policy.

While the college has involved the board in development activities and put together a list of materials and activities under the heading of a “Trustee Development Plan,” the team believes the college has not fully addressed the recommendation. There is no indication of how the plan will be put into place, who will be responsible for activities, how it will be budgeted, whether it will be continued or how it will be evaluated. At present, it appears to be a list of materials and development activities with no timeline nor procedure for ongoing implementation.

The team is also concerned that the college identifies the distance between trustee residences as a rationale to justify the impracticality of board development meetings.

The board may wish to review the accreditation document contained in the college’s accreditation folder for Recommendation 6 that deals with the Enrollment Management Team. This folder contains a one-page outline of a model “Action Plan” that outlines all the elements that should be contained in the Board Development Plan. The board may also want to review the ACCJC document “Rubric for Evaluating Institutional Effectiveness.”
Concern 1: The Commission asks Hartnell College to demonstrate the way in which it meets and commits to continuing to meet Eligibility Requirement 21 which required the institution to...comply with Commission requests, directives, decisions, and policies, and...make complete, accurate, and honest disclosure.

Observations

Upon assuming office in July, 2007, the interim superintendent/president addressed the Accrediting Commission recommendations as an immediate priority. Community forums were held in Salinas and King City to address the Accrediting Commission action and establish the college commitment to respond fully.

The team found the college to be fully engaged in addressing the action letter of the Commission. Trustees participated fully in the progress visit, appropriate documentation had been compiled, and campus efforts had been initiated to address each Commission concern. The college had held Town Hall meetings related to meeting the accreditation recommendations. The fall convocation was devoted to discussion of the accreditation response.

The Board of Trustees established the goal of satisfying the Commission recommendations a major priority for the year.

All accreditation documents, including a “Question and Answer” section regarding the accreditation report and college’s efforts to respond, have been posted on the college website.

An interim associate vice president of academic affairs was appointed to provide leadership for the accreditation effort and to facilitate and house all required documents. An office was established on campus for that purpose.

The college appeared to be responding to a recommendation that appeared in the reports of the last few visiting teams regarding the need to establish effective communication and clarify decision-making roles and responsibilities.

The team heard repeatedly that the Commission action letter was a “wake-up call” that is being taken seriously. The activities observed by the team validated that perception.

Conclusion

The team found ample evidence that the college is taking the Commission action letter with seriousness of purpose and that it is making every effort to ensure that it is in compliance with Eligibility Requirement 21. The college has addressed Commission Concern 1.
Evaluation of Progress: Recommendations with a March 15, 2007 Deadline

The Commission indicated, in its action letter, that the college should demonstrate progress in meeting the following recommendations, with full compliance expected by March 15, 2008.

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

Observations

An ethics code for all personnel is under development, but it is not yet complete.

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

The Academic Senate has developed a list of shared governance committees and has made new faculty appointments to those committees. A revision of Board Policy #2005, “Academic Senate – Shared Governance,” is underway; however, there is no current date for completion of the revision.

Campus constituent groups have been given seats at the board meetings for the first time, illustrating a positive change in the governance approach on campus.

The actions taken in response to Recommendations 4 and 5 (see below) illustrate that dialogue about student learning is taking place.

Conclusion

The college has begun the work needed to respond to Recommendation 1, but the recommendation is not yet fully addressed.
Recommendation 2: The team recommends that college constituencies agree upon and implement an ongoing, systematic, integrated process for program review, planning, budgeting and hiring, and that a means be developed to communicate decisions made in those arenas back to the campus at large. (Standards I.B.3; I.B.5; III.A.6; III.B.2.b; III.C.2; III.D.1.a; III.D.2; III.D.2.b)

Observations

The college has reviewed and updated the Educational and Facilities Master Plan, the Division/Dept Plan, and Program Services Review.

The college has yet to fully link the program review process with the planning, student learning outcomes and resource allocation processes, although a committee is meeting to formulate a New Functional Governance Structure that will provide a model for the effort to do so. The college reports that they will have this program review process in place and begun by the March 15, 2008 campus visit.

Although the ability to measure the effectiveness of this three-year program review plan is three years away, the college is required to work on the plan to evaluate its effectiveness on a yearly basis and make changes as warranted.

It is unclear if the college has a communications plan, although many on campus report that the communications climate has improved dramatically.

Conclusion

The college is encouraged to review the ACCJC document on “Rubric for Evaluating Institutional Effectiveness.” This document should be used to benchmark the status of the college’s planning. The college’s goal should be to reach the Sustainable Continuous Quality Improvement level within the timelines established by the Commission action letter first calling this matter to the institution’s attention.

The college has begun initial steps necessary to address Recommendation 2, although much work needs to be completed before the recommendation will be fully addressed.
Recommendation 3: The team recommends that a planning process be completed that will address the needs for staffing and maintenance in new buildings and for technology support in both new and existing buildings (Standard 1.B.3; 1.B.4; 1.B.6; III.A.2; III.A.6; III.B.1.a; III.B.1.b; III.B.2; III.2.a; III.B.2.b; III.C.1.c; III.C.2)

Observations

The college has reviewed its technology staffing needs and identified areas where additional staffing is needed. The Chancellor’s office Technology II Strategic Plan was used as the basis of the analysis.

The college brought in a consultant who has analyzed college finances and developed strategies for improving stability. Included in these strategies was the need for identification of consistent funding streams for technology, restoring the reserve, preparing for negotiations and utilizing grant funding.

Conclusions

While the college has identified areas where they lack staffing in the technology area, many needed positions have not yet been budgeted. The review seems to have been limited to the technology area. The college should expand their review to include all staffing considerations for existing and new buildings, including maintenance staffing.

Please see the report of progress on Recommendation 6 for additional information related to college efforts to stabilize the budget.

The college has begun initial steps aimed at addressing Recommendation 3 by identifying strategies for stabilizing the financial base and funding needed positions. However, the recommendation is not yet met.

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

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

Observations

The college has initiated an extensive effort aimed at the development of Student Learning Outcomes (SLO’s). Faculty have attended regional and national conferences, and experts in the field have been consulted to assist in this endeavor. Faculty are receiving stipends totaling $150,000 to work on SLO’s and course revision. This is a one-time expense.
The structure of the Student Learning Outcomes Assessment Committee has been changed to clarify its governance status and to include faculty leaders.

The college has created institution-level SLO’s. They are discussing how to link SLO’s to the Program Review cycle.

They have begun using a database that keeps track of the courses that have gone through the curriculum review process. All revised courses submitted to the Curriculum Committee include newly-developed Student Learning Outcomes.

The college has purchased CurricUNET, an automated curriculum program, which will enable faculty to update SLO’s online.

Conclusions

While the process of developing student learning outcomes has been initiated and has institutional support, the college has extensive work to complete before the recommendation is met. The team did not find a clear timeline in place to achieve proficiency, and the college did not provide the team with a long-term plan for sustainability once the faculty stipends are no longer offered.

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

Observations

The college has established a database that keeps track of the courses that have gone through the review process. Approximately 300 courses have been reviewed, out of a total of 1400.

At the fall, 2007 convocation, the faculty identified courses to delete and inactivate, determined a schedule for revision of degrees impacted by course deletions, inactivation and revision, and set a schedule of course revisions. The college has the goal of completing those revisions by February, 2008.

The college is currently revising approximately 20 courses per week. The college reports that it will meet the March deadline for revision of courses and that the next catalog will contain accurate information on courses and programs.
Conclusions

The process for course outline review and revision is impressive. The college has made progress toward addressing Recommendation 5, but it is not yet fully addressed.

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

Observations

The college has hired a forensic consultant to review its budget and its processes. The consultant has identified a series of strategies aimed at stabilizing the financial situation. These include the following:

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

The college has implemented “Salinas Valley Vision 2020,” which analyzes the region’s educational needs, in partnership with business and government leaders. This analysis will inform the Hartnell College Educational Master Plan and potentially assist in development of programs that are aimed at the emerging needs to the district.

As a result of the “Salinas Valley Vision 2020” study, the college is expanding its agriculture programs and creating an Agricultural Business and Technology Institute.

The college is implementing a guaranteed course schedule for spring, 2008, which they believe will boost student enrollment.

The college is depending upon a number of factors as it attempts to restore fiscal stability. They are expanding facilities on the East Campus, which they expect will result in increased enrollments in vocational programs, ESL and general education. The college has set up advisory committees of industry leaders though the Foundation, which they believe will assist with funding and equipment donations. The new Agriculture Business and Technology Institute is expected to have large enrollments. The college is looking
into developing the noncredit program, enhancing basic skills, and coordinating admissions and outreach.

The consultant will produce a Financial Realignment Plan that will guide the college as it attempts to restore a solid financial base.

Conclusions

The comprehensive visiting team was concerned that the college has been in a pattern of declining enrollments and deficit spending for a number of years. This concern is shared by the Progress Report team, who note that a $1.3 million deficit is projected in the current year. It is unclear if the strategies developed to reverse the deficit spending pattern will be successful.

The college is taking steps toward meeting Recommendation 6, but it has not yet fully addressed this recommendation.

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

Observations

The college has initiated a course of action aimed at adding student learning outcomes to each course. The college reports that program-level outcomes will be published in the spring catalog and online on the college web site. The college reports that they are planning to systematically examine student learning outcomes at the course, program and institutional levels. A “sampling plan” has been developed that will compare outcome data across three primary segments: time (day vs. evening), location (on campus vs. off campus) and modality (traditional classroom vs. distance learning). Institutional level outcomes will be measured across program by looking at data by credit hours attained, with the purpose of demonstrating that those who complete more credit hours will attain a higher level of performance on learning outcomes than those who complete fewer credits. The college reports that the results of these comparisons will be widely disseminated and used as benchmarks for improvement.

Conclusions

The college has made initial progress toward addressing Commission Concern 2. It is clear that there has been a positive change in campus culture, and that dialogue concerning student learning is central to that change. However, extensive work needs to be done to meet the Commission expectations by the March 15 deadline.